

# Information-field differentials and HIV/AIDS

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## Abstract

*This paper aims at filling identified perspective-cum-analytical-framework gap on sexuality-risk analysis between mobile and immobile population groups. It originated from a multi-dimensional study on itinerancy-cum-sexuality-risk study on Lagos, Nigeria, which employed stratified random sampling. It compared the subscription levels of two mobility-differentiated trader-groups to local sexuality-risk notions given their assumed theoretically-differentiated information-fields. The first analysis compared the study populations' HIV/AIDS' awareness-duration profiles, as well as their risky-sexuality-condoning notional inclinations. Thereafter, it contrasted their categorized hearsays and notions. Further analyses compute and compare their respective notional-transition scores before examining how HIV/AIDS' awareness-duration associate with current notional stances. Among other findings, the mobile group exhibit earlier access to HIV/AIDS information, but differs in the degree to which the time-awareness advantage stimulates them towards health-conducting/safe-sexuality notions. Discussion of policy-cum-research findings followed.*

**Keywords:** Information-field, sexuality-notions, HIV/AIDS, circulators, non-circulators,

## Resume

*Cet article comble une lacune identifiée dans le cadre d'analyse des littératures disponibles sur le risque sexuel entre les populations en mouvement et celles demeurant en place. Notre motivation provient d'une étude sur le cheminement du risque sexuel à Lagos au Nigeria. La méthode adoptée est l'échantillonnage aléatoire stratifié. Elle a permis de comparer les niveaux d'adhésion de deux groupes distincts de commerçants et leur compréhension des notions de risque sexuel vu leur supposé différence théorique des informations du terrain. Un tableau qui dépeint la durée de l'état de sensibilisation au VIH/SIDA des populations d'étude précède l'analyse du risque sexuel encouragé par des penchants imaginaires. Cette analyse classifie et fait ressortir les échos et les croyances des populations sondées. Des études approfondies exigent le calcul et la comparaison des points imaginaires de transition. La durée de la sensibilisation contre le VIH/SIDA n'échappera pas à notre examen. Nos résultats ont montré que la population mobile a un accès facile aux informations sur le VIH/SIDA. Cet avantage n'est pas pour un atout pour se protéger contre le fléau. Enfin, les résultats utiles de la*

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*recherche seront amplement discutés.*

**MOTS-CLES** : information-sur-le-terrain, croyance-sexuelle, vih/sida, circulation-non circulation

## **Introduction**

The theoretical perspectives and the analytical framework employed so far in the treatment of themes on sexually transmitted infections (STI), since the appearance of HIV/AIDS, and in the context of spatial population mobility appear inexcusably partial. The observed bias is rather surprising in view of the array of conceptual purviews that population mobility analysts can employ to contribute extensively to the many-sided connections between human sexuality and itinerancy. The extant conceptual purviews have concentrated preponderantly on the question of whether or not mobility or itinerancy triggers greater vulnerable sexuality at the expense of other equally relevant perspectives. As it were, the theoretical supposition in migration studies which stipulates that social anonymity consciousness of mobile persons, instigates them unduly towards loose sexuality seems to have overwhelmingly influenced the orientation of research on 'itinerancy and sexuality, even in the context of HIV/AIDS.

The fact that social anonymity constitutes a potential factor that may instigate riskier sexuality on the part of the mobile individuals, either in their origins or destinations, than their respective immobile population counterparts is indeed not in doubt. There are however, other conceptual purviews in mobility analysis besides anonymity, in the context of which analysis of risky-sexuality or its correlates, between spa-

tial-mobility-differentiated groups may produce different outcomes than expected. Indeed, such purviews, given their prospects at improving our understanding of how risky-sexuality outcomes may vary as analytical perspective varies, deserve equal attention of research.

One of such relevant concepts which offer viable analytical construct for sexuality research between mobile and immobile population is that of information-field. Information field in this context is a conceptual adaptation of Marble and Nystuen (1963). In the present context, it refers specifically to the measurable geo-social space in which individuals operate and derive specific knowledge data or information on diverse issues, including those that provoke public controversy. In such a setting, it would be reasonable to expect that the quality attributes of information on specific controversial issues may change, as one moves across geo-social spaces. Differences in the quality attributes of such information in this context refers to whether they promote the imbibitions of positive or negative notions and or practices, with reference to any topical and controversial issues that affect the people's well-being such as the HIV/AIDS.

A valid theoretical inference from the above is that movers are expected to possess wider information-fields than non-movers. Such a wider information field which is a product of wider socialisation should invariably facilitate the process of diffusion as envisaged in the

migration-diffusion analysis. The benefit of a wider social interaction space is expected to enrich the information-asset status of movers' information fields and perhaps significantly differentiate them from those of the non-movers.

Another inference which emerges is that as the dominant perspective employed in the analysis of mobility and sexual behaviour changes, the degree of importance attached to the various themes competing for analytical attention may change. For example, the dominant inspiration of the social anonymity perspective in contrast to say, that of differential information-fields, appeared to have restricted the nature and the depth of themes examined in sexuality analysis involving mobile and immobile groups. Specifically, the degree and the dimensions of research on sexuality-related concepts, such as hearsays and notions, which may further illuminate our knowledge on the differential vulnerability of mobile and immobile groups to risky sex, have suffered much neglect.

The above clarification on sexuality-research purviews is very germane, given that a good number of studies (Awusabo-Asare *et al.* (1999), Orubuloye *et al.* (1999) have indicated that traditional notions might have been the major barrier to HIV/AIDS-related sexual behavioural change in different African societies/communities (or information fields) until recently. Despite their repeated documentation, researchers on population mobility and risky sexuality, especially those which compared mobile and non-mobile population groups have to a large extent limited the treatment of this theme in

their analysis. The implication is that a perusal of researches on population mobility and risky sexuality shows that at least two analytically- and policy-relevant themes on risky sexuality have either been grossly omitted, or at best, glossily treated.

One, empirical researches have not substantially examined whether or not the information resource-profiles of mobile and immobile population groups differ significantly; specifically with reference to their respective first-time-ever awareness of HIV/AIDS and the quality attributes of received-information at moderating risk-escalating opinions and notions on HIV/AIDS. Two, the failure of research to address the question of information-advantage differentials, explains why it inadvertently omitted to analyze the possible implication that such hypothetical differentials may have on the degree of compliance or non-compliance of both groups with HIV/AIDS' safe-sex policy prescriptions.

This present contribution, while intending to fill part of the observed conceptual-analytical gap, will however, limits its focus to the first of the two omitted issues highlighted above.

## **Aim and objectives**

This paper compares the pattern of notional inclinations on HIV/AIDS by two mobility-differentiated trader groups, in Lagos, Nigeria, in the context of their differentiated information-fields and its implication on compliance with safe sexual-health prescriptions. The first of the two groups comprises traders who travel to international destinations either to purchase or sell their merchandise or both (the circulators), while the second group refers to trad-

ers that conduct their trading activities wholly within Nigeria and are based in Lagos (the non-circulators).

To achieve the stated aim, the study will undertake the following objectives:

- (i). Determine whether or not significant differences exist between the mobile and the non-mobile groups with reference to their indicated first-time awareness of HIV/AIDS.
- (ii) Examine and characterize the classes of hearsays which dominate each group's information-field, and the extent to which it appears to associate with their notional inclinations on HIV/AIDS and
- (iii) Determine the nature of relationship existing between the time-specified pattern of HIV/AIDS awareness and the degree of HIV/AIDS' risk-escalating notions imbibed by both parties.

## **Literature review and conceptual framework**

Analyses of the linkages between population mobility and diffusion and the socio-economic-cum ideational transformation they engender abound both in theoretical and empirical study formats. Explicit in the works of Rogers (1962 and 1963) is that mobile population groups constitute a major communication channel through which new ideas are formed or older development-constraining ones jettisoned or modified. Studies by economists such as Borjas (1995), Duncan (2008), Ozgen, *et al.* (2010), Ozgen, *et al.* (2011) etc., are examples of how micro- and macro-economic import of population mobility have been examined in different contexts.

Indeed Mabogunje's (1970) view

that spatially-mobile population groups, as migrants or returnees, can engender meaningful changes in ideas, norms, behaviour and practices, given their wider exposure than their poorly-mobile or non-mobile counterparts, has been attested to in separate studies respectively by Sutton and Makiesky (1975) and Bernard and Comitas (1978). The former study carried out in a Babardian community, observed that returnee migrants had acquired new beliefs and values, in addition to having greater racial and political consciousness. Theoretically, the transformation-minded mobile individuals rationally sifts through the larger mass of information available to them to effect meaningful changes in the extant socio-economic ideas, beliefs and practices either in their origins or places of sojourn.

While this perspective appears to have been gainfully employed in the analysis of economic issues, its application to sexuality studies has been rather scanty, both in coverage and in the depth of analysis. For example, a fairly representative sample of researchers that examined the issue of population mobility on sexual behaviour-cum-infection such as Brummer (2002) Parrado, *et al.* (2004), Parrado, *et al.* (2010), Brockerhoff and Biddlecom (1999), Lurie, *et al.* (1997), Painter (2007), Organista, *et al.* (2000), Lurie M. (2000), were preponderantly interested in examining the phenomenon of superseding sexuality risk of migrants compared to non-migrants. Indeed, a few of them such as Lurie *et al.* (2003) and Kaler (highlighted the underpinning factors, which included some elements of beliefs about the efficacy of condom,

generally, however, the depth of their coverage of the contentious traditional notions or beliefs is rather, weakly penetrative.

Furthermore, the few studies which examined the relevance of traditional notions or beliefs as constraint to HIV/AIDS-related interventions did so largely for populations those were undifferentiated by migration. In the few cases which contrasted migrants and non-migrants the operationalization and the analytical framework employed in the treatment of traditional or customary notions were not penetrating enough to advance the frontier of knowledge.

To be specific, analyses of the drivers of sexual behavioural risk since the advent of HIV/AIDS have reported the prevalence of traditional notions which tend to strengthen the force of cynicism against the acceptance of official policy pronouncements on HIV/AIDS. Caldwell, Orubuloye and Caldwell (1999) reported some dominant notional strands, which constrain the degree of acceptance of the sexual reorientation policy. In their study, one-fifth of respondents ascribed supernatural element to HIV/AIDS. This is somewhat related to the second notion, which holds that western medicine does not have the capability to diagnose and treat certain diseases especially those affecting the reproductive organs; which many believe require the special attention of traditional medication and divination.

The third notion was that of destiny (Awusabo-Asare, *et al.* (1999)). Adherents of the notion believe that death causes are pre-ordained and those who are destined to die by HIV/AIDS are not

likely to escape that means of exit no matter how cautious they are. Thus any acceptance of the sexual behavioural reorientation as canvassed by the HIV/AIDS policy is either a pointless demand or a needless sacrifice. Another idea which could have informed the low level of compliance with HIV/AIDS sexual behavioural campaign is the notion among some African groups that the greater exposure of an average African to a more rustic life and livelihoods give them some measure of immunity advantage over a number of morbidity conditions (Coast, 2005). The various analyses which produced these findings were never conducted to examine whether population mobility and its associated exposure to wider information-fields could differentiate the degree of notional adherence between movers and none-movers, because it never formed part of such studies' objectives.

Apart from these main notions, findings of separate studies by Renne (1996) and Kaler (2004) indicate that intervention policy and or programme, can also suffer rejection when there is skepticism about the true motive behind such interventions. In the course of the reconnaissance for the present study, this motive-questioning tendency and the notion which it generates particularly with regards to the relevance of HIV/AIDS showed up among the study population. The notion holds that government's interest in HIV/AIDS' programme was insincere and a deliberate diversionary exercise. Generally, their argument was that HIV/AIDS was the government's attempt to look for a programme to divert the people's attention from the intractable eco-

conomic crisis, which she had repeatedly promised to tackle, but had failed since the 80s. To them, HIV/AIDS represents a ploy to exaggerate and turn a non-issue, or at the most, a flimsy problem to a major one, in order to justify their hold on governance. To this school of thought, HIV/AIDS was essentially an exaggerated phantom rather than a real health albatross.

The previous studies reviewed above on notional impedance to HIV/AIDS' intervention, including Awusabo-Asare *et al.* (1999) and Caldwell *et al.* (1999), did not capture this latter dimension of motive suspicion, owing perhaps to differences in the time, location or in the target population of the respective studies. The present analysis includes this missing dimension; first, to determine its prevalence among the study population and to establish a reference point for a future assessment of the role motive-imputation as a constraint to the success of public health policies in Nigeria or elsewhere.

Furthermore, the interests of the various studies cited above on HIV/AIDS-related notional analysis generally do not go beyond identifying them and the degree of their relative prevalence in a given population. None of them have attempted any systematic classification of such notions either for its pure analytical value, or for the purpose of enhancing the effectiveness of specific interventions on HIV/AIDS. In specific terms, they fail to distinguish between what may be termed mere hearsays and deep-seated notions. Besides, the studies by Caldwell *et al.* (1999), Awusabo-Asare (1999) and to some extent Organista *et al.* (1997), which attempted in some details, a catalogue of

notions and or beliefs, did not ascribe weight to them in terms of the degree to which they pose resilient barriers to appropriate intervention.

With reference to the first point on notional categorization, the argument is that besides the more entrenched notions or beliefs that people may have, there are also hearsays or pieces of information on HIV/AIDS which may have comparatively weaker influence on their behaviour than those classifiable as notions. However, regardless of their comparative weakness, hearsays still form part of the information-stuff within an individual's information field, and may, with passage of time, influence his/her chances of subscribing to any of the dominant beliefs or notions on HIV/AIDS. The reality of this differentiation between hearsays and notions, informed the decision to analyze and compare the notional-cum-hearsay characterization of the respective information fields of circulators and non-circulators with reference to HIV/AIDS. .

A clear example which distinguishes hearsays from dominant notions in this context may be illustrated by the claim that HIV/AIDS is caused by witchcraft and another claim that the infection is curable via African spiritual/metaphysical methods. While the appeal of the witchcraft claim may be quite feeble and may vary widely in a given population, it may however; influence the likelihood for some to hold the view that HIV/AIDS requires a spiritual/metaphysical approach, despite their doubt on the witchcraft explanation. It is in this context that this study analyzes respondents' reported hearsays on HIV/AIDS.

The foregoing, in the context of

existing literature, has presented the conceptual- cum-analytical framework for this study, which will among others examine whether indeed the mobile population group differs significantly from its non-mobile counterpart; in terms of their HIV/AIDS awareness time-lines; the extent to which such assumed differentiated information-field translates to differential subscription to local and controversial notions on HIV/AIDS; and the extent to which the two populations achieve some measures of transition in their notional inclinations to date, since first time awareness.

### **Data sources and method**

This paper is an outgrowth of a larger study, part of which has been reported elsewhere. To avoid a complete reproduction of the basic methodological procedure for the entire study, readers are advised to consult Babatola (2011, p.29-31) which discussed salient issues on the selection criteria for the study markets, the procedure for identifying the study groups, particularly the internationally-mobile group, the timing of the fieldwork in view of the mobility engagements of the circulatory traders, sample size determination, the sampling procedure and administration of questionnaire instrument. The presentation in this section in essence is only a summary of the entire methodological procedure employed for the study.

The first exercise entailed a purposive selection of markets in Lagos, in which a given trader falls into the category of travelling (circulatory) or non-travelling (non-circulatory) group. Another criterion was the need to avoid the choice of a market which per-

forms warehousing buffer function for another bigger one, to avoid the event of double sampling. Itinerancy strictly speaking refers only to the event of being involved or not in international and not intra-national commercial trips

Four major markets, namely the Auto Spare Parts Dealers Association Market (ASPADM), the Alaba International Market, noted chiefly for electrical and electronics; Balogun International Centre for Commerce, dominated by a varieties of imports such as processed foods, pharmaceuticals and cosmetics; and the Oyingbo White Sand Market dominated by the sale of food commodity imports from different parts of the West Africa region met the set criteria for selection. Subsequent procedures culminated in the administration of 900 questionnaires, 450 apiece to the circulators and non-circulators respectively.

### **Research variables and analysis**

Three sets of variables were relied upon in achieving the aim and objectives of this study. The first analysis which evaluates whether circulators are indeed advantaged on the basis of their initial awareness-time of HIV/AIDS statistically classified both groups into early-knowers and late-knowers respectively and compared them, employing the t-test statistic. Further analysis entails the characterization of the numerous hearsays in their respective information-fields into four categories to achieve parsimony and obtain a standardized basis for comparison. Specifically, the various hearsays on HIV/AIDS were classified into four, namely, 'inaccurate and liable-to spread HIV/

AIDS'; 'inaccurate but neutral to HIV/AIDS spread'; 'accurate and HIV/AIDS-suppressing'; and finally 'accurate and neutral to HIV/AIDS spread'.

The third analysis assesses whether initial notional inclinations changed positively or otherwise over time, given the benefits of differential access to newer and better information by both groups; most especially the circulators that are presumed to possess wider information-fields. To achieve this objective entailed among others, the computation of a net notional transition score respectively for both population groups for comparative analysis.

### **Computation of notional transition scores**

Respondents were presented with five primary notions and were to indicate their positions on each of them as at the point of their initial awareness of HIV/AIDS. Two other somewhat modified but similar questions were posed later in the questionnaire to capture their current notional stance on HIV/AIDS. The computation of the net notional transition score involved the following procedure. The percentages of each of the two groups that responded 'Yes' and 'No' respectively to each of the five initial-reaction notions were cross-analyzed respectively with two other notional expressions that were designed to gauge their current notional stances.

Specifically, the idea that *HIV/AIDS is a spiritual rather than a medical problem* as well as the notion of *self-immunity predicated, on individual's destiny* were the only two notions selected to gauge their current notional stance. In other words, the percentages of the 'Yes/No'

responses obtained for example under the initial-time notion that *African medicine can prevent HIV/AIDS*, are cross-tabulated respectively with the two selected current-time notional variables to determine the percentages of those who have changed either from 'Yes' to 'No' or vice-versa. Respondents who changed their view from 'Yes' to 'No' are categorized as positive transition, in the sense that they crossed from a 'risk-aggravating' response of a particular notion to 'risk-abating' response of the given current-time notion. On the other hand, those characterized by negative transition are those who in their initial opinions on a notion identified with a 'risk-constraining' option, but changed under the current-time notion to a 'risk-aggravating' option. The relative degrees of positive and negative transitions achieved between the two cross-analyzed notions are quantified respectively in percentage terms. In addition, a net transition score which shows the difference between the positive- and the negative-transition percentage scores is obtained for each cross-tabulated relationship as a summary measure.

In essence, a net transition index of zero shows that the percentages of those who moved from risk-escalating response (Yes) on the initial-time notion, to risk-diminishing option (No) on the current-time notion (a positive transition), and those who moved from risk-diminishing to risk-escalating options (a negative transition) are equal. A negative net transition score shows that a greater percentage changed their opinions from risk-diminishing option on the first notion to a risk-escalating option in the recent



notional variable. On the other hand, a positive net transition score indicates that a greater percentage changed from a risk-escalating option to a risk-diminishing option. The implication is that whichever of the two groups has a higher net transition score on a given pair of cross-analyzed notional variables, achieves a better transition than the other.

## **Results**

### Basic bio-social characteristics of Circulators and Non-circulators

A comparative analysis of the basic bio-social attributes of the two population groups shows some measure of contrast. A very distinct attribute of the two population groups is the overall domination by the male gender irrespective of circulation status. Male constitutes 89.6% of circulators and 95.1% of non-circulators. The preponderance of male should be understood in the context of the major ethnic group which dominates this commerce and the nature of the merchandise involved. In the first case, majority of the traders irrespective of their circulation status are Igbo, among whom trading as an occupation is heavily dominated by the male; except when the items involved are non-durable retail consumer-goods, in which female involvement could be substantial.

The age profile shows that the circulators are generally older than the non-circulators. The Mean and the median ages of the circulators are respectively 36.3 and 36 years, which contrast significantly with 31.9 and 31 years respectively among non-circulators. Older ages of circulators than non-circulators is logical when it is

understood that circulators are generally those who had started originally as non-circulatory traders, but moved up to become circulators after having saved enough capital to enable them partake in the international dimension of commerce. A major implication of this is that a large percentage of non-circulators (46.7%) than circulators (28.2%) have low-worth investments, which do not exceed N500,000/\$4000 in value, while the circulators (42.2%) more than non-circulators (29.6%) dominate the high-worth investment (N1,000,000/\$8000).

The marital status profile also exhibits to a large extent the observed difference in their respective age patterns, as a greater proportion of circulators (59.1%) than non-circulators (37%) are married. Both groups are dominantly Christians, exceeding the 95% mark in both cases. A greater percentage of circulators have attained higher education status. For example while 22.4% of circulators have Post secondary/Tertiary education, only 11.6% have done so among non-circulators. Longer business experience durations characterize also the circulators than non-circulators. At least, 48% of circulators have been in business for between 12 -32 years in contrast to 21.2% of non-circulators. The next analysis compares their first-time awareness/knowledge of HIV/AIDS.

### Temporal pattern of first-time awareness of HIV/AIDS

Table I shows the temporal pattern of first-time awareness of HIV/AIDS respectively by the two groups. It is interesting to note that the percentage of circulators that could recollect the year of first-time awareness is higher

among circulators (95.3%) than non-circulators (89.9).

**Table I** HIV/AIDS Awareness Duration Pattern (Circ. & Non-Circ.)

HIV/AIDS-Awareness Duration Categories (in Years)	Circulators		Non-Circulators	
	No	%	No	%
0 – 5 (more-recent knowers)	51	11.9	102	26.1
6 – 10(recent knowers)	109	25.4	193	49.4
11 – 15(media-time length knowers)	169	33.4	60	15.3
16 + (long-time duration knowers)	90	20.9	36	9.2
Total	429	95.3	391	86.9
Missing	21	4.6	59	13.1
<b>T-test results: (N/Mean)</b>	429/11.53		391/8.19	
<b>Calculated t-value/Mean diff/ (df)</b>			10.70/3.34/818	
<b>Std. Error diff./sig. Level(<math>\infty</math>)</b>			0.22/.001	

Far fewer circulators than non-circulators are concentrated in the recent and more-recent time durations of HIV/AIDS 'knowers'. Cumulatively, 37.3% of circulators belong to the *recent* and *more-recent* time categories against a far larger percentage (75.5%) of non-circulators in the two categories. The percentages of circulators respectively in both the *medium-time* and *long-time* durations exceed their comparative values respectively for non-circulators. In both duration-awareness categories, circulators have a percentage value of 54.3% compared to 24.5% of non-circulators.

The t-test result in the table shows that the circulators' awareness duration advantage of 3.34 mean years is highly significant. This implies that being a circulator predisposes one indeed to get to know of HIV/AIDS earlier than non-circulator.

### Information-content analysis of circulators and non-circulators on HIV/AIDS

It is assumed that individuals' likelihood to subscribe to any of the major notions on HIV/AIDS could be influenced somehow by the content characterization of the various hearsays on HIV/AIDS which tend to dominate their information field. Hence, each respondent was asked to list four ideas or hearsays, besides the specified notional claims on HIV/AIDS which she/he was conversant with at the early period of HIV/AIDS awareness. A sample of few such hearsays touch on the agency of HIV/AIDS transmission, which some attribute to monkey, and some to mosquitoes; some to handshake; some to kissing; some to drugs; some to unprotected sex; some to witchcraft, etc.

**Table 2** Information-content analysis of HIV/AIDS hearsays (circulators and non-circulators)

Grouped Information or hearsays	Circulators				Non-circulators			
	Inaccurate (liable to spread HIV/AIDS)	Inaccurate (neutral to spread HIV/AIDS)	Accurate (HIV/AIDS Controlling the spread)	Accurate (HIV/AIDS Neutral to spread)	Inaccurate (liable to spread HIV/AIDS)	Inaccurate (neutral to spread HIV/AIDS)	Accurate (HIV/AIDS Controlling the spread)	Accurate HIV/AIDS Neutral to spread
	%	%	%	%	%	%	%	%
1 <sup>st</sup> major hearsay	15.1	9.7	51.9	23.5	82.6	2.4	6.4	8.6
2 <sup>nd</sup> major hearsay	19.9	41.0	11.0	28.1	7.3	82.2	4.7	5.8
3 <sup>rd</sup> major hearsay	17.1	27.0	26.3	29.5	6.4	6.7	82.1	4.8
4 <sup>th</sup> major hearsay	47.5	22.8	11.1	18.6	5.7	11.7	4.9	77.7
1 <sup>st</sup> Mean (%)•	24.9	25.0	25.1	24.9	27.0	25.6	24.5	22.4
3 <sup>rd</sup> Mean (%)••	25.1				24.5			

The **1<sup>st</sup> Mean** represents the mean of the 4 percentages obtained on 'inaccurate and liable to spread HIV/AIDS' hearsays calculated across the four questions

•• The **3<sup>rd</sup> Mean** represents the mean of the 4 percentages obtained on 'accurate and HIV/AIDS-controlling' hearsays calculated across the four questions

In Table 2 the various reported hearsays have been grouped first into two categories, indicating whether or not such hearsays are accurate or inaccurate. Second, they are further classified based on what would be the outcome of someone believing and acting on the prompting of such hearsays. Three major classes emerge from the classification, namely, aggravating the spread HIV/AIDS (liable to spread HIV/AIDS), constraining the spread (controlling the spread), and neutral to its spread (neutral to spread). Of the three alternatives, however, the risk-aggravating and the risk-constraining options respectively, are more fundamental to the question of achieving the sexual health goal of HIV/AIDS policy. The accurate-neutral and inaccurate-neutral hearsay options do not fundamentally alter the chances of the risk of the sexual infec-

tion. The primary focus of the analysis in this section is therefore on the two critical information options, that is, the risk-aggravating and risk-constraining hearsay categories. Although the percentage values of categorized hearsays show some notable sequential and intra-group variations, the degree of observed variations reduced appreciably when the four hearsays are summarized statistically. For example, the percentage of circulators that reported a 'liable to spread HIV/AIDS' hearsay varies from 15.1% on the first hearsay to 47.5% on the 4<sup>th</sup> hearsay. Similar pattern characterizes the reported hearsays by the non-circulators; for which the minimum percentage of 'liable to spread HIV/AIDS' is 5.7% (fourth hearsay) and the maximum 82.6% (first hearsay). Notwithstanding, it is noteworthy that for the circulators, the dif-

ference between the statistical summaries of the 'inaccurate and liable to spread HIV/AIDS' hearsays (24.9%) and the 'accurate and risk-constraining' hearsays (25.1%) is somewhat negligible. For the non-circulators, the corresponding summary percentages show a greater degree of divergence being 27.0% and 24.5% respectively. It is also interesting to note that both in absolute and relative terms the average percentage value of the risk-accentuating hearsays is lower among circulators. In like manner, the mean percentage score on 'risk-constraining' hearsays achieved by circulators (25.1%) also exceeds the mean of 24.5% obtained by the non-circulators. The obtained pattern shows that circulators' information content on HIV/AIDS is more balanced than the non-circulators'. One of the major research questions which derive from the above observation is whether or not the observed differences in any way influence the degree and pattern of notional adherence between the two population groups. The next section addresses this research question.

### Subscription patterns to

### dominant HIV/AIDS-related sexuality notions

Five specific questions in the questionnaire were expressed in statement forms to capture the five reported dominant notions that could frustrate the degree of compliance with prescribed sexuality policy on HIV/AIDS. The five questions sought to know their personal notions on HIV/AIDS, aside from the various hearsays, specifically at the time of their first awareness of the infection. The five questions as highlighted in Table 3 are: one, whether in the early days of their awareness of HIV/AIDS, they believed that HIV/AIDS could be prevented by African medicine (Africa medicine can prevent); two, whether they had the notion that HIV/AIDS could be cured somehow by African medicine (African medicine can cure); three, whether they considered HIV/AIDS' as a destiny matter (HIV/AIDS is destiny); the fourth was if they considered the epidemic a spiritual/metaphysical rather than a medical problem (HIV/AIDS spiritual) and fifth, whether they consider governments' efforts as diversionary (HIV/AIDS policy diversionary).

**Table 3** Pattern of subscription to HIV/AIDS Notions (Circulators and Non-circulators)\*

Specified dominant notions	Circulators		Non-circulators	
	YES	NO	YES	NO
African medicine can prevent HIV/AIDS	130 (28.9)	311 (69.1)	124 (27.6)	304 (67.6)
African medicine can cure HIV/AIDS	189 (42.0)	255 (56.7)	130 (28.9)	300 (66.7)
HIV/AIDS is destiny	59 (13.1)	384 (85.3)	52 (11.6)	383 (85.1)
HIV/AIDS is spiritual/metaphysical	47 (10.4)	396 (88.0)	33 (7.3)	398 (88.4)
HIV/AIDS is a diversionary policy	24 (5.8)	419(95.1)	26 (8.9)	399 (71.1)

\*The figures in the parenthesis are the percentage equivalents of the indicated number of respondents

Table 3 shows the pattern of subscriptions to dominant HIV/AIDS-cum-sexuality notions by members of the two population groups. Some patterns appear common to both groups of traders. Four major observations summarize the content of Table 3. One, the percentages of those who associated with the notions are remarkably lower than those who disassociated, except for the question on African medicine being able to cure HIV/AIDS, where the gap between 'Yes' and 'No' by the circulators is appreciably closer than the rest. Two, apart from the question on the HIV/AIDS-curative efficacy of African medicine in which the difference between the notional adherents in the two groups was 13.1%, the magnitudes of their differences on other issues were rather moderate, varying between 1.3% and 3.1%. Three, the circulators consistently had the larger percentages of respondents that chose the 'Yes' option. Four, while the circulators had their minimum 'Yes' response on the issue of government insincerity (5.8%), the non-circulators had its lowest 'Yes' under spiritual/metaphysical option (7.3%). The above analysis captures the notional stances of both groups at their first-awareness of HIV/AIDS. It is expected that over time the process of enlightenments and or education may culminate in notional transition, changing from being an adherent of risk-accentuating to a risk-diminishing option. The next section examines this dimension of the objectives.

### **Transition in notional adherence patterns (circulators and non-circulators).**

Table 4 compares the pattern of transition in notional adherence of circulators

and non-circulators respectively. The analysis cross-tabulates each of the five initial-time notions with two selected current-time notions. A number of observations emerge clearly in the pattern of positive and negative transitions, and to a large extent, such observations seem to apply to both population groups. First, the percentages of those involved in positive transition when compared to those in negative transition are greater only in respect of the two notions which ascribe 'preventive' and 'curative' capabilities respectively to African traditional medicine over HIV/AIDS. Among the circulators for example, 23.9% of those who at the point of their initial awareness, opined that HIV/AIDS could be prevented by African medicine, gave a contrary opinion.

The results obtained in the cross-analysis of circulators' initial notions on the 'preventive' and 'curative' statuses of African traditional medicine, with the two current notions on 'spiritual/metaphysical status' and presumed 'self-immunity' were almost wholly replicated by the non-circulators. However, while the circulators achieved larger net transition scores (24.6% and 24.3%) in the pairings involving the 'efficacy of Afro-medical preventive option' and the two current notions on the 'HIV/AIDS' spiritual/metaphysical status' and 'presumed self-immunity' respectively, the non-circulators' net-transition scores (17.4% and 14.4%) were comparatively larger on the pairing involving 'Afro-medical-curative' and the two current-time notional variables.

The orientation of change between each of the three remaining initial notional variables, namely, 'destiny',

‘Spiritual/metaphysical status of HIV/AIDS’ and ‘HIV/AIDS diversionary strategy’, and the two current-time notional variables.

**Table 4** Transition and Comparative Notional Transition scores\*\* (Circulators & Non-circulators)

Cross-tab Initial Notion by Current notion	Circulators			Non-circulators		
	Transition			values		
	Positive Transition (%) (a)	Negative Transition (%) (b)	Net score (%) (a-b)	Positive Transition (%) (a)	Negative Transition (%) (b)	Net score (%) (a-b)
AFRO-MEDICAL- PREVENTIVE vs SPIRITUAL	23.9	12.3	11.6	25	7.6	17.4
AFRO-MEDICAL- PREVENTIVE vs IMMUNITY	22.7	11.6	11.1	23.8	9.4	14.4
AFRO-MEDICAL- CURATIVE vs SPIRITUAL	33.6	9.0	24.6	26.3	7.5	18.8
AFRO-MEDICAL- CURATIVE vs IMMUNITY	34.5	10.2	24.3	25.5	10.6	14.9
DESTINY vs. SPIRITUALITY	9.7	14.2	-4.5	8.9	9.4	-.5
DESTINY vs. SPIRITUALITY	10.4	15.3	-4.9	5.9	10.8	-4.9
HIV SPIRITUAL vs. SPIRITUAL	5.4	12.2	-6.8	3.4	7.5	-4.1
HIV SPIRITUAL vs. IMMUNITY	7.7	16.3	-5.6	3.4	11.8	-8.4
GOVT_HYPO vs. SPIRITUAL	5.0	17.4	-12.4	1.0	6.7	-5.7
GOVT_HYPO vs. IMMUNITY	4.5	17.4	-12.9	0.7	10.5	-9.8

KEYS: **AFRO-MEDICAL-PREVENT** = African medicine can prevent HIV/AIDS **AFRO-MEDICAL-CURATIVE** = African medicine can cure HIV/AIDS **DESTINY** = HIV/AIDS is destiny **HIV SPIRITUAL** = HIV/AIDS is spiritual/metaphysical **GOVT\_HYPO** = HIV/AIDS is government's diversionary strategy, **IMMUNITY**: Irrespective of my sexual life I feel immune to HIV/AIDS; **Vs** = Versus.

\*\*\*For each pairing of initial notion and current-time notion, the difference obtained when the sum of the positive and negative score values is subtracted from 100% gives the percentage of those who responded NO to the initial notion and maintains that same response on the current-time notions; indicating the event of no notional transition.

### Awareness duration and current notional inclination

Analysis of changes in notional inclination shows that both positive and negative transition occurred between the initial-time and current-time awareness of HIV/AIDS. One of the major factors which may influence ones' notional stance or its revision is the difference in

the time frame over which individuals' knowledge of and familiarity with the problem of HIV/AIDS becomes updated through the process of reappraisal.

Table 5 therefore, in fulfilment of one of the study objectives, examines whether or not the time of first-time awareness of HIV/AIDS could provide

some clues on respondents' current positions on the spiritual/metaphysical and self-immunity notions respectively. Results in the Table show that the current response pattern to the notion of HIV/AIDS as 'spiritual/metaphysical' by circulators does not indicate the beneficial influence of early awareness, as expected. For example, 18.7% of the early-knower group still associate spiritual/metaphysical cause/cure phenomenon with HIV/AIDS, in contrast to

16.4% of the recent-knower group. However, the apparent lack of a beneficial advantage of awareness-duration observed in this case is statistically insignificant; implying the possibility of a mere chance occurrence. The pattern however changed with the non-circulators, among whom only 8.6% of the early-knowers in contrast with 20.8% of the recent-knowers ascribe HIV/AIDS, the result being very significant.

**Table 5** Awareness duration and Notional revision Pattern I

Current Notions and responses	Circulators			Non-circulators		
	Duration since first-time awareness			Duration since first-time awareness		
	Early Knowers (1)	Recent knowers (2)	Total	Early Knowers (1)	Recent knowers (2)	Total
HIV_SPIRITUAL						
Yes	40 (18.7)	35 (16.4)	75	21 (8.6)	26 (20.8)	47
No	174 (81.3)	179 (83.6)	353	224(91.4)	99 (79.2)	323
Total Decision	214	214 n.s	428	245	135 Sig (.001)	370
IMMUNITY						
Yes	29 (13.6)	49 (22.9)	78	33 (13.7)	25 (20.3)	58
No	185 (86.4)	165(77.1)	350	208 (86.3)	98 (79.7)	306
Total Decision	214	214 Sig (.012)	428	241	123364 n.s <sup>2</sup>	

**HIV\_SPIRITUAL**= HIV/AIDS is spiritual/metaphysical. **IMMUNITY**: Irrespective of my sexual life I feel immune to HIV/AIDS. <sup>1</sup>The initial 4 categories of HIV/AIDS awareness duration were collapsed into 2 for a more manageable analysis. **n.s**<sup>2</sup> The obtained result using the 4 duration time format was however significant

The pattern of response to presumed immunity to HIV/AIDS shows a stronger sensitivity of awareness duration for both groups. Specifically, a comparatively small percentage (13.6) of' early-knowers circulators feel they are immune to HIV/AIDS in contrast to a larger percentage (22.9) of its recent knower group who hold that notion, The observed difference is highly significant. The same pattern also character-

ized the non-circulators, except that the obtained result narrowly missed being significant.

## Discussion

A number of findings emerged in the context of the set objectives for this study which merit further discussion. One, of them is that the mobile population enjoyed the advantage of earlier

awareness of HIV/AIDS than their immobile counterparts. Two major inferences may be drawn from the pattern. One, their involvement in international travels no doubt exposes them to better opportunities of knowing about the sexual epidemics earlier than their immobile counterparts. Two, the effect of their wider geo-social space of interactions no doubt accounts for the more-balanced pattern of their hearsays on HIV/AIDS than the non-circulators. This explains the slight difference between 'risk-constraining' and 'risk-accentuating' hearsays among circulators (0.2%), in contrast to (-2.5%) among non-circulators. The negative value registered by the non-circulators shows a preponderance of risk-accentuating hearsays compared to the circulators, which recorded a very minor, but positive margin of difference. Both findings tend to confirm the views of notable migration scholars such as Mabogunje (1970), who posits that migrants have the advantage of exposure to development-conducting ideas and information, Often what is lacking is either the will or an enabling environment.

Findings on notions, in particular, held-notions at the time of initial awareness of HIV/AIDS however, show that the mobile group exceeded the immobile group in the degree to which they imbibed risk-prone notions, except on the singular notion of government's insincerity. While the pattern appears curious, perhaps an intra-group analysis of variables such as the frequency and pattern of international travels, as well as specific socio-economic attributes of the group may furnish a better understanding of the phenomenon. Inciden-

tally such a task is outside the purview of the present analysis.

With respect to the pattern of notional revision, a number of findings are very pertinent for discussion. First, it appears that the notions which had the weakest hold on the two groups were the preventive- and the curative-efficacies of Afro-medical practices. This explains the occurrence of appreciable positive net transition values in both population groups. The implication is that the hold of these notions are not likely to be as strong as the other notions. Indeed, the higher positive transition percent scores achieved by the circulatory group on the pairing analysis involving 'Africa's curative notion', suggests the possibility on their part of being

The strength of association between duration of awareness and current notional status shows that generally with passage of time, even the die-hard notions will yield ground to consistently relevant campaign and educative machineries. The statistical significance of the results which show that awareness-duration impacts positively on the tendency to hold risk-diminishing notion, and the statistical insignificance of the results which contradict that association, are pointers to the fact that awareness-duration is indeed critical for notional/reorientation in any population.

## **Summary and recommendation**

This study undertook an in-depth analysis of information-fields, hearsays and notions, on HIV/AIDS, against the backdrop of exploring perspectives and analytical framework that had been



sparingly examined in sexuality-cum-spatial-mobility literature, and to show as well how they could impinge on policy and research. The study among others, adapted the concept of information-field. Specifically, it conceptualised it in terms of the local or international nature of one's interaction space, as well as the diversities in the information-content of such a space that could influence individual's decision on any controversial matter such as HIV/AIDS. This study made a distinction between hearsays and notions. The hearsays were classified into four which shows the extent to which they may likely promote, discourage or exert neutral effect on the spread of HIV/AIDS, if imbibed. The result shows that circulators have a more balanced hearsay-spread than non-circulators, evidently, a reflection of their broader exposure through travels. Two sets of notions were analyzed: the first consists of initial-time notions, while the second consists of the current-time notions. Circulators generally showed greater degree of 'risk-aggravating' approval on their initial notions, except on the issue of the sincerity of motive behind government intervention on HIV/AIDS.

Results obtained in notional transition analysis show some interesting patterns, which offer some prospects for policy and research. First, at any given point in time, not all notions are likely to pose the same degree of challenge to a given policy designed to effect behavioural change. Effort is necessary on the part of research to identify the relative resilience of identified notion/beliefs, what correlates with their relative strength and how to tackle them. It may be necessary for example for research-

ers to explore whether certain notions show more resilience in certain geographical or ethnic regions and their possible explanations. Further analysis may involve also the extent to which notional resilience reflects underlying socio-economic differences in a population, with the aim of devising appropriate strategies to tackle them. Some findings in this study have shown some interesting contrasts between mobile and non-mobile population groups, which either confirms or raises questions on some theoretical expectations. For example, while the circulators have early HIV/AIDS' awareness advantage, the pattern is not distinctively clear when the duration of awareness and current-notional stance is considered. The apparent grey area in the latter may be resolved through an intra-group analysis of the mobile population. Such exercise which for instance may assess the role of certain circulation attributes, such as trip/travel frequency, duration of stay, specific international/ interaction engagements and their intensity, etc., in terms of whether or not they exert moderating influence on the observed relationship between HIV/AIDS-awareness-duration and notional revision. Finally, a major lesson that is learnt from the design of this study is the advantage of employing research design which recognises the peculiarities of groups, such as exists between migrants and non-migrants to conduct evaluative researches on behavioural adjustments to specific population policies. Such a design would obviously enhance the chances of designing interventions that are group-relevant with more effective policy and programmatic accomplishments.

### Study limitation

The original plan to analyze the event of notional revision in the context of innovation adoption had to be moderated. The intention at the outset was to determine whether respondents ever held a given notion as at the time of their first awareness of HIV/AIDS; and if so, whether they had since changed their stances on such a notion, and the time they did so. The poor level of response to the question on the time of notional revision – a probable indication of poor memory recall on their part – aborted the use of that design. However, the change in that aspect of analytical design did not entirely abort the main task of determining whether or not the hearsay contents of the two groups' information-fields contrasts meaningfully; and the extent to which the observed differences in their hearsay contents reflect on their respective notional stances on HIV/AIDS.

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