CHAPTER 4: RESULTS AND DISCUSSION

4.1 INTRODUCTION

The sample that was interviewed consisted of five loveLife counselors. These are counselors that help influence adolescents, positively, especially regarding issues which relate to HIV and AIDS. All the counselors have been working at loveLife for a period of between two to five years. Four of the counselors are in possession of a Bachelor of Arts in Social Work degrees (B.A. Social Work), while one has a senior matriculation certificate. In this study, it was important to select counselors that have experience in working with adolescents. Counselors who have experience are able to provide rich information as opposed to those who have worked with adolescents for only a short period of time. As a result, only counselors who have worked at loveLife for more than two years were interviewed.

The purpose of the study, as previously stated, was to explore the loveLife counselors’ perceptions of the impact of HIV and AIDS on the sexual conduct of adolescents. The aim of the study was to find out if adolescents are making use of condoms during penetrative sex, being faithful to one sexual partner or abstaining from sexual relationships. Before the loveLife counselors gave their perceptions on how adolescents conduct themselves sexually, the author thought that it was important for them to give their perceptions on the knowledge of adolescents about HIV and AIDS.
4.2 PRESENTATION OF RESULTS

4.2.1 Knowledge of adolescents about HIV and AIDS

From the interviews with the loveLife counselors, all of them agreed that adolescents are knowledgeable about HIV and AIDS. They mentioned that there is a good response from adolescents regarding warnings against HIV and AIDS. When one of the counselors was asked if adolescents are knowledgeable about HIV and AIDS, he responded by saying:

“Yes, they (adolescents) know about HIV and AIDS. There are factors that are related to HIV and AIDS that they do not know about, but they are aware about HIV and AIDS.”

The counselor further elaborated by saying:

“Basically, I can actually say that 100 % of the people calling us know 80 % of the information that we provide here. They know about HIV and AIDS and they would like to know more about the clinical things about HIV and AIDS, but basic information about HIV and AIDS they do know.”

Another counselor said:

“I mean it’s all over TV, radio, well I know that some of them can’t read, but they can hear from the radio about this thing called AIDS, they have that little understanding about what AIDS is about. At school these days, they also have these life skills subjects where they teach them about AIDS. I think they do know about AIDS.”
When adolescents call loveLife, they only want to improve the information they already have about HIV and AIDS. 50% of the loveLife counselors reported that stigmatization is still the main problem, even amongst the youth that are knowledgeable about the pros and cons of HIV and AIDS.

According to the counselors’ perceptions, adolescents know that HIV is a sexually transmitted infection, meaning that an individual can contract the virus through unprotected penetrative sex with someone who has already been infected. The counselors added that even though this belief was held by the majority of adolescents, there are still a few who think that an individual can get HIV and AIDS through touching, hugging or kissing someone who is already infected. Adolescents are perceived to be knowledgeable about HIV and AIDS, but what are their responses to the HIV and AIDS messages?

4.2.2 Response to HIV and AIDS messages

It appears as though adolescents are paying a lot of attention to the warning messages that they see and hear about regarding the dangers of HIV and AIDS. The counselors further reported that adolescents are taking the HIV and AIDS messages seriously which is why they are changing their attitudes towards condoms and how they express their sexuality. The only problem, though, seem to be around the fact that condoms are not always readily available when adolescents need them.

From the interviews with the loveLife counselors, there seems to be a general perception that adolescents were responding well to the messages they were receiving on HIV and AIDS. All of them reported that adolescents were engaging in safe and protected sex by making use of condoms. Abstinence was not yet seen as one of the possibilities that can be practiced against the spread of HIV and AIDS.
Before exploring the attitudes of adolescents towards HIV and AIDS, the author wishes to explore the infection rates among adolescents.

### 4.2.3 HIV and AIDS infection rates

On the whole, the counselors reported that the HIV and AIDS infection rate had decreased by about 50 - 70 % among adolescents aged between 12 and 17 years of age. One of the loveLife counselors even stated that

“…now only 1 or 3 in 10 are getting infected”.

She further mentioned that

“people who were being infected were those who were getting the information now”.

They placed a lot of emphasis on getting more information on the pandemic as a way of preventing future infections. The decrease in the spread of HIV and AIDS was explained as being due to the fact that the youth are taking part in extra mural activities. 60 % of the counselors emphasized the importance of an open relationship between parents and their adolescents. The counselors reported that HIV and AIDS infections were more prevalent in adolescents who could not freely discuss, with their parents, about sexual matters.

The answers that the counselors gave highlight a decrease of HIV and AIDS infection rate among adolescents. From what the loveLife counselors reported, a large number of adolescents are not contracting the virus anymore as they are taking precautionary measures against HIV and AIDS.
4.2.4 Attitudes towards HIV and AIDS

When the counselors were asked what they thought the general attitudes of adolescents are towards HIV and AIDS, the general response was that adolescents are fearful of the virus. Adolescents are perceived to be mostly fearful about the stigma that people have attached to HIV and AIDS. One counsellor responded by saying:

“… all in all I can say that their (adolescents’) behaviour has changed; they have changed their (adolescents’) behavior towards sex, like most of them can tell you that going through an HIV test is difficult, that’s the one thing that they fear the most. Also the stigma surrounding the HIV issue, that’s the one thing that makes them fear, that’s the other thing that keeps them to be more careful and takes the ignorance away, if I can put it like that.”

Even though the loveLife counselors did not all agree on the percentages of adolescents who are taking the HIV and AIDS messages serious, there was a consensus that adolescents’ attitudes have changed as regards how they expressed their sexuality. HIV and AIDS has impacted positively on how adolescents conduct themselves sexually. Adolescents are fearful of contracting HIV or AIDS. It is this fear that seems to be changing their attitudes about how they choose to express themselves sexually. Adolescents’ attitudes about their sexual conduct is reported as being changed, but it would be interesting to know how adolescents sexually conduct themselves, that is, how do they view condom use.
4.2.5 Condom use

According to the counselors, adolescents are making use of condoms and the majority of them are being faithful to only one sexual partner. One counsellor said:

“I can’t be sure about which one is better for them or which one are they practicing now, but what I can say is that now communication is more open for them (adolescents) than it was before, which means that now a person is at liberty to decide which one to take, whether to wait until s/he is ready to have sex or to have sex and use a condom and be faithful. I can say like they are now at liberty to do one of the three. But abstaining is very difficult but more people are trying to practice that and in terms of condom usage and being faithful, especially faithfulness, it works. This is a practice that seems to be new in terms of how adolescents expressed sexuality.”

Adolescent girls were reported as being the ones who readily initiate the use of condoms during penetrative sex. It was mentioned, by one of the counselors, that about 4 in 10 women want a condom to be used during lovemaking, as they are thinking about the consequences, like falling pregnant. The other four counselors disagreed that the percentage of women carrying condoms is definitely less than 4 in 10. They mentioned that that is the case as women who are seen carrying condoms are given bad names. Calling women, who carry condoms, bad names prevent them from carrying condoms in the future.

4.2.6 Abstinence

Even though the loveLife counselors reported a change in the way adolescents expressed sexuality amidst the high rates of HIV and AIDS infections, they
found that adolescents are still finding it very difficult to abstain from sexual relationships. One of the counselors mentioned that

“Abstinence was the least practiced protective method”.

Before the author discusses the results, she would like to relate the perceptions of the loveLife counselors on the future impact of HIV and AIDS.

4.2.7 Future impact of HIV and AIDS

When the counselors were asked how they thought HIV and AIDS would have impacted on the well being of adolescents by 2010, they stated that the spread of the disease would have tremendously decreased. They mentioned that the programs that loveLife is running, with adolescents, are effective enough to decrease or stabilize the spread of HIV and AIDS among adolescents aged between 12 and 17 years. One counsellor said:

“I think that I can say that for our target market, the spread of the pandemic will be stable or the percentage would have decreased because from the programs that we are running, which are effective, I can say that by 2010 everyone will be relating to loveLife programs as the driver of HIV education.”

4.3 DISCUSSION OF RESULTS

All the loveLife counselors agreed that adolescents are knowledgeable about HIV and AIDS. This is in accordance with what Rutenberg et al. (2003) mentioned that adolescents are aware of the existence of HIV and AIDS. The counselors further mentioned that the majority of these young people know how an individual can contract the virus. The counselors stated that most of
the adolescents know that they can get infected with the virus by having penetrative sex with someone who already has the virus. Lear (1997) agrees with the counselors, that adolescents know that HIV is a sexually transmitted disease.

There are, however, a minority of adolescents who have misconceptions about how HIV and AIDS is transmitted. The counselors mentioned that this minority group believes that an individual can get infected with the virus by touching, hugging or kissing someone who already has the virus. Rutenberg et al. (2003) agrees with the counselors that there are some adolescents who still believe that one can get HIV by kissing or touching someone who has the virus. There is a lot of information about HIV and AIDS and how the virus gets transmitted. There are, however, still a group of people who have misconceptions about the transmission of HIV and AIDS. The study thinks that such misconceptions occur as a way of promoting stigma and discrimination against people who have HIV or AIDS. Few adolescents use this misconception as a defense against interacting and treating as normal those who have the virus.

According to the author, maybe adolescents are scared to be associated with those who have the virus, as they think that other people may mistakenly label them also as being HIV positive, and therefore, suffer the consequences of being given such a label. The Health Belief Model talked about the perceived seriousness and severity of an illness as a way that will guide if an individual will take a certain action or not. The adolescents who do not want to be associated with those who have the HI virus or AIDS. The study thinks that it is a fearful thought to most people, to be reminded that they are immortal.

According to the loveLife counselors, stigma is the driving force behind the fear of contracting HIV. MacPhail and Campbell (2001); UNAIDS (2003); Peltzer (2003) all mentioned the same fact that there is discrimination and stigma
against those who have contracted the virus. The authors further mentioned that people do not want to be associated with those who have HIV or AIDS as the virus has not yet been accepted by society.

The counselors reported that HIV and AIDS has a positive impact on how adolescents conduct themselves sexually. The fear adolescents have on contracting the virus seems to change their attitudes about how they sexually express themselves. Based on the loveLife counselors’ reports, it appears as though adolescents’ perceived susceptibility towards contracting the HI virus is high and they are taking precautionary measures so as not to be infected with the disease. According to the counselors, if one takes into cognizance the principles of the Health Belief Model, one can say that adolescents perceive the disease to be serious, and that they are actually seeing the benefits of taking action to protect themselves against contracting the virus.

It is very interesting that the counselors have such perceptions because literature states different ideas. According to literature, HIV and AIDS has no impact of how adolescents conduct themselves sexually (Division of STD prevention, 1995 in Lear, 1997). Adolescents are still engaging in risky sexual behaviors, hence the rise in the HIV infection rate in this age group (Division of STD prevention, 1995 in Lear, 1997; Zabin and Hayward, 1993). The study thinks that the discrepancy between literature and the counselors' reports is based on the fact that the counselors could be biased in their reports. The counselors work for loveLife, which is an organization that seeks to reduce the spread of HIV and AIDS among adolescents. The study assumes that the counselors are portraying a positive picture about the positive impact HIV and AIDS has on adolescent sexuality because they want people to believe that their organization is doing very well in terms of reducing the spread the HIV and AIDS among adolescents.
It could also mean that the Social-Learning Theory is also not as effective as reported. According to the theory, the society and especially the media, has made sex to be something very glamorous and fashionable. The media promotes sex and in a way encourages young people to engage in sexual relationships. If adolescents have indeed changed how they expressed themselves sexually, then it means that neither the society nor the media has any influence on the choices adolescents make. If that is the case, then the messages that get transmitted through the media that warn adolescents on the dangers of HIV and AIDS do not get across to the young people.

There is another discrepancy in what the loveLife counselors and literature are saying. The counselors are adamant that adolescents are making use of condoms during penetrative sex and most of them are being faithful to only one sexual partner. Literature, on the other hand, argues how come adolescents are making use of condoms if they have attached such negative connotations towards having protected sex? UNAIDS (2003) and Avert (2005) mentioned that adolescents are not using condoms during penetrative sex. If adolescents are against using condoms during penetrative sex, then it means that they do not see themselves as also being vulnerable to contracting HIV. According to the Health Belief Model, their perceived susceptibility is very low and they do not see the rewards of using condoms during sexual intercourse.

The loveLife counselors and literature are in consensus that condom availability is a problem for adolescents. Tapia-Aguirre et al. (2003) mentioned that sometimes condoms are not available for those who would like to make use of them during penetrative sex. The authors further stipulated that it was particularly difficult for young women to go to local clinics and request condoms as they receive bad attitudes from the nursing staff who think that they should not be engaging in sexual relationships.
Based on this finding, the author thinks that the nursing staff should be further educated on HIV and AIDS, and the prevalence rate must be highlighted to them so that they can realize the reality of the situation. On the other hand, maybe the nursing staff behaves the way they do because of their own moral values. It could be that they believe that adolescents should not be having sex, but should rather wait until they get married. Nonetheless, HIV and AIDS is a reality and adolescents must be protected from the virus at all costs.

It is very interesting that the loveLife counselors all reported a decrease in the spread of HIV and AIDS amongst the adolescents aged between twelve and seventeen, while most of the literature reported an increase in the spread of HIV and AIDS amongst adolescents. Could this be due to the fact that they were protecting the services they were rendering to adolescents? Were they trying to make loveLife look good, or was it really a fact?