



The injection drug related risky behaviors associated with HIV and AIDS transmission among drug dependent youths in Korogocho Slums, Nairobi City County Kenya

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Abstract This study sought to address the issues pertaining to injection risky behavior among the drug dependent youth in Korogocho slums, Nairobi County. A sample size of 200 respondents comprising of youths living in Korogocho slums aged between 15-30 years was used. The descriptive research design was used in the study. Data was collected using structured questionnaires and analyzed using the Statistical Package of Social Sciences (SPSS version 20). The ethical issues were a priority for this study. The study finding revealed that to a larger extent, education level tend to determine the knowledge capability in terms of effects of drugs on HIV/AIDS transmission. The findings indicated that 60% of the respondents had attained secondary education; however, 85% of respondents had no specific jobs despite their education level. Education is vital in determining risky injection behaviour in relation to HIV/Aids. Most youths were married and some are separated or widowed at an early age a fact which exposed them to engage in risky injection drug behaviour with subsequent exposure to HIV/Aids. The study recommended that more health awareness programs pertaining to injection related risky behaviors in relation to HIV/Aids be unveiled. Education must also be a priority in order to produce a skillful generation of youth who can access employment.

Keywords Drug, drug abuse, drug addiction, drug related problems, illegal drugs, intervention, psychoactive substance, substance abuse, youth

Introduction

The recent past has witnessed increasing use illegal drugs at an unprecedented rate across all part of the world. The United Nations Office on Drugs and Crime (2005) reported that about 200 million people, comprising 5 percent of the world's population who were within (15-24 years) age bracket had used drugs at least once in the last 12 months [1]. This implied 15 million people more compared to 2004 estimates. A report released by the United Nations Drug Control program (UNDCP) in 2004 estimated that 3.3 to 4.1 percent of the global population consumes drugs, however the concern is that according to the UNDCP (2004) those hooked to these drugs are youth who are in schools and colleges or drop-outs. Africa has experienced escalating rates of drug abuse and trafficking serious consequences [2]. According to the African Union Ministerial Conference on Drug Control in Africa report (2004), at least 16 countries in Africa have reported abuse of opiates, with prevalence rates ranging from 0.01 to 0.8 percent for the population aged 15 and above. Twelve countries reported cocaine abuse with prevalence ranging from 0.01 to 1.1 percent for this age bracket. According to a report by the International Narcotics Control Board [3], the East African region has become the fallback for drug dealers following increased control of traditional routes through the Netherlands and Spain. In Kenya it has been noted that drug abuse is fast spreading to rural areas especially Central, Western, Nyanza and Eastern provinces [3]. Drugs and substance abuse is a risk factor to HIV and AIDS. Young people of ages between (15-24) years engaged in drugs abuse are at a higher risk of HIV and AIDS based on the injection drug use. The report further



noted that worldwide, an estimated 11.8 million youths in developing countries are vulnerable to HIV and AIDS. In Kenya episodes of drugs and substance abuse have been recorded as alarming. According to (UNODC, 2008) about 70,000 Kenyans within the youthful age (15-25 years) are serious drug users. In ranking Kenya comes after Mauritius, Egypt, Nigeria, South Africa and Zambia. The report further informs that many of the youths aged (15-25 years) on drugs and substance use are HIV positive; accounting to the increasing HIV and AIDS prevalence rates in Kenya [4]. In response to global warnings on the dangers posed by drug abuse, the National Agency for Campaign against Drug Abuse (NACADA) has pushed for the establishment of a national drug control authority to enforce all drug trafficking laws in Kenya [5]. According to Kaguthi, although religious education has been instilled strongly in the youth, the majority still abuse drugs and are likely to destroy their lives by engaging in behaviors that expose them to dangers of HIV/Aids transmission. It is against this background that this study was undertaken. The study sought to establish the injection risk behavior associated with HIV/Aids transmission among drug dependent youth. Drug abuse as one of the major public health problems in Korogocho is to blame for rapid spread of HIV/Aids. Due to the influence of youth on drugs, (Achola, 2006) describes Korogocho slums as a 'den of criminality' [6]. According to NACADA (2004), drug abuse has highly contributed to the spread of HIV/Aids since it leads the youth to undertake risky injection related behavior. Approximately 80% of all HIV/Aids cases reported are of age 15-30 years of age. Two reports released in 2004 by (NACADA) highlighted the rampant rise in drug abuse among the youth in Korogocho and an association between drug use and HIV/Aids transmission [7]. A further study (UNDOC, 2004) conducted to investigate the links between drug abuse, injecting drug use and HIV/Aids in Korogocho; estimated that 68%-88% of IDUs youth in Korogocho slums were HIV/Aids infected by the year 2004 [1, 6]. According to the UNHABITAT (2008) the number of youths on illegal drugs in Korogocho slums was estimated at 14%; this was double the national figure. The above data illustrated that drugs and substance abuse was a serious problem in Korogocho slums; hence there was an association of drugs and substance abuse with HIV/Aids amongst drug dependent youth. Therefore, the need arose to carry out this study on injection risk behavior associated with HIV/Aids transmission among drug dependent youth; as amidst present social economic interventions, the problems related to youths, drugs and HIV/Aids were persistent.

Methodology

This study was carried out in Korogocho slums, Nairobi City County, Kenya. This area was selected due to its prominence in problems associated with risky behavior among drug dependent youth which makes them vulnerable to HIV/Aids. Korogocho slum is made up of 8 villages namely; Highridge, Grogan, Ngomongo, Ngumuyu, Githaturu, Kisumu Ndogo and Korogocho. The current population according to 2009-2010 census is 150,000 whereas; 60% of Korogocho population is comprised of youths aged between (15- 30) years [8]. This study targeted the youths aged between (15-30) years that lived in Korogocho slums. According to the UNHABITAT (2008) the number of youths on illegal drugs and HIV/Aids infected in Korogocho slums was estimated at 14% double the national figure. However, many community workers and health providers working in the field estimated that the realistic figure of HIV/Aids prevalence among drug dependent youth was high [6]. The sample size was determined using reported method as illustrated below:

$$n = \frac{Z^2 Pq D}{d^2}$$

Whereby;

n= the desired sample size

Z= normal deviation (1.96), which corresponds to (95%) Confidence Interval

P= proportion of the largest population estimated to have desired characteristics (14% = 0.14)

Q= (1-P) (1-0.86), d= Degree of freedom

D= Design effect (1)

$$n = \frac{(1.96 \times 1.96) \times (0.14) \times (1-0.86) \times 1}{(0.05 \times 0.05)}$$

$$n = 185.011456$$

$$n = 185$$



Hence the researchers preferred to estimate the sample size to 200 respondents for the purpose of handling any spoilt questionnaires. The studies included all youths aged between (15-30) years; that lived in Korogocho slums and were either drug dependent or not; but were willing to participate in the study. The study therefore did not sample the youths who were not within (15-30 years) age brackets, not residents of Korogocho slums and those who were not willing to participate in the study. The study area, Korogocho slums was purposively selected due to the prominence of the youths in alcohol, drugs and injection related risky behaviours, child prostitution, crime amongst other risk factors associated to HIV/AIDS. Whilst in the area, the researcher adopted random sampling technique to select the 200 youth participants. The questionnaire was utilized to seek for information on the injection related behaviour associated with HIV/AIDS transmission among drug dependent youths. The tool was pretested to determine its validity and reliability. The primary data derived from the field work was sorted out, and was analyzed and interpreted descriptively with reference to the research objective. The permission was sought, proper introduction and explanation of the research theme and purpose was done to enhance ethical considerations. The participation in this research was voluntary as the researcher protected the rights and dignity of participants.

Theoretical Framework

In Kenya, as in many countries of the world, the fight against HIV/AIDS and Drug abuse among the youth continues day after day. The youth are mostly affected due to their ignorance and distorted information on HIV/AIDS and drug abuse. According to the National Agency for the Campaign against Drug Abuse (NACADA) [7], a lot of young people are introduced to drugs before the age of 18 years. The abuse rate shoots up from around 10 years to 14 years. The 2008 Kenya modes of Transmission studies show that 3.8% of new infections are attributed to injection drug users who have the highest incidence rate of 256 per 1000 injection drug users due to efficient transmission through sharing of needles and other risky behavior. The Model indicated that injection drug users contributed 5.8% of new infections for Nairobi (Kenya Modes of Transmission Studies, 2008). Drug users in Kenya are hidden and difficult to reach due to stigma, the illegal nature of drug use, the association of drug use with crime and the fact that the majority of drug users live in slums. Certain behaviors and situations are known to transmit HIV from an infected person to a healthy person because the exchange of blood or body fluids is involved [9]. Mwangela (2005) maintains that high-risk groups in this category are injecting drug users and the youth [10]. It is the risk behavior of injecting drug users that exposes them to the dangers of contracting HIV/AIDS (UN-HABITAT, 2010). The document further notes the risk behavior associated to the drug dependent youths and HIV/Aids transmission as injection and sexual related risk behaviors. This study was guided by social construction theory as postulated by (Berger & Luckmann, 1966) [11]. The theory suggests that a person's habits and routines are created within the social context in which they live and as such their knowledge, as a social phenomenon, develops within social interaction. The social construction describes the process by which people construct a cultural and take it as a reality of their identity and internalize it by the process of socialization in the society, which becomes part of their day to day consciousness. The social construction theory suits this study as social realities are continuously being constructed and reconstructed as individuals interact with each other and with their social world. Donovan (1993) reported that identifiable groups in a society are infused with culturally constructed positive or negative images that pressure lawmakers to target policies toward, or away from, a given group. Thus groups with political power benefit by the development and subsequent passing of social policies that provide health and social services which advance their mission. Groups that are viewed negatively within their society, such as people living with HIV and addictions, are mainly considered deviant, thereby being a burden to the larger group. In this regards the youths in Korokocho slums comprise the group, which is viewed negatively based on their culture of injection and sexually related risky behaviours that have made them vulnerable to HIV, AIDS and related infections [12].

Results and Discussions

The objective of the study was to determine injection related risky behaviors associated with HIV/Aids transmission among drug dependent youths in Korogocho slums, Nairobi City County, Kenya.



Demographic Profile

The demographic characteristics analyzed for this study were sex, age, marital status, level of formal education attained and sources of livelihoods. The questionnaires were distributed randomly to 100 men and 100 women selected as respondents. This laid emphasis that women and girls are equally vulnerable to being exposed to HIV/Aids where gender inequalities, cultural or religious practices, makes them economically and socially dependent upon men (CIDSE, 2013). The study findings showed that majority of the respondents (130)65% were aged between 15-20 years; as (50)25% constituted respondents aged 21-26 years. Finally 20(10%) of the respondents were aged 27 years and above. These implied that during this stage of life the youth tend to be very inquisitive and in the course lay their hands across so much experience. These findings were similar to (Siringi et al., 2001) that showed 20% of youths in Kenya aged between (14 and 18 years) smoke cigarettes and another 9% smoke bhang (*Cannabis sativa*) while some 23% drink commercial beer and spirits. The study confirmed (Siringi et al. 2001) that 92% of youths aged between (16 and 23 years) experimented with drugs as they grew up with about 90% exposed to taking beer, spirits, cigarettes, local brews and bhang. The study revealed that most of the respondents 150(75%) were single while 30(15%) were married. The rest of the respondents were (20)10% were either separated or widowed. This data implied that significant proportion of those interviewed represents a larger portion of separated, and single/widowed that would be more vulnerable to injection risky behavior in their livelihoods strategies. These findings were similar to (Tabifor, 2000) [13] who found that many youths who attempt and fail in marriages may abuse drugs or turn to prostitution as a way of getting finances to enable them earn a living. The study showed that majority of the youths 120(60%) in Korogocho slums who participated in the study had secondary education while 60(30%) had attained basic level. The 20(10%) did not respond to this question. Education is a crucial link for development of responsible citizenship among the youth. The economic poverty has been a major factor for lower completion rates and justifies youths involvement in various livelihoods activities including commercial sex work (APHRC, 2002). The study confirmed (APHRC, 2002) that youths living in informal settlements do not even enter primary school yet others leave school early under pressure from families to earn money or provide family care. Others never progress to secondary level due to high costs required. These findings confirmed (UNAIDS, 2010) that most youths in slums who engage in drug use are less educated since many of them drop out of school where they become more vulnerable to drugs and substance abuse [14-15]. The study findings showed that 170(85%) of the respondents did not have a specific course of the livelihoods; they referred to their status as *hustlers*; a status that describes a wide range of activities including manual work, casual jobs and any other that one may come across. The study showed that 10(5%) were job seekers and that 20(10%) were students. The problem of youth unemployment was recognized in Kenya; as (Labour Force Report, 2003) confirmed that unemployment rates were high in Korogocho slums. This has been attributed to lack education and necessary skills for competitive formal employment sector. The study further confirmed (Labour Force report, 2003) that unemployed people in informal settlements in Kenya were within (20-24 years) age category. Lower education levels results to unemployment, which results in formation of youth gangs that may engage in risky behaviours associated with drug abuse and HIV/Aids.

Injection Drug Related Risky Behaviors Associated with HIV and AIDS Transmission Among Youths in Korokocho Slums

The sharing of syringes by injection drug users (IDUs) is a major driver of the AIDS pandemic and the major cause of HIV transmission in urban slum, where it accounts for greater percent of all HIV cases among drug dependent youths. The study findings showed that 140(70%) of the youths in Korogocho slums were aware that injection drug and alcohol abuse were major risky behavior that would exposes them to HIV and Aids infection. The study further indicated that 30(15%) of the respondents considered unprotected sex with multiple partners as risky behaviors that to a greater extend may characterize injection drug use; while 30(15%) of the youths consider homosexuality and oral sex as some of the risky sexual behavior. These findings implied that youths who engage in drug abuse were informed of the risks involved that would exposes them to HIV, AIDS and related infection. The study found that 196(98%) of the respondents had already been involved in drug related risk factors or been in company of friends who indulged in injection drugs; it was noted that 4(2%) denied having been involved with drug abuse. This indicated that majority of the youths had been exposed to injection



drug risky behaviour related with HIV and Aids transmission. Asked if any of the respondent had experimented on drugs; the results showed the following results; that 130(65%) had used injection drug, while 60(30%) were involved routinely in smoking as 10(5%) had used other drug substances such as sniffing. As observes (APHRC, 2002) that by (17 years), more than half of the youth in Nairobi slums have begun taking alcohol and an even higher percentage (58%) have begun using drugs. These findings are similar to (APHRC, 2002) that most common drugs used by young people who live in slums of Nairobi are marijuana, alcohol and glue. These findings showed that youths in Korokocho slums were involved in risky behaviours related to HIV and AIDS, which implied that judgments and decision making potentials are often impaired when one is involved in injection drugs. This study confirms that young people in Kenya are dramatically influenced by their friends towards injection drugs substance abuse.

Conclusion and Recommendations

The impact of injection related risky behavior has put youths at enormous risks to HIV/Aids. Their prospect of a safe and healthy future is under threat; hence, have greatly determined life expectancy. There are almost no expectation of legitimate employment for the youths and are further stigmatized socially. Such young people are aware of their exclusion from the national priorities. Education is a major tool for socialization that may transform the face of the youths into responsible citizens. National governments should make primary and secondary education accessible to all youths with curriculum policies revised to meet the current needs and life circumstances of youth in Kenya. This means that empowerment of youth especially in the slums will enhance their integration into responsible citizenship and economic productivity. The devolution of powers from the National to Local governments is a prerequisite for effectively tackling the issue of youth at risk of injection related risky behavior that exposes them to HIV/Aids. Local government need to be able to assume a leadership role in the management of socio-economic and integration of policies. Drug de-addiction education programs should target youth and provide health facilities for easy accessibility and health education enhanced.

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