Prevalence Of HIV Among The Youth Aged 15-24 In Nigeria - A Need To Increase Access For Young Adolescents To HIV Counseling And Testing.

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Background:

Nigeria with a population of over 173 million people, HIV/AIDS remains a growing public health issue. The people living with the virus are about 3.2 million and it is observed that there is an increase of new infection among the adolescents and young people. We decided to study the prevalence of HIV among young people aged 15-24 in the country. The country was divided into 6 regions for the purpose of this study.

Methods:

We adapted the secondary data that were collected from the report of the National HIV/AIDS and reproductive survey (NARSH 2012) on Prevalence of HIV/AIDS on adolescents and young people in Nigeria in 2012. Data collection on the survey were from the primary source documents in health facilities that offer HIV/AIDS services.

Results:
Among the six geopolitical zones, South–South zone has the highest (4.9 %) prevalence rate of HIV infection among the adolescents and young people, more than the National median prevalence of 3.6%, while south-East has the lowest prevalence of (1.1%).

Results showed that adolescent and young people, aged 20-24 had higher prevalence of 3.2 % while ages 15-19 had prevalence of 2.9 %. Results from the segregated data by sex showed that between the ages (15-24), the prevalence is higher (3.3%) with female gender than the male (2.4%) counterpart. HIV/AIDS in Africa and Nigeria in particular has a feminine face due to culture of silence, early child marriage and religious barriers that
forbids female gender to discuss issues around sexuality or seek reproductive health services at age 15.

**Conclusion:**

The age limit for access to HIV counseling and testing (HCT) should be adjusted to include young people who are sexually active as early as age 15. Findings revealed that the legal framework on access to HCT (HIV Counselling and Testing), of WHO at 18 years and above have created a barrier to young people who are below 18 and are active sexually to access HCT as the Health personnel would ask for the parental consent.

**SELECTED REFERENCES:**


2. IBBSS 2014 ( Integrated biological and behavioral sentinel survey )


4. WHO (2013). HIV and adolescents: Guidance for HIV testing and counselling and care for adolescents living with HIV: Recommended for public Health approach and consideration for policy- makers and managers