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Availability and Utilization of Health Services for the Sexually Abused Secondary School Teenagers in Kalabari Kingdom of Rivers State

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Abstract

Background: The Paper examined the availability and utilization of health services for the sexually abused secondary school teenagers in kalabari. Sexual abuse has become a serious issue in the society that needs urgent attention, in order to achieve sustainable peace and security for women.

Objective: The objective of this paper was to establish victims utilization of health services, counseled them in other to reduce the problems they faced and with the right kind of help and treatment they needed for recovery.

Materials and methods: The study was conducted in female secondary schools that are within the age range of 13-19 years in Kalabari Kingdom of Rivers State. Simple random sampling techniques were used to select 738 respondents. A structured and self-administered questionnaire was the instrument used to collect data for the study, while data collected was analyzed using descriptive statistics of percentage, mean and standard deviation.

Results: The findings showed that age range of 16-19 were (58.5%), 13-15 (41.5%). The findings revealed that the respondents were aware of the general health services for the sexually abused teenagers with a rated mean score of (\bar{x} =2.61, ±=1.13), that general health services were available for the sexually abused teenagers with a rated mean score of (\bar{x} =2.60, ±=0.97), that general health services for the sexually abused teenagers were not adequately utilized with a rated mean score of (\bar{x} =2.49, ±=0.95, that the health services for the sexually abused are utilized despite the location of the services with a rated mean score of (\bar{x} =2.64, ±=0.91) and finally, the respondents disagreed with the views that sexually abused teenagers with low level of maturity do not utilize the health services (\bar{x} =2.84, ±=0.86).

Conclusion: Based on the findings, the study concluded that majority of the students who were interviewed revealed that health services for the sexually abused teenagers was really related with the utilization of health services.

Keywords: Availability and Utilization; Health Services; Sexually Abused; Secondary School Teenagers

Introduction

Sexual abuse has become a serious issue in the society that needs urgent attention, in order to achieve sustainable peace and security for women, the problem of sexual abuse which is a public health problems must be seen as serious concern. Child abuse can be seen as the involvement of a child or an adolescent in sexual activity that he or she does not fully comprehend and is unable to give informed consent to, or for which the child or adolescent is not

developmentally prepared and cannot give consent, or that violates the laws or social taboos of society [1]. Children can be sexually abused by both adults and other children who are by virtue of their age or stage of development, in a position of responsibility or trust or power over the victim. It includes incest which involves abuse by a family member or close relative. Sexual abuse involves the intent to gratify or satisfy the needs of the perpetrator or another third party including that of seeking power over the child. Federal Child Abuse Prevention and Treatment Act [2] noted that sexual abuse is the act of engaging a teenage child in sexual activity through persuasion and the use of gift to entice or lured a teenage child into any negative act. In this paper, teenage sexual abuse is a situation

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where a teenager suffers from serious mental and physical injury inflicted upon its victim by reason of sexual exploitation.

The problem of sexual abuse in Nigeria has become a widespread public health problem with negative consequences for teenagers who are victims. In Nigeria, sexual abuse has been on the increase and can be traced to certain environmental influence, low level of education, pornography, skill training and inability of both parties to have a bargaining capacity among others [3]. There are several effects and implications attached to a teenage child that is sexually abused, these includes mental, emotional and social problems which inflict severe pains, depression, anxiety, behavioral problems, withdrawal from normal activities, difficulty at school, aggression, truancy, running away from school, excessive fears, nightmares, extreme anxiety, drug abuse, substance abuse, alcohol abuse, stealing, prostitution and interpersonal sensitivity [4]. Sexual abuse can also have psychological, emotional, and physical effects on a survivor and these effects are not always easy to deal with, but can be managed with the right help and support given to the victim. Such effects are; Post Traumatic Stress Disorders (PTSD), Self-harm, Flashbacks, Sexually Transmitted Infections (STIs), Disassociation among others [5]. There are various health services meant for the sexually abused teenagers. These services includes History taking and Physical examination, Health education, Sexuality education, Counselling and testing for HIV/AIDS & STIs, Post exposure prophylaxis, Laboratory investigations, Providing Treatment, care and support services which include; Counselling therapy, Multidisciplinary information sharing, Providing counselling for stigma and discrimination. Other health services are mental health and psychotherapy, Medical social works services and Referral services. Sexual abuse has emerged as one of the major social problems whose victims needs to be encouraged to access the available health services to avoid living under condition that pose a threat to his or her physical growth or pose psychological harm to the victims future.

The study focused on Kalabari Kingdom, an Ijaw ethnic group in Rivers State, one of the 36 States, which is oil rich State located in the southern part of Nigeria. The Kalabari kingdom has a total of twenty-five (25) government owned health facilities where the various health services for the sexually abused are offered alongside other services [6]. The health facilities are made up of three (3) secondary health facilities each located at the head quarter of each LGA and twenty-two (22) primary health facilities spread across the three LGAs. The paper examined the following objectives;

- Explore the availability of health services for the sexually abused secondary school teenagers in Kalabari Kingdom of Rivers State.
- Investigate the degree of utilization of health services by the sexually abused secondary school teenagers in Kalabari Kingdom of Rivers State.

- Explore whether location of health services is a determinant of utilization by the sexually abused secondary school teenagers in Kalabari Kingdom of Rivers State.
- Investigate the influence of maturity on the utilization of health services by the sexually abused secondary school teenagers in Kalabari Kingdom of Rivers State.

Materials and Methods

The study was conducted on female secondary school students who are within the age range of 13-19 years in Kalabari Kingdom of Rivers State. Descriptive survey and correlational research designs was used. Simple random sampling techniques were used to select 738 respondents. A structured and self-administered questionnaire was the instrument used to collect data for the study, while data collected and collated was analyzed using descriptive statistics of percentage, mean and standard deviation. The availability and utilization of health services were assessed based on location and maturity among others variables (Table 1).

Results

		N	%	Remark					
Age(years)	13-15	301	41.5						
	16-19	425	58.5	*					
Class	SS1	252	34.7	*					
	SS2	235	32.4						
	SS3	239	32.9						
Location	Urban	146	20.1						
	Rural	580	79.9	*					
LGA	Asari Toru	216	29.8						
	Akuku Toru	257	35.4	*					
	Degema	253	34.8						
	*Dominant								

Table 1: Distribution of respondents based on demographic data n=726.

The findings showed the demographic respondents of age range 16-19 (58.5%), 13-15 (41.5%). 32.9% of the respondents were in SS3, 32.4% were in SS2 and 34.7% were in SS1. Majority of the respondents were from the rural areas (79.9%) while 20.1% were from urban areas. However, 35.4% of the respondents were from Akuku Toru Local Government Area, while 34.8% of the respondents were from Degema and 29.8% of the respondents also from Asari Toru Local Government Area (Table 2).

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SN	Availability	Adequately available	Available	Limited	Absent	N	x	±	
1	General health services available for the sexually abused teenagers	94	404	61	160	719	2.6	0.97	
2	Sexuality Education services	127	411	133	49	720	2.86	0.78	
3	Health Education services are available	171	406	112	25	714	3.01	0.73	
4	Counseling and testing for the prevention of HIV/AIDS and STIs are available in the facility	123	341	193	59	716	2.74	0.84	
5	Post exposure prophylaxis treatments for the prevention of HIV/AIDS in the facility	66	181	293	173	713	2.2	0.91	
6	Medical Health Investigations in the facility	121	387	88	126	722	2.7	0.95	
7	Care and support services	77	350	180	113	720	2.54	0.88	
8	Mental health and psychotherapy services	51	320	156	195	722	2.31	0.95	
9	Social support services	81	352	120	162	715	2.49	0.96	
10	Legal support services to protect the right of the sexually abused	82	397	95	145	719	2.58	0.94	
11	Referral services in the treatment centers to refer cases of sexual abuse to a higher level of treatment.	167	334	92	128	721	2.75	1	
12	Confidentiality all through the treatment of the sexually abused.	143	333	96	150	722	2.65	1.02	
							2.62	0.58	
Note: missing cases were deleted from the percentage computations									

Table 2: Mean, standard deviation on the availability of health services among secondary school teenagers in Kalabari Kingdom of Rivers State.

The findings showed that general health services were available for the sexually abused teenagers with mean score of (\bar{x} =2.60, ±=0.97), available health education services (\bar{x} =3.01, ±=0.73), sexuality education services were available (\bar{x} =2.86, ±=0.78). The respondents also perceived that counselling and testing for the prevention of HIV/AIDS and STIs are available in the facility (\bar{x} =2.74, ±=0.84), availability of medical health for investigations (\bar{x} =2.70, ±=0.95). The respondents observed that Care and support services are available for the sexually abused in the facility with a mean score of (\bar{x} =2.54, ±=0.88). Referral

services in the treatment centers to refer cases of sexual abuse to a higher level of treatment was also available (\bar{x} =2.75, ±=1.00), support services to protect the right of the sexually abused were available (\bar{x} =2.58, ±=0.94), confidentiality during the treatment of the sexually abused (\bar{x} =2.65, ±=1.02). Post exposure prophylaxis treatments for the prevention of HIV/AIDS in the facility was limited (\bar{x} =2.20, ±=0.91). Also Mental health and psychotherapy services in the facility was also limited with a rated mean score of (\bar{x} =2.31, ±=0.95) and social support services

available in the facility were also limited (\bar{x} \bar{x} =2.49, ±=0.96). However, the overall score shows that the mean perception of the students over availability of health service for the sexually abused teenagers in Kalabari Kingdom of Rivers state was (\bar{x} \bar{x} =2.62, ±=0.58).

		utilized	utilized	fairly utilized	Not uti- lized	N	Mean x	SD ±
13	General health services available for the sexually abused teenagers	85	334	152	150	721	2.49	0.95
14	Sexuality Education services	127	337	176	78	718	2.71	0.88
15	Health Education services are utilized	168	331	158	61	718	2.84	0.88
16	Counselling and testing for the prevention of HIV/ AIDS and STIs are available in the facility	110	185	257	167	719	2.33	1
17	Post exposure prophylaxis treatments for the prevention of HIV/AIDS in the facility	60	98	278	285	721	1.91	0.93
18	Medical Health Investigations in the facility	79	165	333	141	718	2.25	0.9
19	Care and support services	63	110	355	187	715	2.07	0.87
20	Mental health and psychotherapy services	42	108	302	261	713	1.9	0.86
21	Social support services	65	129	276	236	706	2.03	0.94
22	Legal support services to protect the right of the sexually abused	49	107	287	270	713	1.91	0.89
23	Referral services in the treatment centers to refer cases of sexual abuse to a higher level of treatment.	48	224	225	221	718	2.14	0.93
24	Confidentiality all through the treatment of the sexually abused.	73	247	226	173	719	2.31	0.95
							2.24	0.56

Table 3: Mean and standard deviation on the utilization of health services among secondary school teenagers in Kalabari Kingdom of Rivers State.

(Table 3) showed that general health services for the sexually abused teenagers were not adequately utilized with a rated mean score of (\bar{x} =2.49, \pm =0.95), health education services are utilized (\bar{x} =2.84, \pm =0.88), sexuality education services were utilized (\bar{x} =2.71, \pm =0.88). Counselling and testing for the prevention of HIV/AIDS and STI were not utilized in the facility(\bar{x} =2.33, \pm =1.00), and post exposure prophylaxis treatments for the prevention of HIV/AIDS in the facility were not utilized (\bar{x} =1.91, \pm =0.93), Medical health investigations were not utilized in the facility (\bar{x} =2.25, \pm =0.90), Care and support services were not utilized (\bar{x} =2.07, \pm =0.87), Mental health and psychotherapy services were not utilized (\bar{x} =1.90, \pm =0.86), Social support services were not also utilized (\bar{x} =2.03, \pm =0.94). Legal support services to protect the right of the sexually abused were not utilized (\bar{x} =1.91, \pm =0.89). Referral services in the treatment centres to refer cases of sexual abuse to a higher level of treatment were not utilized in the facility with a mean score of (\bar{x} =2.14, \pm =0.93), confidentiality are not adequately utilized during the treatment of the sexually abused (\bar{x} =2.31, \pm =0.95). However, the overall score shows that the mean perception of the students over the utilization of health services for the sexually abused teenagers in Kalabari Kingdom of Rivers state was (\bar{x} =2.24, \pm =0.56). This shows that health service for the sexually abused teenagers were not adequately utilized in Kalabari Kingdom.

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SN	Items	Strongly Agree	Agree	Disagree	Strongly Disagree	Mean N	x	SD ±	
25	Health services for the sexually abused are utilized despite the location of the services.								
26	The location of health services makes it difficult for the sexually abused teenagers to utilize the services.		343	122	121	722	2.68	0.96	
27	Utilizing the health services for the sexually abused located in one's community can bring about stigma and discrimination.	207	317	143	52	719	2.94	0.88	
28	Sexually abused teenagers in the rural areas find it difficult to utilize the health services due to the distance in reaching the location of the health services.		361	114	64	720	2.92	0.87	
29	Location of health services contribute to delayed treatment of the sexually abused teenagers.	244	304	121	49	718	3.03	0.88	
	Grand mean and SD						2.84	0.6	
	Note: missing cases were deleted from the percentage computations.								

Table 4: Mean and standard deviation on the location of health services among secondary school teenagers in Kalabari Kingdom of Rivers State.

(Table 4) Showed that the health services for the sexually abused are utilized despite the location of the services with a rated mean score of (\bar{x} =2.64, ±=0.91), location of health services makes it difficult for the sexually abused teenagers to utilized the services (\bar{x} =2.68, ±=0.96), health services for the sexually abused located in one's community can bring about stigma and discrimination (\bar{x} =2.94, ±=0.88). Also, sexually abused teenagers in the rural areas find it difficult to utilize the health services due to the distance services (\bar{x} =2.92, ±=0.87). Health services contribute to delayed treatment of the sexually abused teenagers (\bar{x} =3.03, ±=0.88). However, the overall mean and standard deviation on the location of health services for the sexually abused secondary school teenagers were (\bar{x} =2.84, ±=0.60).

SN	Items	Strongly Agree	Agree	Disagree	Strongly Disagree	N	Mean x̄	SD ±		
30	Sexually abused teenagers with low level of maturity do not utilize the health services.									
31	Sexually abused teenagers with high level of maturity utilize the health services.	168	330	154	69	721	2.83	0.89		
32	Level of maturity influence the non-utilization of health services for sexually abused teenager.	185	340	131	65	721	2.89	0.89		
33	Utilization of health services is dependent on one's maturity.	130	255	238	93	716	2.59	0.93		
34	It is only matured sexually abused teenagers that utilize the health services.	93	301	223	109	726	2.52	0.89		
							2.73	0.59		
	Note: missing cases were deleted from the percentage computations.									

Table 5: Mean and standard deviation on the maturity of students using health services among secondary school teenagers in Kalabari Kingdom of Rivers State.

(Table 5) Showed that the respondents disagreed with the views that sexually abused teenagers with low level of maturity do not utilize the health services (\bar{x} =2.84, ±=0.86), sexually abused teenagers with high level of maturity utilized the health services (\bar{x} =2.83, ±=0.89), level of maturity influence the non-utilization of health services for sexually abused teenager (\bar{x} =2.89, ±=0.89), utilization of health services depended on one's maturity (\bar{x} =2.59, ±=0.93), only matured sexually abused teenagers utilize the health services (\bar{x} =2.52, ±=0.89). However, the overall mean and standard deviation on the maturity were (\bar{x} =2.73, ±=0.59).

Discussion of the Findings

Availability of health services for the sexually abused secondary school teenagers

The findings showed that the mean perception of the respondents on availability of health services for the sexually abused teenagers was above the grandmean of 2.5. The respondents specifically indicated that general health services for the sexually abused teenagers are available. Health education services, sexuality education services, counselling and testing for the prevention of HIV/AIDS and STIs were all available in the facility. Medical health investigations were available in the facility, Care and support services were also available. Legal support services to protect the right of the sexually abused are also available. This study is in line with [7] who said that access to health services varies across countries, groups, and individuals, and is largely influenced by socio-economic conditions and the health policies in place of referral services to a higher level of treatment are available and that confidentiality services are all available. The present finding is consistent with an earlier study by [8] whose report shows that cases of sexual abuse were higher in Nigeria and Zambia and the abused persons were not willing to disclose the abuse to anyone hence, they found it difficult to access the health services when they are sexually abused even when they know that these services are available. As a result, a decrease effect size of the impact of abuse would be seen in studies that relied only on official reports or on official report for verification of self-reports; participants with no official record of abuse would be categorized as non-abused; while in real fact they were abused but not reported.

Utilization of health services by the sexually abused secondary school teenagers

The findings showed the mean response of the students on utilization of health service by the sexually abused teenagers in Kalabari Kingdom of Rivers state was below the grandmean of 2.5. The respondents however indicated that health education services are utilized and sexuality education services were utilized but the rest of the services were not utilized. The findings were consistent with [9] that used different sampling methods. However, [10] in their studies of health care utilization and abuse with

methodological weaknesses (e.g., clinically based samples and inadequate control of confounding variables), the findings were inconsistent to this study.

Location of health services as a determinant of utilization by the sexually abused teenagers

The findings revealed that the location of health services for the sexually abused secondary school teenagers were very accessible with grandmean of 2.84, SD=0.60. This shows that referral of sexually abuse survivors can be made to health care providers with appropriate health care facility on time to manage the survivor [2] Concluded that none utilization of the health services by the sexually abused persons was as a result of the high cost of services and location especially for females who suffer both physical and sexual abuse. This is because they did not know that medical social workers services may help the clients to take care of themselves by assisting them to recover fast and fit in well in the community [11]. Counselling at this time help to explore core issues and gaining a different perspective on problems and psychological difficulties. Establishing a relationship built on trust and confidentiality between health worker and the abused person help to stabilize those [12].

Maturity on the utilization of health services by the sexually abused secondary school teenagers

The findings showed that the respondents with high level of maturity utilize the health services better with grandmean of 2.73, SD 0.59. The emotional aspect refers to the bond that exists between individuals is expressed through profound feelings and caring. The medical social worker enables the clients especially the sexually abused clients to cope with the emotional situations they are facing and to help them to adapt within the community [13]. Knowledge of sexuality education is important to everyone in the society including children and teenagers [14]. Support, understanding, maturity and a sympathetic ear is all that a client really needs to receive [15]. Counselling process provides the clients in distress an opportunity to explore the values and beliefs to understand how to make positive changes in their life, whilst working through issues and problems that have caused them to lose self-esteem, as well as confidence in their own abilities [16,17].

Conclusion

Based on the findings, the study revealed that majority of the students who were interviewed on sexual abuse possessed the knowledge of Availability, Utilization and location of health Services. This shows that respondents have positive attitudes towards accessing the various health services that were available.

Recommendations

Based on the findings of the study, the following recommendations were made:

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- 1. Community health workers should collaborate with schools to create more awareness of the health services available for utilization.
- Non- Government organizations (NGOs) should intensified effort to develop strategies for the utilization of the available health services.
- 3. Government should intensified efforts of making health education programs in schools a core subject
- 4. Sexuality education programs should also be in cooperated into the school curriculum as a subject.

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