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SOCIAL AND HEALTH IMPACT OF COMMERCIAL SEX WORK AMONG SINGLE FEMALE YOUTHS IN BAUCHI METROPOLIS.

[1]Hauwa Hussein and [2]Dr. James Iiiya Kyamru
[2]Federal Polytechnic, Bauchi, Bauchi State, Nigeria, [2]Abubakar Tafawa Balewa University Teaching Hospital, Bauchi, Bauchi State, Nigeria

ABSTRACT

The study examined the Social and Health impact of commercial sex work among single female youths in Bauchi metropolis. Survey research design was employed for the study. The instrument for data collection was a self-developed 58 item questionnaire. The sample of the study consisted of 311 single female youths commercial sex workers in Bauchi metropolis. The findings of the study revealed that the social impacts of commercial sex work among single female youths were: crimes, erosion of love in marriage, childbirth out of wedlock, denial of inheritance to children born through prostitution, involvement in drug abuse/addition and single parenthood and its attendant's challenges. The health impact of commercial sex work were fractures/dislocation inflict on commercial sex workers by violent men, reduction of life expectancy due to HIV/AIDS infection, abortion and its related complications and sexually transmitted infection including HIV/AIDS. There is no significant difference in the social impact of commercial sex work between age 13-20 and 21-30 single female youths. There is no significant difference in the health impact of commercial sex work between age 13-20 and 21-30 single female youths. Based on the findings of the study, the paper proffered suggestions on ways to curtail the social and health problems of commercial sex work.

Key words: Social, health, impact, commercial sex work

INTRODUCTION

Commercial sex work is one of the vices which have negative social and health impact on the life of single youths. Commercial sex work as a way of having sexual intercourse for payment by human being has been known to exist for long.

These days, young girls get involved in part time commercial sex work in order to get financial rewards to satisfy their wants. Some single youths who graduate from institutions of higher learning take to commercials sex work due to unemployment which makes life difficult (John, 1996).

There are different types of commercial sex work in terms of social class, life-styles and status (Kehnde, Olugboji & Ese, 1991). There are those who stand by road sides to solicit for men once nigh falls, they flag down flashy cars that pass by. If randy men stop, they quickly run to them and tell them to take them to anywhere, which is a clear way of advertising themselves as single girls of easy virtues. If deals are struck between them, they hope into the cars and move to anywhere convenient for them to have sexual intercourse particularly in guest houses and hotels.

There are those single youths who go to nights clubs to solicit for men. They arrive the night clubs in the evening every day and sit around the bars and buy themselves drinks and chain-smoke cigarette immediately the clubs come alive. Late in the night they began to move around suggestively to arouse men into action. Interested men strike deal with the prostitutes and both of them move to wherever they will satisfy their sexual desires.

Commercial sex work has adverse social effect on single youths that practice it. Rimfat (2006) highlighted the following negative social impact of commercial sex work: Separation from God, career, Jeopardy, lack of respect or stigmatization by the society, marital problem, erosion of love in marriage social crimes, school drop-out, sexual abuse/sexual harassment, drug abuse, drug peddling and girl-child trafficking.

The health consequences of commercial sex work are some injuries and infections inflicted on them by men who subject prostitutes to violence. The physical health consequences include injury (bruises and broken bones. This corroborates the study of Parriott(1994) who found that out of 68 commercial sex workers that constituted the study, half of them had been physically assaulted by their purchasers. Twenty-three percent of those assaulted were beaten severely enough to have suffered broken bones. Two experienced violence so vicious that they were beaten into a state of coma. Ninety percent of them had experienced violence in their personal relationships resulting in miscarriage, stabbing, loss of consciousness and head injury.

Commercial sex workers are vulnerable to sexually transmitted infections. No wonder Raymond, (1995) reported that sex practice of prostitution predisposes commercial sex workers into STIs including HIV/AIDS, chlamydia, gonorrhea herpes, human papilloma virus and syphilis which are alarmingly high among women in prostitution. Most injuries to health according to Parriott (1994) study include Chlamydia, syphilis, gonorrhea, herpes, pelvic inflammatory diseases which are associated with general gynecological problems. The social and health problems associated with commercial sex work necessitated the present study.

Purpose of the Study

The purpose of this study was to determine the social and health impact of commercial sex work among female single youths in Bauchi metropolis. Specifically, the objectives of this study were:

1. To determine the social impact of commercial sex work among female single youths in Bauchi metropolis.
2. To ascertain the health impact of commercial sex work among female single youths in Bauchi metropolis.

Research Questions

In order to give direction to this study, the following research questions were posed:

1. What are the social impact of commercial sex work among female single youths age 13-20and 21-30 in Bauchi metropolis?
2. what are the health impact of commercial sex work among female single youths age 13-20 and 21-30 in Bauchi metropolis?

Hypotheses

In order to guide the study, the following null hypotheses were formulated at. 05 level of significance.

1. There is no significant difference in the social impact of commercial sex work between age 13-20 and 21-30 female single youths in Bauchi metropolis.
2. There is no significant difference in the health impact of commercial sex work between age 13-20 and 21-30 female single youths in Bauchi metropolis.

METHODS

This section presents the description of the research design, the population for the study, the sample and sampling techniques, instrument for data collection, method of data collection and method of data analysis. In order to achieve the purpose of this study, the survey research design was employed.

The population of the study consisted of all female single youths within the age of 13-30 who practice commercial sex work in Bauchi metropolis. The sample of the study consisted of 311 female single youths commercial sex workers in Bauchi metropolis. Due to the dearth of statistics on the number and distribution of female single youths commercial sex workers, the purposive sampling technique was adopted in drawing the sample for the study. In order to access the respondents, the researcher designed identification forms and distributed them to brothels and

hotel owners who assisted and supplied the names and the room numbers of single female youths who practice commercial sex work and are residing or visiting their brothels or hotels. It was from this list that the researcher reached out and distributed questionnaires to 311 female single youths who are commercial sex workers.

The instrument used for the study was a fifty-eight item social and health impact of commercial sex work questionnaire (SHICSQ). The questionnaire was categorized into three sections. Section A contained 2 socio-demographic variables of age and level of education. Section B elicited information on social impact of commercial sex work on female single youths. Section C contained information on the health impact of commercial sex work on female single youths.

The reliability of the questionnaire was obtained through a split- half method which yielded a coefficient of .82. The face validity of the instrument was obtained through the judgment of five experts drawn from health and physical education department, psychology department and curriculum department of federal college of education, Pankshin.

In order to access the respondents for data collection, the identification forms which contained the names and the room numbers of commercial sex workers were used. The researcher and one of the trained research assistant then used the identification forms to access the commercial sex workers and distributed copies of the questionnaires to the literate single female youths who are into commercial sex work. The procedure for the completion of the questionnaire forms were collected back on the spot. The data generated for he study were analyzed using percentages to answer the research questions while chi-square statistics was employed to test the hypotheses.

RESULTS

The findings of the study are presented below according to the research questions and hypotheses posed.

Table 1

Perceived Social Impact of Commercial Sex Work Between Age 13-20 and 21-30 Female Single Youths in Bauchi metropolis

n=311

	No		Yes		No		Yes		No
S/no	Items	f	%	F	%	f	%	f	%
1	Prostitution is associated with crimes	177	56.91	28	9.00	99	3182	7	2.25
2	School drop- out	169	54.34	36	11.57	74	23.79	33	10.61
3	Stigmatization	164	52.73	41	13.18	87	27.97	19	6.10
4	Drug selling /drug peddling	153	49.19	52	16.72	70	22.50	36	11.57
5	Theft/ stealing	149	47.90	56	18.00	68	21.86	38	12.21
6	Sexual abuse	163	52.41	42	13.50	88	28.29	18	5.78
7	Sexual harassment	170	54.66	35	11.25	80	25.72	26	8.36
8	Separation from God	172	55.30	33	10.61	84	27.00	22	7.07
9	Career jeopardy	167	53.69	38	12.21	75	24.11	31	9.96
10	Marital problem	173	55.62	32	10.28	86	27.65	20	6.43
11	Erosion of love in marriage	175	56.27	30	9.64	91	29.26	15	4.82
12	Drug abuse/addiction	167	53.69	38	12.21	70	22.50	36	11.57
13	Child birth out of wedlock	176	56.59	29	9.32	76	24.43	30	9.64
14	Girl child trafficking	170	54.66	35	11.25	81	26.04	25	8.03
15	Single parent hood and its attendant challenges	172	55.30	33	10.61	89	28.61	17	5.46
16	Child abandonment	169	54.34	36	11.61	86	27.65	20	6.43
17	Denial of inheritance to children born through prostitution	174	55.94	31	9.96	90	28.93	16	5.14
	Grand total		**50.74**		**11.81**		**26.36**		**7.73**

Table 1 reveals that the perceived social impact of commercial sex work were crimes (age 13-20=56.91%>age 21-30=31.86%), erosion of love in marriage (age 21-30=56.27%> age 21-30=29.26%), childbirth out of wedlock (age 13-20=29.20 (56.59%>age 21-30=24.43%), denial of inheritance to children born through prostitution (age 13-20=55.94%>age 21-30=28.93%), drug abuse/addiction (age 13-20=53.69%>age 21-30=22.50%), single parenthood and its attendant challenges (age 13-20=55.30%>age 21-30=28.69), and separation from God (age 13-20=55.30%> age 21-30=27.00%).

Table 2
Perceived Health Impact of Commercial Sex Work Between Age 13-20 and 21-30 Female Single Youths in Bauchi metropolis.

n = 311

	No		Yes		No		Yes		No
S/no	Items	f	%	f	%	f	%	f	%
18	Sexually transmitted infections including HIV/AIDS	175	56.27	30	9.64	92	29.58	14	4.50
19	Subjection to violence by men	161	51.76	44	14.14	81	26.04	25	8.03
20	Bruises caused by violent men	174	55.94	31	9.96	85	27.33	21	6.75
21	Physical assaults caused by violent men	162	52.09	43	13.82	80	25.72	26	8.36
22	Fractures/dislocations caused by violent men	187	60.12	18	5.78	87	27.97	19	6.10
23	Pelvic inflammatory diseases	177	56.91	28	9.00	86	27.65	20	6.43
24	Cervical cancers	145	49.51	51	16.39	75	24.11	31	9.96
25	Unwanted pregnancy	176	56.59	29	9.32	83	26.68	23	7.39
26	Abortion and its related complications	180	57.87	25	8.03	79	25.40	27	8.68
27	Miscarriage caused by maltreatment by violent men	179	57.55	26	8.36	90	28.93	16	5.14
28	Reduction of life expectancy due to HIV/AIDS Infections	181	58.19	24	7.71	91	29.26	15	4.80
	Grand total		**55.70**		**10.19**		**27.15**		**6.92**

The results in table 2 show that the perceived health impact associated with commercial sex work among female single youths age 13-20 and 21-30 were fractures/dislocations caused by violent men (age 13-20=60.12% >age 21-30=27.97%), reduction of life expectancy due to HIV/AIDS infection (age 13-30= 58.19%> age 21-30 = 29.26%), abortion and its related complications (age 13-30 57.87%>age 21-30=25.40%), miscarriage caused by maltreatment by violent men (age 13-20=57.55%)>age 21-30= 28.93%), sexually transmitted infections including HIV/AIDS (age 13-20=56.27%> age 21-30= 29.58%), pelvic inflammatory diseases (age 13-20=56.91%>age 21-30= 27.65%) and unwanted pregnancy (age 13-20=56.59 age 21-30=26.68%).

Table 3
Summary of Chi-square Verifying the Difference in the Influence of Age on the Perceived Social Impact of Commercial Sex Work Among Female Single Youths Age 13-20 and 21-30 in Bauchi metropolis

S/No	Variables	Cal.X^2	Tab.X^2	Level of Significance	Df.	Decision
29	Social crimes	3.46	3.84	.05	1	*
30	School drop out	6.5	3.84	.05	1	**
31	Stigmatization	0.17	3.84	.05	1	*

32	Drug selling/Peddling	2.53	3.84	.05	1	*
33	Theft/stealing	2.36	3.84	.05	1	*
34	Sexual abuse	4.92	3.84	.05	1	**
35	Sexual harassment	2.44	3.84	.05	1	*
36	Separation from God	1.03	3.84	.05	1	*
37	Career jeopardy	4.63	3.84	.05	1	**
38	Marital problem	0.59	3.84	.05	1	*
39	Erosion of love in marriage	3.61	3.84	.05	1	*
40	Drug abuse	9.14	3.84	.05	1	**
41	Childbirth out of wedlock	9.1	3.84	.05	1	**
42	Girl child trafficking	1.89	3.84	.05	1	*
43	Single parenthood	0.00	3.84	.05	1	*
44	Child abandonment	0.06	3.84	.05	1	*
45	Denial of inheritance to Children born through prostitution	0.04	3.84	.05	1	*
	Grand X^2	**3.08**	**3.84**	**.05**	**1**	*****

KEY
**= Significant Difference
*= No Significant Difference

Table 3 indicates that school drop-out (cal.X^2=6.5>tab.X^2=3.84,P>.05), career jeopardy (cal.X^2=4.63>tab. X^2=3.84,p>.05), drug abuse (cal.X^2=9.14> tab. X^2=3.84, p>.05) and childbirth out of wedlock (cal.X^2=9.1 tab. X^2=3.84, P>.05) are perceived to have statistical significance influence on social impact of commercial sex work among female single youths age 13-20 and 21-30. On the other hand, the findings in table three revealed that crimes (cal. X^2 =3.46<tab. X^2 = 3.84,p<.05), stigmatization (cal.x^2 =0.17< tab. X^2 =3.84,p<.05), theft /stealing (cal. X^2 =2.36<tab. X^2 =3.84,p<.05), child abandonment (cal. X^2 =0.06< tab. X^2=3.84,p<.05)and drug peddling (cal. X^2=2.53<tab. X^2=3.84,p<.05) have no statistical significant influence on the health impact of commercial sex work between female single youths age 13-20 and 21-30. The overall chi-square result show that there is no significant difference in the social impact of commercial sex work between female single youths age 13-20 and 21-30 (cal. X^2 = 3.08< tab. X^2 = 3.84, p<.05).

Table 4
Summary of Chi-square Verifying the Difference in the Influence of Age. On the Health Impact of Commercial Sex Work Among Female Single Youths Age 13-20 and 21-30 in Bauchi metropolis

s/no	Variable	CalX^2	Tab.X^2	Level of Significance	Df	Decision
46	Sexually transmitted infection including HIV/AIDS	0.19	3.84	.05	1	*
47	Subjection to violence by men	0.09	3.84	.05	1	*
48	Bruises emanating from beating by violent men	1.09	3.84	.05	1	*
49	Physical assault by their purchasers	1.28	3.84	.05	1	*
50	Broken bones emanating from beating by violent men	5.54	3.84	.05	1	**
51	Pelvic inflammatory diseases (PID)	1.45	3.84	.05	1	*
52	Cervical cancers	0.67	3.84	.05	1	*

53	Unwanted pregnancy	2.8	3.84	.05	1	*
54	Abortion related complications	8.83	3.84	.05	1	**
55	Miscarriage caused by beating by violent men	0.34	3.84	.05	1	*
56	Reduction of life expectancy due to HIV/AIDS infection	0.36	3.48	.05	1	*
	Grand X^2	**2.05**	**3.84**	**.05**	**1**	*****

KEY
**=Significant Difference
*= No Significant Difference.

Table 4 shows that broken bones emanating from beating by violent men (calX^2=5.54> tab.X^2=3.84,p>.05), and abortion- related-complications (cal. X^2=8.83, P>,tab.X^2 =3.84,P>.05) are perceived to have statistical significant influence on the health impact of commercial sex work between female single youths age 13- 20 and 21-30. On the other hand, the results in table 4 indicate that age has no statical significant influence on sexually transmitted infection including HIV/AIDS (cal X^2=0.19<tab X^2=3.84, p<.05), physical assault by their purchasers (cal.X^2=1.28<tab. X^2=3.84, P<.05), Pelvic inflammatory diseases (cal. X^2=1.45,> tab. X^2=3.84, P<.05), bruises emanating from beating by violent men (cal.X^2=1.09> tab. X^2= 3.84, p<.05), cervical cancers (cal.X^2=0.67<tab. X^2=3.84,p<.05) and miscarriage caused by beating by violent men (cal. X^2=0.34>tab. X^2=3.84, p<.05). The grand chi-square result reveal that age has no statistical significant influence on the health impact of commercial sex workers (cal. X^2=2.05>tab. X^2=3.84, p<.05).

DISCUSSION

The finding reveals that commercial sex work is associated with crimes. This finding corroborates the study of McCarthy (1995) who conducted a study among street youths who were into prostitution and found that they were more likely to participate in criminal activities through their association with other street people. The study of McCarthy further reported that many prostitutes who were street youths were found to have involvement in theft and violent crimes. The finding further agrees with that of Parriott(1994) who found that the social impact of prostitution include: severe trauma, stress, depression, anxiety, self-medication through alcohol and drugs abuse and eating disorders. Parriott's study also found that the women in prostitution categorized themselves as chemically addicted and that cracked cocaine and alcohol were used most frequently.

The finding indicated that physical assault caused by violent men and fractures/ dislocation caused by violent men are some of the health impacts associated with commercial sex work. This finding corresponds with the study of Raymond (1995) who found that the physical health consequences of practicing commercial sex work include injury such as bruises, broken bones, black eyes and concussions. The finding further lends credence to the study of Parriott (1994) who found that half of the women in prostitution had been physically assaulted by their purchasers, and a third of these experienced purchaser assaults at least several times a year. Twenty three percent of those assaulted were beaten severely enough to have suffered broken bones. Two experienced violence so vicious that they were beaten into a coma. Further more, 90 percent of the prostitutes in Parriott study had experienced violence in their personal relationships resulting in miscarriage, stabbing, loss of consciousness and head injuries.

The finding indicated that a sexually transmitted infection including HIV/AIDS is one of the health impacts of women in commercial sex work. This finding corroborates that of Parriott (1994) whose study found that sexually transmitted infections including HIV/AIDS, Chlamydia, gonorrhea, herpes, human papilloma virus, and syphilis were alarmingly high among women in prostitution. The study further affirmed that only 15% of the women in prostitution had never contracted one of the STIs, not including AIDS, most injurious to health. General gynecological problems, but in particular chronic pelvic pain and pelvic inflammatory disease (PID) which account for most of the

serious illness associated with STIs. Parriott's study further found that among those women in prostitution, there was also a high incidence of positive pap smears several times greater than the women who were not into prostitution. More STIs can increase the risk of cervical cancer. The impact of commercial sex work on the social well being and the health of women in prostitution are sufficient reasons for the federal government to take pro-active measure to stop the trade of commercial sex work.

CONCLUSIONS AND RECOMMENDATIONS

Based on the findings of the study, it is concluded that:

1. crimes, erosion of love in marriage, childbirth out of wedlock, denial of inheritance to children born through prostitution, involvement in drug abuse/ addiction, marital Problems, single parenthood and its attendant challenges and separation from God are the perceived social impact associated with commercial sex work among single youths
2. The health impact associated with commercial sex work are fractures/dislocation inflict on commercial sex workers by violent men, reduction of life expectancy due to HIV/AIDs infection, abortion and its related complications, miscarriage caused by maltreatment by violent men, and sexually transmitted infection including HIV/AIDS.
3. There is no statistical significant difference in the social impact of commercial sex work between age 13-20 and 21-30 female single youths (cal. $X^2=3.08<$tab. $X^2=3.84P<.05$).
4. There is no statistical significant difference in the health impact of commercial sex work between age 13-30 and 21-30 female single youths (cal. $X^2=2.05<$tab. $X^2=3.84,p<.05$).

Based on the findings of the study, the following are recommended:

1. The federal Government of Nigeria should legislate against commercial sex work. This will reduce the number of commercial sex workers in the society. Reduction in the number of commercial sex workers may go a long way in controlling the spreads of sexually transmitted diseases.
2. The teaching of sex education which is already in the nation's secondary school curriculum should be reactivated and be taught at the three tiers to education. This will go along way in creating awareness on the adverse effect of prostitution.
3. There should be enlightenment campaign focused at male and female youths who are vulnerable to sexuality. This campaign should be through seminars, workshops and symposiums. This may help sensitize the youths on sex related matters.

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