

Sexual Webs Model for the Explanation of Unsafe Sexual Behavior: Knitting all the Perspectives of Unsafe Sexual Behavior

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Abstract

Whereas the contribution of unsafe sexual behaviors to global disease burden is not contentious, there are divergent perspectives of unsafe sexual act or practices. The different perspectives can be identified within the research traditions of Scholars in Public Health, Cognitive Psychology, Sociology and Political Economy. The challenge therefore had been in constructing an explanatory model that would knit these perspectives for analytical purposes in research on unsafe sexual behavior. Some researchers have to rely on more than one model or risk biases in the explanation of their findings, while some avoid the explicit use of theories or models. This study has knitted the various perspectives of unsafe sexual behavior in the sexual webs model for the explanation of contextual issues surrounding unsafe sexual behavior. Findings using this model will provide better insight on contextual issues surrounding unsafe sexual behavior for social policies and program interventions. We conducted a general search for qualitative research findings on unsafe sexual behavior through the Internet using Google search and Google scholar; 117 articles were obtained, but only seven had been synthesized using meta-ethnographic analysis to construct the sexual webs model. Furthermore, a lucid illustration of how to locate the various perspectives of unsafe sexual behavior within the constructs of the sexual webs model has been provided.

Key Words: Sexual webs; Explanatory model; unsafe sexual behavior; Knitting; Perspectives

1. Introduction

Despite the World Health Organization declaration of unsafe sex as the second most important risk factor for disability and deaths in the poorest countries and the ninth most important in developed world (Ezzati 2002); and the efforts to encourage safe sex, UNAIDS (2010) reports that in 2009 alone, globally, there were 2.6 million incidence cases of HIV; out of those numbers 1.8 million cases were in Africa. An estimated number of 370,000 children were newly infected in the same year. The global number of people living with HIV is estimated at 33.4 million, and that of the children living with HIV has increased to 2.5 million. It is estimated that yearly, 120 million women suffer from pregnancy complications; over 500,000 of them die from childbirth and the puerperium, out of which more than 99% are from developing countries (Glasier 2006). The yearly number of women with unwanted or unintended pregnancies is estimated at 80 million; 45 million commit abortion out of which 19 million are unsafe. Forty percent of the unsafe abortions are carried on women less than 25 years old. Maternal deaths from complications of unsafe abortion are about 68,000 women (WHO 2004a&b). Four common types (gonorrhoea, syphilis, Chlamydia, trichomonas) of bacterial and protozoa account for 340 million new sexually transmitted infections (STI) on an annual basis.

Whereas the contribution of unsafe sexual behaviors to global disease burden is not contentious (Collumbien et al. 2004; Slaymaker 2004), there are divergent perspectives of unsafe sexual act or practices. The different perspectives can be identified within the research traditions of Scholars in Public Health, Cognitive Psychology, Sociology and Political Economy. The challenge therefore had been in constructing an explanatory model that would knit these perspectives for analytical purposes in unsafe sexual behavior research. Some researchers have to rely on more than one model (for those who have used explanatory models) or risk biases in the explanation of their findings (for example, Lear 1995), while some avoid the explicit use of theories or models (for example, Flood 2003; de Visser 2005). Another direct consequence of lack of model knitting the perspectives is the proliferation of program interventions arising from findings based on the different perspectives. This study has knitted the various perspectives of unsafe sexual behavior in the sexual webs model for the explanation of contextual issues surrounding unsafe sexual behaviors. Such a consensus in analytical perspective would produce findings that will be of benefit to policy issues and program interventions.

A theory can be defined as a systematic way of understanding events or situation. It's consisting of a set of concepts, definitions and proportions that explain or predict these events or situations by illustrating the relationship between them (US National Cancer Institute 2005). Models themselves are not the facts but miniature representation of facts which illuminate the path of the researcher in search of these realities. A model is broader than theory- it consists of several theories brought together to explain a phenomenon or group of phenomena. All researchers engaged in the examination of unsafe sexual behavior have explicitly or implicitly used theoretical models in the conduct of their research.

2. Theoretical Perspectives

2.1 Perspectives of Unsafe Sexual Behaviors

Public health practitioners have seen unsafe sex as unprotected sex that leads to unwanted pregnancies and sexually transmitted diseases including HIV/AIDS. It is assumed that risky sexual behavior is characterized by early age or pre-marital sex, extra-marital sex, multiple partners without the use of condom which lead to unwanted pregnancies and sexually transmitted diseases. In order to promote health of individuals, efforts are directed towards prevention rather than treatment. In this regard, there is massive public awareness campaigns through sex education to enable individuals adopt safer sex practices (Hayes 1987; Miller-Johnson et al 2003).

Blumer (1937) perspective of symbolic interactionism views individuals to act and interact with others according to the meaning of things as presented in their mind. People are born with the capacity for speculation and it's shaped by their social interaction. People discover the meanings and the symbols to initiate their capacity for speculation through social interaction. This capacity in return shape their interaction process. Symbolic interactionism perspective views unsafe sex in lay perspective and according to context. Unsafe sex may be good so long as it's pleasurable. Contextually, sex between lovers (Williamson et al 2009; Pyett and Warr 1997) may be considered safe and no protection will be applied, while commercial sex may be deemed unsafe and participants would adopt protective measures (Pyett and Warr 1997).

The Cognitive psychology perspective assumes that the individuals' behavior is guided by four elements: susceptibility, severity, benefits and barriers. People usually evaluate the consequences of their behavior in terms of the cost and the benefits to be derived. If the individuals evaluate the cost of unwanted pregnancies, and sexually transmitted diseases including HIV/AIDS to be higher than the benefits to be derived from unprotected sex, they would adopt safer sex practices and vice versa (Bandura 1986)

Culture is the total way of life of a group of people. It involves learning and sharing of norms, belief and practices among a group of people from generation to generation. Helman (2000) suggested that culture should be understood by viewing it in respect to specific time and context. Kleinman et al (1978) said there are different and multiple normality for different cultures; the normal or unusual act depends on cultural belief. What constitute unsafe sex depends on the norms and values of that society. Premarital sex can be viewed as sin by a particular group while the other will view it as a demonstration of becoming an adult.

A society is a system. It has many parts that are different in function but contribute to the function of the whole. Parsons (1951) described the family as a unit of social institution which interact with its parts (members) warmly, and adjust with all situations and provide information to its parts (children) to avoid unwanted incidences and in this context unwanted pregnancies; and sexually transmitted diseases including HIV/AIDS. The family is expected to socialize its members to avoid unsafe sex and attendant unpleasant consequences. Therefore unsafe sex is viewed as an indicator of poor socialization. An individual that is properly socialized should avoid unsafe sex and its unpleasant consequences of unwanted pregnancies and sexually transmitted diseases. However, socialization is conditioned by the society. Busy parents may not have the time to socialize their children about sex and the Schools may not consider sex education as part of their curriculum; and where they do, it might not be adequate to prepare the young adults for the challenges of sexual life. Risk sexual behavior in reality eludes the function of the system. Parkin (1979) viewed that structural functionalism did not focus on the distinctive characteristics of the present society; arguably, one cannot turn a blind eye to the influence of higher position over lower position, the elders over younger ones and the males over females. Human behavior has both overt and covert reasons but the structural functionalists have ignored the covert reasons in their analysis.

Dodoo (2004) dwelling on the materialists perspective has argued that poverty; the disparity between the rich and the poor and gender roles play a vital role in structuring unsafe sexual behavior. The political economy of sexuality has viewed sexuality as not necessarily tied to traditional norms.

Sex as a commodity can be sold and consumed in the market. Individuals are less tied to cultural norms, family and kinship to become workers. Equally, individuals are trained to be workers that are less tied to cultural and family norms. They consume capitalist sexual norms and commodities and tend to practice premarital unsafe sex with many partners. There is also discriminatory offer of sexual services. Certain sexual acts and practices, such as kissing, fondling or other shows of affection are privatized, and excluded from the range of other sexual services offered to clients (Edwards 1993; Mckenaney and Barnard 1996; Waddell 1991 cited in (Warr and Pyett 1999). Safe sex is a commodity in capitalist societies beyond the reach of individuals who don't have the income to afford it. This perspective has seen unsafe sex as a product of capitalist and patriarchal society.

2.2 Limitations of Health Behavior Models

None of the health behavior models has incorporated all the perspectives of unsafe sexual behaviors in their postulates to provide a unified explanatory model for unsafe sexual behaviors. The health belief model, Theory of reasoned action/planned behavior and the Transtheoretical model dwell more on the psycho-social factors at the individual level to predict health risk behavior, behavior change and maintenance of safe behavior. Prominent concepts in health belief model are perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action and self efficacy. The theory of reasoned action/planned behavior emphasizes behavioral intention, attitude, subjective and normative norms; and perceived behavioral control. The Transtheoretical model provides the stages of intentional behavior change which form a process from initiation of change to the point where change has occurred. Concepts associated with this theory are pre-contemplation, contemplation, preparation, action, maintenance, pros, cons, confidence and temptation. Others concepts are consciousness raising, dramatic relief, self-liberation, helping relationships, counter-conditioning, reinforcement management, stimulus control and social liberation (Redding et al 2000).

The Social cognitive theory, Convergence of behavior change models and Ecological model for health promotion recognize the active role of the environmental factors on the behavior of the individuals. Key postulate of the Social cognitive theory is reciprocal determinism which is the interaction between the individual, his or her action and the environment. The Convergence model links Social learning, diffusion of information and Social networks theories. It emphasizes that social norms are best understood and influenced at the social network level within the existing chains of communication and natural flow of information. Reflecting on the limitations of health behavior models, Auerbach et al (1994) observed that most of the models are based on behaviors that are under intentional and volitional control, ignoring the fact that sexual behavior involves two people. It involves impulse and influenced by socio-cultural, contextual, personal and subconscious factors that may be difficult to influence. Alcohol and drug influence on sexual behavior stress the importance of understanding contextual issues surrounding sexual behavior. The observation made by Auerbach et al. (1994) indicates the dearth of the other perspectives of unsafe sexual behavior in the previous health behavior models. This project undertakes the task of knitting the perspectives of unsafe sexual behavior to provide an explanatory model for unsafe sexual practices.

3. Source of Data

We conducted a general search for articles through the Internet using Google search and Google scholar. The search was done using phrases such as “theories of behavior change”; “theories of sexual behavior”; “perception of AIDS and condom use”; “unsafe sex practices”; “HIV prevention”; “commercial sex workers”; “sexual behavior and sexually transmitted diseases”; “risk health behavior and HIV/AIDS”; “contraception and sexual transmitted diseases”; “programs for risk sexual behavior change” and “determinants of contraceptive method choice”. Scientific articles that met our research interest were selected from different Journals in Public Health and Social Sciences and Health Education. These articles were published between 1974 and 2010. We obtained 117 articles in all but selected high quality ones with clear research question(s), methods and findings drawn logically from the data. In the process of selecting the papers, we utilized the guidelines for accessing qualitative research as suggested by (Dixon-woods et al 2004). However, we avoided the fallacy of allowing the tail to wag the Dog (Barbour 2001). The articles selected had their study sites in Australia, Africa, Europe and America. Finally, only seven were utilized for this work.

We synthesized the research findings using meta-ethnographic analysis (Atkin et al 2008; Bernett-Page et al 2009; Britten et al 2002; Noblit and Hare 1988) to construct the sexual webs model. Furthermore, a lucid illustration of how to locate the various perspectives of unsafe sexual behavior within the constructs of the sexual webs model has been provided.

Table 1 Articles from which Data was obtained about here

3.2 Data Analysis

The data utilized for this work are from qualitative research findings on sexual behaviors. These articles were published in Public Health, Social Sciences and Health Education research Journals. See table 1 for the seven research articles from which the data for this work was obtained. The findings of the various authors can be construed as the exhibition of sexual attributes of the individuals. These attributes are sexual capacity, sexual motivation and sexual performance (Kinsey et al. 1948; Kinsey et al. 1953). The act of engaging in sex brings the individuals into sexual relationships. The different sexual relationships or sexual networks are conceptualized in this work as 'sexual webs'. These sexual attributes are conceived in this work as defined below.

3.3 Sexual capacity: It refers to the entire demographic, family, socioeconomic, community and global factors that influence the ability of an individual to negotiate and perform sex.

3.4 Sexual motivation: This refers to the expected benefits or any other thing(s) that encourage individuals to engage in sex. The ways individuals intend to perform sex and obtain the expected benefits are part of motivation.

3.5 Sexual performance: It refers to the things the individual actually do to enhance sex or during sexual encounters.

3.6 Sexual webs: It refers to the different types of sexual relations and sexual networks. The terms of agreement and beliefs about sex, characteristics and sexual activities amongst sexual partners may define a sexual web. Terms of agreement are implicitly or overtly expressed which may constitute rituals before or during sex (beliefs, gifts, drugs or/and alcohol use, romance or foreplay etc). Intergenerational sexual relations; sexual relations amongst drug and/or alcohol users; sexual relations involving private and brothel sex workers; secret sexual relations involving married individuals, widows, and widowers; sexual relations involving unemployed or employed single individuals; and sexual relations amongst adolescents and youths may define different sexual webs; instances where a sexual partner got fed up with the other's sexual debut and recent second encounter may be indication that they both belong to different sexual webs.

Table2: Synthesis of Data about here

Figure 1: Sexual webs Analytical Framework

The data from the research articles have been synthesized to obtain four basic constructs: sexual capacity; sexual motivation; sexual performance and sexual webs (Table 2); and the relationship between the constructs shown in figure1. Several factors can influence the individuals' ability to negotiate and performance sex. For instance, gender or masculinity can empower men more than the women; and the inequality would be translated into the advantage of men over women (women been dependent on men) in the ability to negotiate and perform sex. Poverty affects the sexual capacity of the individual by manifesting into pressing needs for food, shelter and other things (sexual motivation); and the engagement into sex as the available means to obtain the basic needs (sexual performance). Sexual performance varies by types of sexual relationship (sexual webs): individuals engage in sex with casual, messing or client partners using condoms; but with private, hubby-wifey or romantic partners, they use pills and no condoms; or no any protection at all. The beliefs about sex, terms of sexual relationships and characteristics of the individuals in the different sexual webs ultimately determine how sex would be performed.

3.7 Knitting the Perspectives of Unsafe Sexual Behaviors in the Sexual Webs Model

The various perspectives of unsafe sexual behavior are explicitly or implicitly implied in the articles. The works of Lear (1995), and Bauman and Berman (2005) reflect predominantly symbolic interactionism perspective; Williamson et al (2009) work reflects that of public health perspective; while Hunter (2002), and Pyett and Warr (1997) are examples of political economy perspective. Flood (2003) exemplifies the perspective of culture, while Wamoyi et al (2011) is a replica of structural functionalism perspective. All the studies observed effects of certain variables on sexual behavior that could not be explained by their dominant research perspective. For instance, the effects of pornographic movies; disco; Christmas, New Year and Easter celebrations on sexual behavior among young adults in Wamoyi et al (2011) cannot be explained adequately with structural functionalism perspective. It is global factor enhancing the sexual capacity of the young adults. Therefore, globalization is one of the sexual capacity variables. The knowledge of the modes of transmission and consequences of sexually transmitted infections and HIV/AIDS; the effects of unwanted pregnancies; and strategies to avoid them are sexual capacity variables. The activities of public health practitioners to educate the public about reproductive health issues; and enable them live healthy reproductive lives fall within the development of the individuals' sexual capacity to avoid unsafe sexual behavior and its consequences.

The perception of susceptibility to infections through unsafe sexual behavior, severity of infections and barriers to avoid unsafe sex are sexual capacity variables; while the benefits to avoid unsafe sex are sexual motivation factors. All the commercial sex workers avoided unprotected sex with clients (Pyett and war 1997). They had good knowledge of the consequences of unsafe sex with clients and benefits of avoiding it. However, they had unsafe sex with private partners which cannot be explained adequately with the cognitive psychology or political economy perspectives. Here, meanings attached to different sexual relations (sexual webs) must be observed to explain such sexual behavior. Meanings attached to sexual relations are sexual webs variables.

Gender, masculinity and culture are structural factors that are linked with socialization and sexual orientation. The family and other institutions of socialization provide services that may either strengthen or weaken the individuals' sexual capacity. Thus, they affect the sexual capacity of the individuals. They are sexual capacity variables. Poverty is another structural factor that translates into lack of basic needs of life. The need for food, shelter, clothing and other things are sexual motivation variables and the provisions of sexual services to obtain these needs belong to sexual performance variables.

At the sexual webs level, meanings are brought to bear on the different types of sexual relationships (the focus of symbolic interactionism). Here, there are issues of love; intimacy; 'hot moment'; discriminatory sexual practices (foreplay, sex without any protection, use of condoms etc); exchange of gifts and pleasantries (the focus of exchange theory); drugs and alcohol induced sex; and several other issues. The brief description above has knitted all the perspectives of unsafe sexual behavior in the sexual webs model. This model can be used by all researchers interested in the study of unsafe sexual behavior to explain their findings with great dexterity cutting across the various perspectives.

4. Limitations

Time and space have constrained us from illustrating with numerous examples on how sexual webs model can be used to explain research finding across the different perspectives. It therefore requires the ingenuity of the researchers to utilize the model correctly and within the context. The utilization of this model in studies on unsafe sexual behavior will provide further insights on its strength and weaknesses.

5. Conclusion

The construction of sexual webs model is an attempt to the knit the dominant perspectives of unsafe sexual behavior in an explanatory model. This kind of project has not been attempted before. The thinking is that researchers engaged in the study of unsafe sexual behavior from Public Health, Social Sciences and Health Education would begin to explain their finding in respect to sexual capacity, sexual motivation, sexual performance and sexual webs. This consensus would be beneficial to social policy issues and program interventions to promote safer sexual practices; and stem unwanted pregnancies and sexually transmitted diseases including HIV/AIDS. Married individuals who engage in clandestine sexual relationships (Sponaule 1989; Vangelishi and Gerstenberger 2002) are a group at risk and there is the need to understand the effects of these sexual webs on unsafe sexual behavior and attendant consequences among them. The increase of unwanted pregnancies and sexually transmitted diseases including HIV/AIDS in some parts of the world indicate the gap between efforts to improve safer sexual practices and reality that is shaped by structural factors (Parker 2001). Knitting the perspectives of unsafe sexual behaviors in an explanatory model would improve the quality of research findings for sound social policies and program interventions.

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Table 1 Shows Articles from which Data was obtained

Author(s)	Study site	Methods	Sexual behavior examined
Wayomi et al (2011)	Tanzania	Focus group discussions; In-depth interviews	Parental control and monitoring of young people’s sexual behavior.
Hunter (2002)	South Africa	Ethnographic method	Materiality of everyday sex among men and women.
Lear (1995)	USA	In-depth interviews; questionnaires; informal interviews.	Construction of risks and trust in sexual relationships among undergraduates.
Bauman & Berman (2005)	USA	In-depth interviews	Adolescent relationships and condom use among African American and Hispanics.
Pyett & Warr (1997)	Australia	In-depth Interviews	Sex work among females
Flood (2003)	Australia	In-depth interviews	Why heterosexual men do not use condoms.
Williamson et al (2009)	Scotland	In-depth interviews	Limits to the normalization of condom use among young women

Table 2: Synthesis of Data

Author(s)	Sexual behavior	Sexual capacity	Sexual motivation	Sexual performance	Sexual webs
Wamoyi et al (2011)	Parental control & monitoring of young people’s sexual behavior	Poverty; globalization (Emas; New Year; Easter; disco; pornographic movies); patriarchy.	Sexual pleasure; material needs	Secret (mostly unprotected sex); less secret sex	Those in school; those out of school.
Hunter (2002)	Materiality of everyday sex between men & women	Masculinity; gender issues; support from parents ;poverty	Subsistence; high taste; true love; women sought for power; success with women(men status)	With condoms; without any protection.	Multiple partners; sugar daddies; boyfriends.
Lear (1995)	Adolescents/young adults negotiation of sexual relationships	Levels of sexual education at home & schools; friends; gender issues	Trust; pleasure; intimacy.	With condoms; with oral contraception & no condoms; without protection; with alcohol	Casual and romantic.
Bauman & Berman (2005)	Adolescents sexual relationships		Pleasure; love; intimacy; monogamy.	With condoms; with pills & no condoms; without protection.	Messing; boyfriend-girlfriend; hubby-wifey
Pyett & Warr (1997)	Vulnerability to AIDS among female street sex workers.	Age; experience; gender issues; poverty; policies.	Money; food; accommodation; intimacy.	With condoms; pills & no condoms; drug induced sex; sharing needles or syringes; raped.	Multiple casual partners; clients; private partners.
Flood (2003)	Young men participating in unsafe sex	Perception of working & living environment as free of AIDS; masculinity; gender issues.	Sex the ultimate end of sexual practices; intimacy; pleasure; trust; monogamy.	With condoms; with pills & no condoms; without protection	Regular and casual.
William et al.(2009)	Normalization of condom use among young women		Pleasure; intimacy; trust.	With condoms; with condoms & breakage, bursting, splitting or slipping off.	Casual & boyfriends.

Figure1: Sexual Webs Analytical Framework for the Examination of Unsafe Sexual Behaviors (Knitting all the perspectives)

