Socio-Cultural Practices in Ikwerre Land and its Implication for the Scourge of HIV/AIDS

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Abstract: The activities through which society defines and identifies itself are unique and vary from society to society. These activities manifest themselves through values, norms, beliefs and practices which may have positive and negative implication for the wellbeing or otherwise of the population. Most of these cultural norms and practices are related to human sexuality while others are related to the day-to-day practices and activities of the society. Cultural norms and practices relating to sexuality contribute to the risk of HIV infection. The method of data collection in this ethnographic survey is personal interview. This study, “Perils of HIV/AIDS in the Cultural Practices in Ikwerre land” attempts to highlight some cultural and socio-religious rites that enhance the spread of HIV/AIDS in a 21st century Ikwerre society. The study reveals that although these cultural and socio-cultural rites function to give a sense of cultural identity and enhance the survival of the people, they threaten and destroy the very identity, wellbeing and survival of the people, thereby defeating the very functions they intend to perform for the people. This paper, therefore, stresses the need to evaluate and re-evaluate HIV/AIDS prone cultural and socio-religious practices that are inimical to the preservation of Ikwerre ethnic group.

Key words: Ikwerre, Sexuality, HIV/AIDS, Circumcision, Polygamy, Levirate Marriage

Introduction
The need to sustain ones cultural identity in a globalized and localized world is of great concern to Africans as the forces of change make gross incursion on the social, religious and cultural fabrics of indigenous societies. The place of social, religious and cultural rites in indigenous African societies cannot be over emphasized. The observance of these rites gives individuals a sense of belonging and identity in their various communities. Adherence to these rites which are regarded as common heritage of the people is believed to create a sense of strong communal bond that promotes peaceful co-existence; thus, communal integration is vested on common values (Muhammad-Oumar, 2010). Non-compliance to these religious, social and cultural rites are considered anti-social and as such frowned at. Awolalu and Dopamu (1979) maintains that
the standard of a society if properly adhered to, will bring about the welfare of not just the individual but to the entire society; for this reason, the Ikwerre people have continued to practice their cultural heritage despite the wave of modernity not minding the health implication of some of these practices. Following the assertion that some socio-cultural rites have been identified as means of transmitting certain diseases, how then do we maintain our cultural identities? Some cultural practices have been seen as means of transmitting sexually transmitted diseases. This study is, therefore, poised to evaluate certain cherished religious and socio-cultural practices responsible for the transmission of HIV/AIDS in Ikwerre land. In other words, the purpose of this study is to analyze the relationship between certain cherished cultural practices and the spread of HIV/AIDS in the Ikwerre ethnic nationality.

**Methodology**

The research design employed is the ethnographic survey. We made use of unstructured questionnaire to obtain data. This is because most of the informants did not acquire formal education. For the purpose of this research work, the method used in collecting data included the primary and secondary sources. The primary sources are oral interviews from experienced aged people mainly farmers, fishermen, traders and those who have been participating directly in performing these traditional duties which lead to the spread of HIV/AIDS in Ikwerre land. Due to the fear associated with written record some informants deliberately hoard some information, which could be degrading on the image of the land. It is hoped that this piece of work will be an asset towards understanding the relationship between socio-cultural practices and the spread of HIV/AIDS in some African societies like the Ikwerres.

**Ikwerre ethnic group**

Ikwerre is one the ethnic groups in the Niger Delta region of Nigeria; they are predominantly farmers and are very friendly and receptive to visitors that live amongst them. In fact, the one and only garden city in Rivers State is located in the upland region of Ikwerre land; that is why the Ikwerres have so many non indigenes living amongst them. Politically, the people have no central government as each clan has her own *Nyewneli* (Paramount Ruler). However, a central place of gathering called the *Ogbakor Ikwerre* is the point of convergence as an ethnic group. The receptive nature of the Ikwerre people has endeared so many people into her communities such that it is almost looking like a pluralistic society. Interestingly, despite the seeming multi-cultural setting of the Ikwerre societies, the people are still engrossed in their traditional practices which they regard as their cultural values without minding the health implications of such practices.

**Conceptual Framework**

Irwin and Millen (2003:xxv) reports that Human Immune Deficiency Virus (HIV) is the virus that causes AIDS. Once introduced into the blood stream, HIV attacks certain cells of the immune system called the “hyper T-cells” or CD4cells which help the body to fight off infections. HIV invades CD4 cells reproducing within the infected cells and then bursting out into the bloodstream. The immune system respond by producing antibodies to fight the virus and making more CD4 cells to replenish those killed but this immune system response is untimely ineffective in the latter stages of infection. HIV destroys increasing number of CD4 cells until the body’s capacity to fight other viruses and bacteria gradually begins to decline. Eventually the immune systems stop functioning leaving the body defenseless against other infections agents.
They further state that Acquired Immune Deficiency Syndrome (AIDS) is the medical designation for a set of symptoms, opportunistic infections and laboratory markers indicating that a person is in an advanced stage of HIV infection with and impaired immune system. Although some people may develop AIDS much sooner it takes an average of ten years from the time one is infected with HIV to developed clinical AIDS. As immune functions began to decline the body becomes prone to cause illness as a result of a weakened immune system. The characteristics are spectrum of opportunistic infections that a person is likely to get which vary in different regions of the world depending upon the locally predominant infectious agents.

The origin of this disease has puzzled scientists ever since the disease has been the subject of fierce debate and the cause of countless arguments with everything from a promiscuous individual to socio-cultural and socio-economic factors. According to World Council of Churches (WCC) (1997) the origin of HIV/AIDS is unknown, however it was first reported among gay men and was causing death at an early age. This factor was publicized sensationaly by the mass media worldwide, hatching the notion, “AIDS equal gay plague” on the minds of people everywhere. After gay men, the next most commonly stereotyped group to be affected was intravenous drug users. Today, HIV/AIDS increasingly strikes women, children, heterosexuals and those who have not been sexually active. It strikes not just persons out there but members of local communities, familiar neighbours and even family members.

HIV/AIDS has been recognized as a socio-cultural disease and the paradigm of its infection and spread particularly within the local communities is a reflection of the socio-cultural profile of the people. According to U. E. Dibua (2010) HIV/AIDS is a social disease and the outcome of social behaviour. Efforts at controlling the pandemic meaningfully and adequately is the need to identify and evaluate those cultural norms and practices that are likely to expose individuals to the disease. The Joint United Nation Program on HIV/AIDS (UNAIDS) emphasized the need to address the socio-cultural behaviours and values of the communities that expose individuals to HIV risk behaviours. (HIV/AIDS.com/journal).

At the early stage of the war against HIV/AIDS many countries were not among the core players. Many played marginal roles, received directives from global agencies and made little or no input of their own. This globalization of AIDS tended to obscure the culture specific nature of the disease and down play the reference of culture in taming the scourge (Anikpo and Atemie: 2006). It was discovered that no much advance can be made without adopting culturally appropriate measures in the prevention and cure of the disease. International effort cannot make a dent on HIV/AIDS without being complemented by national and grassroots efforts. The mainstreaming of culture in the fight against HIV/AIDS means that people have to be engaged in their own cultural references in order to change their attitude and behaviour towards HIV/AIDS.

Anikpo and Atemie: (2006) report that one way of looking at culture and HIV/AIDS in Nigeria is to examine the means by which most Nigerians contact HIV/AIDS, how culture can help in preventive effort, and the discriminatory practices against people living with HIV/AIDS in many Nigerian societies as well as the facts and myth that are prevalent in those communities. With over seventy percent still living in the rural communities in Nigeria many still attach themselves to indigenous belief systems and values and to culture bound perspectives which inform their attitude to the virus. The HIV/AIDS culture is very relevant to Nigeria as she seeks ways to curb the scourge.

Nteziryao (2009) postulates that culture play a significant role in people’s life in Africa. There is a need to take culture seriously in order to look at salient elements of cultural practices that influences the spread of HIV/AIDS. Cultural practices fulfill a purpose for those who
practice them. Although cultural practices may have a positive impact on health, they may also be harmful. Nteziryayo (2009) opines that a harmful cultural practice can be changed only when the people who practiced it understand the danger, risk and indignity of the practice.

For instance, negative attitude towards condoms as well as difficulties negotiating and following through with their use is one of many problems. According to Mswela (2009) men in South Africa do not want to use condoms because of the belief that flesh to flesh sex is equated to masculinity and is necessary for male health. Certain sexual practices such as dry sex (where the vagina is expected to be small and dry) and unprotected anal sex carry a high risk of HIV infection because they cause abrasions to the linings of the vagina and anus. Socio-cultural norms build notions of masculinity which in turn create unequal power relations between men and women. Socio-cultural factors in traditional beliefs and practices in African society play great roles in determining the position of women and girls in the society. Masculinity requires men to be more dominating, knowledgeable and experienced in life. These assumptions put many young men at risk of HIV infection as such cultural norms prevent them from seeking information or admitting their lack of knowledge about sex or methods of protection.

**Traditional practices and the Spread of HIV/AIDS in Ikwerre land**

The HIV/AIDS epidemic in Ikwerre land has been recognized as a socio-cultural type. Some of the socio-cultural norms and practices that have led to the spread of HIV/AIDS among the people include preference for a male child, wife inheritance (levirate marriage) polygamy, blood oath and circumcision. This section will highlight on these in relation to how they facilitate the spread of HIV/AIDS in the land.

Wife inheritance also known as levirate marriage is one of the socio-cultural practices that facilitate the spread of HIV/AIDS in Ikwerre land. This type of marriage is common among Ikwerre communities. When a man who have performed the full marriage rites dies without a male heir and the widow is still young and in her prime to give birth, she will be required to choose for herself someone among her late husband’s brothers or relatives, or the family might impose someone on her that will bear male child or children that will succeed or continue the lineage of her late husband. The man who inherits the widow might be having illicit sexual affair with other women and this might put him at high risk of contracting HIV and this virus may consequently be passed on to the widow. Also the widow might be the source of the virus and she may spread it to her new sex partners. In this instance, the new sex partner who has contracted the virus from the widow would pass it on to his other wife/wives or concubines, if any. Children born during this period are bound to be infected through their mothers. The fact remains that in most Ikwerre homes members of a particular family unit share sharp objects. So the spread of the HIV/AIDS virus is unlimited (Chinedu Igwe, personal interview, 2019).

Similar to the above is polygamy. Polygamous marriage is one of the most common forms of marriage practice in Ikwerre land. This is because the society in question is agrarian and patriarchal in nature. An Ikwerre man with numerous wives and children is highly respected. Multiple sex partnership encouraged by polygamy exposes the spouses to HIV/AIDS. The man in polygamous marriage may not fully satisfy the sexual urge of all his wives and this might lead the younger wives to go searching for sexual satisfaction from younger men of the same age bracket. These younger men may also have other sex partners and these might put him at a high risk of contacting the HIV virus. This virus may consequently be passed on to other sex partner, from a polygamous home who in turn transmits the virus to her husband for an onward
transmission to his other wives and members of the polygamous family (Nwobodo Kamalu, Personal interview, 2018).

Polygamy is widely practiced in many African societies. Multiple sex partnership encouraged by polygamy exposes the spouse to HIV/AIDS. However, M. Mswela (2009) opines that it would be wrong to conclude that polygamy is a primarily harmful practice, which leads directly to the spreading of HIV/AIDS, but the manner in which persons in polygamous marriages conduct themselves may facilitate the spreading of HIV/AIDS. On the other hand, we cannot completely guarantee that partners in monogamous relationships are completely secured from the virus; the risk of contracting HIV/AIDS is much higher in polygamous marriage than in monogamous marriage. There are more potential victims of HIV/AIDS in a polygamous family circle than in a monogamous union (Badumere Amadi, personal interview, 2009).

Blood oath is another cultural practice that facilitates the spread of HIV/AIDS in Ikwerre land. Blood oaths are taken in order to solidify a relationship between two or more group of person that have differences and intend to settle their differences (Orji, 2018). The reason for the blood oath is to prevent them from having evil intentions towards each other. Blood oaths sometimes serve as binding force to a covenant (Chima, 2018). It is believed that whosoever goes against the blood oath will die or certain calamites will befall the person. This religiocultural practice, which serves a cherished function among the people, enhances the spread of HIV/AIDS in the sense that the priest or person conducting the blood oath uses a single unsterilized instrument to puncture the skin of all participant of the blood oath. This act put them in danger of contracting HIV/AIDS.

Another cultural practice is love oath by young male and female who are in love, they take this oath for the fear that separation either to further ones education or in search of greener pasture could cause one party to find another love in the new place. Hence, youths in their exuberance and ignorance take love oath which involves cutting their skin to express blood with which both parties after making pronouncement/ confession upon the invocation of any deity which they revere, vows to remain bonded for life. This crude practice still exists among the Ikwerre people and is taken without knowing the health status of the parties involved.

Male and Female genital mutilation/circumcision is a common cultural practice in Ikwerre land that makes boys and girls vulnerable to HIV/AIDS. This practice is a socio-religious rite of passage that prepares a young boy or girl for man/womanhood and marriage. In Nigeria and Africa at large, circumcision is a way of safeguarding chastity and virginity among young women. The Ikwerre ethnic nationality holds the notion that the clitoris of a woman increases her sexual urge and this might lead her into a promiscuous life. For the woman to remain faithful to her husband or remain a virgin there is need for her to undergo this socio-religious rite of passage. Female circumcision is performed on a girl that has attained the stage of puberty while in some Ikwerre communities the girl child is circumcised at birth just like her male counterpart. The reason for male circumcision in subjected to Judaeo-Christian explanations. The object or instrument used in performing this act is seen as a sacred object (Chisa, 2018). It is the same unsterilized sacred object that is used for all the young boys and girls who undergo this socio-religious rite of passage in a particular community. Besides, this cultural practice in indigenous societies is often performed under unhealthy condition with unsterilized instrument, which exposes them to HIV/AIDS. Furthermore, circumcised females are prone to bleeding during sexual intercourse, which increases their susceptibility to the virus.
Conclusion
This study has highlighted some cherished religious and socio cultural practices that enhance the spread of HIV/AIDS in Ikwerre land. Some of the cultural practices are rites of passage that serve meaningful functions such as a sense of belonging and identity among the people of Ikwerre. Irrespective of the cultural functions they serve, these cultural and socio-religious rites seem to threaten the very survival and existence of an ethnic group which they are meant to preserve by exposing them to the scourge of HIV/AIDS in the land. Consequently, it is expedient that certain actions be taken to warn the people of the implications of these cultural and socio-religious practices that are, in the long run, inimical to their very wellbeing and survival as an ethnic group in Rivers State.

There is, therefore, the need, on the part of the National Orientation Agency (NOA) and other governmental agencies at the federal, state and council levels, health workers, meaningful individuals and religious institutions, to embark on an aggressive and massive enlightenment campaigns in schools, churches, mosques, market places, town unions and associations, town halls, and village meetings to educate the people about this epidemic. We also recommend that if any of these and other cultural and socio-religious practices capable of spreading HIV/AIDS are to be observed, utmost healthcare measures must be observed in the course of performing these rites. The objects for circumcision must be sterilized. Those that intend to engage in polygamy and levirate marriage should be subjected to HIV/AIDS screening. Blood oath should be discouraged. The blood of those whom the oath would be administered to should be tested. Finally, there is the need to evaluate and re-evaluate those cultural and socio-religious practices that are likely to expose individuals to the disease.

References


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