

# Emotional Intelligence and Self-Concealment as Predictors of Voluntary Counselling and Testing Seeking Behaviour

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**Abstract:** *Self-concealment has been observed as a major hindrance in seeking voluntary counselling and testing hence low uptake in counselling and testing. Investigation of self-concealment and Emotional Intelligence as determining factors in seeking HIV voluntary counselling and testing among undergraduate university students was undertaken with a sample size of 368 respondents. Emotional Intelligence Scale, Self-concealment scale and VCT seeking behaviour scale questionnaire was used. Regression analysis results revealed that self-concealment significantly determined individual's level of seeking voluntary counselling and testing. However, ones level of Emotional Intelligence in seeking VCT clinics was found to be important.*

**Keywords:** Self-concealment, Emotional Intelligence and Voluntary Counselling and Testing Seeking Behaviours.

## 1. Introduction

Despite several efforts put in place to address HIV and AIDS education, awareness, prevention and control programmes in public universities in Kenya, students' utilization of Voluntary Counselling and Testing (VCT) services is still wanting compared to students' total population in the public universities in Coast Region of Kenya (NACC -ACU Universities Reports ,2012; CHE Executive Report, 2012) Behaviour change education and counselling still needs to be strengthened among the university students. Human Immunodeficiency Virus (HIV) prevalence among the young adults also still poses a national concern which requires continued investigation in institutions of higher learning.

The recent data (KNACC, 2013, UNAIDS 2013, WHO, 2013) revealed HIV Kenya national prevalent rate at 5.6% with about 100,000 new infection rates yearly. On the other hand HIV infections among those aged between 15-24 years where majority of university undergraduate student fall were reported at 2.1%, while youth on ART are approximated at 200,000 with female infection at 12.8% (KAIS 2012) and the Universities HIV prevalence rates ranges was approximated at 0.2% -15% (CHE report, 2012, NACC 2013)

This situation calls for cautionary measures and further assessment on contributing factors hindering VCT services accessibility to enhance mitigation among these particular population. Factors which have been investigated to affect VCT accessibility includes; stigma and discrimination, fear, cultural perception and ignorance among others (Mugo, Kibachio, Njuguna, 2010; Onah, Ibeziako, Nkwa, Obi, Nwankwo, Obstet 2008). One of the areas which had not adequately been investigated is to what extent Self-Concealment (SC) and Emotional Intelligence (EI) influence voluntary counselling and Testing seeking behaviour.

## 2. Review of Problem Situation

The rate of accessing the VCT clinics trend has been reported as low as 11.4% (NACC; Universities ACU, VCT quarterly reports, 2013, NACC; Biannual Conference report, 2012, CHE ACU reports analysis, 2013). This low rate points to low VCT services access, which is equally reflected in KAIS, 2012 report. Only 80.7% are reported to have been tested among the youth aged 19-24 years yet new infection rate is estimated at 29% and youth living with HIV virus have been estimated at 16%. The VCT access low rate may translate to indulgence in unprotected sex or contraction of HIV virus and re-infection due to ignorance about one's HIV status. The immediate access to such knowledge is at the VCT clinics. This trend creates a gap for further investigation in the fight against HIV prevention. Perhaps education on the role of emotional intelligence and self-concealment in VCT seeking could hearten VCT seeking behaviors and reverse this trend. University student's lifestyles and characteristics may also likely predispose them to HIV and STIs infection (CHE Executive consultative forum, 2010 report) yet their VCT accessibility is reported as low. Perhaps strengthening cognitive behavioral counseling approach using emotional intelligence domains as life skills and self-concealment could help improve VCT seeking behavior to achieve positive living whether one is tested HIV positive or negative. This approach could contribute to reduction of risky sexual behaviors and enhancement of VCT seeking behavior. From the reviewed studies and others, there is need to investigate whether emotional intelligence and self-concealment could predict VCT seeking behavior among Public University students in Coastal region of Kenya.

### The implication of this study outcome

This study provides robust evidence of how self concealing tendency as a human characteristics is a high burden to government attempts to reduce HIV virus infection. This is behavioral emotional problems among people at all age level but influences most at risk group of whom the young adults fall. High level of Emotional Intelligence skills if embraced

may raise possibility to risk reduction factors which intern may prevent the spread of the virus among this age population. The young adults often experience a flush of strong emotional instability due to their high drive of heightened sexual reproductive hormonal triggers. The ability to attain self control, self regulation, and self motivation and make correct decision which can deter them from risky sexual behaviors is a great achievement amidst this confusion. Further assessment in HIV prevention should include behavioral risks in sustaining mental health among the young adults

#### **Study objectives:**

- 1) To establish the extent Emotional intelligence and self-concealment predict VCT seeking behaviors.
- 2) To establish the relationship between Emotional Intelligence and VCT seeking behaviours.
- 3) To determine the extent Self-concealment influences VCT seeking behaviour
- 4) To establish the relationship between Emotional intelligence and self-concealment
- 5) To create a predictive model of VCT seeking behaviour from emotional intelligence and self-concealment.

### **3. Methodology**

#### **Participants**

A correlation study was conducted to yield a predictive model of VCT seeking behaviour from Emotional Intelligence and self-concealment. Purposive sampling technique also yielded participating public universities due to VCT unit requirement. Proportionate stratified sampling technique was used to recruit students from universities faculties to ensure proper representation. Out of the undergraduate total population of 9166 a sample size of 368 (Female 146; 39.67% male 60.32%) participated with majority's age range between 18-26 years (81%).

#### **Study Instruments**

The Self-Concealment Scale (SCS) by Larson & Chaistein, (1990) was administered to measure ones tendency to conceal personal and possible distressing information from others. The instrument had 10 items which the researcher adapted to measure students' tendency to conceal personal information towards seeking VCT services at the University VCT clinics. The instrument reliability coefficient was reported at 0.81 from study pre-test confirming the original scale reliability index of .82., validity .072 yielded in other studies: Mokua, (2010) in Africa, Ulysal, Lin and Knee, 2010;; Kelly , 2002); Cepeda-Benito, Antonio, Short and Paul, (1998).

The emotional intelligence scale (EIS) was an adopted version of items from emotional intelligence developed by Wood and Tolley, (2003). The instrument had been used by others; Segal, (1999); Lyusin, (2006); Goleman, (2001); Schuttle et al., (1998); Nastas, (2010); Rocco, (2004) and Nzomo, (2012). The instrument had 20 items composed of five areas of Emotional Intelligence, namely; self-awareness, motivation, empathy, social skills and self-regulation. The items comprised typical day-to-day situations in which one would be expected to respond

VCT Seeking Behaviours Scale (VCT- SBS) was used to find out student's behavioural patterns in seeking VCT services within the university's VCT clinic. The scale had 10 items. The items were structured on a five point Likert scales ranging from strongly agree to strongly disagree.

#### **Data collection Procedure**

The instruments were administered to participants in their classes. Consent was sought. Time was taken to explain to participants what the study was all about and its benefits. Clear instructions were then given. They were allowed to ask any questions of which the questions were answered and clarifications made. Participants were assured of privacy and confidentiality. Questionnaires which had already been coded for privacy and anonymity were then administered within time required and collected immediately after the exercise.

#### **Data analysis:**

Spearman Rank Order Co-efficient correlation, Chi-square test and regression analysis was used to test the null hypothesis at 0.05 significance level. A model was further created to fit the prediction of VCT seeking behavior to ascertain the predictability level of VCT seeking behavior among the clients visiting the VCT clinics.

The multiple regression analysis was also to yield co-efficiency of determination ( $R^2$ ) to explain the amount of variations caused by the independent variable in the equation to allow further research on the remaining percentage not taken care of by the equation.

The regression analysis P-value  $> 0.05$  significant level was further to help determine which variable was more significant in predicting VCT seeking behavior among the independent variables.

**Ethical Considerations:** Research permits were obtained from National Commission for Science Technology and Innovation (NCSTI). Consent was sort from the participants on voluntary basis. No names were required on the questionnaire for anonymity and confidentiality. Dissemination of the findings would be shared with respective institutions.

### **4. Results**

Majority of students participants were between 18-26 years of age (80.7%) while the total participant's distribution was 57% male and 43% female.

#### **Relationship between Emotional Intelligence, Self-Concealment and VCT seeking behaviour.**

Chi Square test result revealed that there is a statistical significant association between the levels of emotional intelligence and VCT seeking behaviour ( $\chi^2 = 13.139$ ,  $df = 6$ ,  $p\text{-value} = 0.041 < 0.5$  significant level) and that there is also a statistical significant association between levels of Self Concealment and VCT seeking behaviour. ( $\chi^2 = 24.886$ ,  $df = 9$ ,  $p\text{-value} = 0.003$ ). Implying that

those who have high levels of emotional intelligence may also have high or positive attitude towards accessing VCT clinics while those self concealment also plays a strong hold in decision making in VCT clinics accessibility.

#### **Emotional intelligence as a predictor of VCT seeking behavior**

Spearman Rank Order Correlation co-efficient was used to test the hypothesis results was ( $\rho = 0.375$ , P-value  $> 0.05$  significant level) this result implied that emotional intelligence was statistically a significant predictor of VCT seeking behavior. We may deduce from this results that it appears the more one embraces emotional intelligence the more one sees the importance and benefit of visiting VCT to access its services, Hence positive perception to VCT seeking.

#### **Self-concealment as a predictor of VCT seeking behavior**

Spearman Rank Order Correlation co-efficient was used to test the hypothesis. The results was ( $\rho = 0.634$  p-value  $> 0.05$  significant level). This result shows that self-concealment positively and significantly correlates with VCT seeking behavior. The results may imply that the more people self-conceal, the more the need to seek voluntary counseling and testing services arises.

#### **Relationship between Emotional intelligence and self-concealment**

Spearman Rank Order Correlation co-efficient was used to test the hypothesis. The results was ( $\rho = 0.302$ , p-value  $> 0.05$  significant level) this result revealed that there is a positive correlation between emotional intelligence and self-concealment, an influence which also helps to determine the VCT seeking behavior uptake. This implied that if the level of self-concealment is high, then the probability of high VCT seeking may be hindered. There could also be possibility that if high self-concealment is observed, it might also lead to high VCT seeking behavior since those who highly self conceal suffer psychological distress which may make them sort voluntary counseling.

Other studies such as Michele, (2012) results suggested that emotional intelligence has the potential to offset behaviours which have been associated with higher levels of health behaviours. This relationship is further exemplified in this study's conceptual frame work. The frame work presupposed that the three variables are interrelated, (see Fig 1.1). Probably this explains the fear perception remitted on VCT seeking thought and behaviour.

#### **VCT seeking behaviour predictive model**

A model to predict VCT seeking behaviour from emotional intelligence and self-concealment was created using a multiple regression analysis. The model equation created was ;

$$VCT\ Seeking = 45.505 + 0.184 (Self\ concealment) + 0.049 (Emotional\ Intelligence)$$

A Constant 45.505 was drawn from the regression point of independent and dependent variables. The model results were fit as VCT seeking predictive model. Therefore VCT counselors can apply these tools to determine clients VCT seeking behavior and plan an appropriate intervention

counseling approach. These results lends credence to other studies such Bar-On (1997) and Mayor and Salovey (1997) models which revealed that the models were fit for elevating psychological distress when emotional abilities are applied in various situations just in the same way the VCT seeking model could apply.

Similarly Vogel and Armstrong, (2010) model revealed self-concealment as predictors of willingness to seek health behavior through the mediators of negative social experiences and psychological distresses. However, the researchers may use the VCT seeking behavior model discretely due to the kind of participants involved. Factors of age, location of study and level of literacy may need to be taken into consideration when applying the model even though the purpose of the VCT seeking model was to predict individual's level of VCT seeking behavior.

The regression analysis result also revealed positive significance level between independent variable and dependant variable. Thus; self-concealment was  $t = -2189$ , p-value =  $0.029 > 0.05$  significant level while emotional intelligence was  $t = .088$ , p-value =  $0.930 < 0.05$  significant level. This means that Self-concealment significantly predicts VCT seeking behavior at  $p > 0.05$  level of significance. Self-concealment therefore is a stronger positive predictor of VCT seeking behavior. The implication in this result is that even though self concealment emerges as a stronger predictor of VCT seeking behavior, emotional intelligence appears a mediating factor of positive influence towards VCT seeking behavior. This is crucial consideration factor among health providers. It cannot be ignored.

## **5. Discussions**

This study sought to investigate emotional intelligence and self-concealment as predictors of VCT seeking behaviours among the university students in coastal region of Kenya. The findings of the study were discussed thematically according to the study objectives.

The present research makes several contributions to the literature. First it provides more empirical evidence on the link between Emotional Intelligence, Self-Concealment and VCT seeking behaviours. Although past research has shown that self-concealment is associated with negative outcomes, the researcher did not come across any studies that linked self-concealment with emotional intelligence as determiners of VCT seeking behaviours.

Secondly, although different researchers have proposed various models in Emotional intelligence and self-concealment distinctively, again the researcher was not aware of any studies that have come up with the VCT Seeking Behaviour model predicted from Emotional Intelligence and Self-concealment and can therefore be used to predict the level of VCT seekers in any given population, and can be used by other researchers and VCT counsellors to assess the clients level of VCT seeking then counsel the client appropriately.

Thirdly, this research addresses the fact that high self-concealers are low VCT seekers, while high Emotional



intelligence levels are high VCT seekers. But this study reveals that apparently, that assumption is wrong. In fact high self concealers are equally high VCT seekers. Further studies should investigate this outcome.

However Tamayo, et al (1999) study links to this study from fear factor syndrome of men visiting the VCT. It was observed that men feared stigma and discrimination due to cultural practices orientation. A point proven by this study. Tamayo et al study observed that the cultural perception on VCT visitations allows women to visit clinics and hospitals much more frequently than men. A trend which was also observed in one of the studies carried out in Ghana, (Dapaah, 2012) among medical university students that men are more high self-concealers than women. The study revealed that clients were more comfortable with self-concealing their HIV status and experiences within the support groups they had in the clinic counselling sessions than at home.

Similar characteristics were observed on emotional intelligence, self-concealment and VCT seeking behaviour sub elements. Goleman's (2005) study described gender characteristics of both male and female's emotional intelligence as varying at different levels. A trend observed in these findings that people often differ in expressing their emotional abilities. However, it is important to note that Goleman, (2005) did not peg his study on relation to HIV and AIDS pandemics.

In another study in Zambia, HIV-positive nurses clients who self-concealed their illnesses, choosing instead to suffer in silence while risking emotional exhaustion, depression, trauma and burnout (Dieleman's, 2007) helped to further explain clients' fear associated with the VCT seeking. It is important to note therefore, that not only men fear self-disclosure; women also develop high tendencies of self-concealment when comparison is done on the scale levels. Both levels are high. On the other hand the female students score (52%) on being traumatized. This helps to explain why women suffer depression more compared to men.

Jaballow (2010) study in Gambia University among the medical student's further help to indicate low VCT visitation uptake as opposed to the total students population in the universities. Jaballow study and the current study findings, support the 30th Commonwealth Regional Health Community Services (CRHCS) Conference, (2012) which passed its resolution on the need to strengthen effective response to HIV epidemic and formulate regional strategies on VCT counselling that are youth friendly. Such steps would help speed up prevention of HIV and AIDS among the youth. The same sentiments were also echoed by the UNGASS declaration of (2011). The declaration called upon the governments of all nations of the world to develop more access to information and education especially youth-specific which would provide life skills required to reduce risky and vulnerability of the youth to HIV infection. Students' knowledge about HIV transmission and symptoms are still confusing (Haeding, Anadu and Chimpeau's, 2011). Hence further study.

These results are further explained in Mokua (2007) study with results pointing out weak negative correlation ( $r = .068$ ,  $p > 0.05$  significance level) between self-concealment and self differentiation in VCT seeking. Meaning, students who had low self-concealment had a higher probability of seeking VCT than students with high self-concealment. Self-concealment appears the major determiner in VCT seeking behavior than emotional intelligence. The result of this study is also in tandem with Kelly and Achter, (1999) description of self-concealment. That self-concealment is a psychological construct operating as a predisposition to actively conceal what one perceives as private, secretive and embarrassing. The more oneself conceal the more one drifts away from VCT seeking behavior.

## 6. Conclusion

In conclusion, the study observed the critical need of adopting emotional intelligence skills in voluntary counselling and testing as cognitive behavioural counselling approach in counselling university students, as an integrated approach to boost VCT seeking behaviours while reducing self-concealment.

## 7. Recommendations

Policies for Ministry of Education, Science and Technology mainstreaming on HIV and AIDS education in schools, colleges and higher learning institutions curriculum and counseling programmes to incorporate as life skills;

- a) Effects of Self-Concealment in HIV and AIDS prevention and
- b) The role of Emotional Intelligence in mental health into voluntary counseling services and HIV education curriculum.

This may enhance adolescence and youth own abilities to create tremendous awareness of their own principles for personal resilience against moral decays that predispose them to HIV infection when they reach tertiary levels.

Intervention strategy; VCT Seeking behavior predictive model and test scales May be used by the VCT counselors and students as cognitive behavioral therapy approach to bring about behavior change to reduce risky sexual behaviors to prevent HIV infection.

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