Socioeconomic Challenges of Adolescents in Karalugwe, Adamawa State, Nigeria: A Qualitative Approach

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ABSTRACT

The study explored socioeconomic challenges that adolescents in Karalugwe face as they grow up. These challenges form a significant aspect of adolescents’ social progression and healthy development in the pursuit of their life’s ambition and goals. Focus Group Discussion technique was used to generate responses from 33 adolescents, 15 males and 18 females who were randomly selected for discussion. Responses were recorded in a notebook and analyzed which revealed the challenges that adolescents, both in-school and out-of-school in rural areas face. The results revealed that adolescents in Karalugwe have enormous difficulty in accessing education, social amenities, health care services, clean water and security. The study concludes that rural adolescents face stiff resistance on the path to fulfilling their life’s ambition. In order to have equal opportunities for all, it is important that the gap arising from low level socioeconomic conditions of adolescents in rural areas be minimized by providing means and facilities for accessing quality education, efficient and affordable health care, social amenities, roads infrastructure and security. Infrastructural development such as roads and provision of social amenities would be required to close the gap between rural and urban adolescent’s lives in terms of socioeconomic progress that would facilitate easy flow of information, goods and services including people who produce them.

Keywords: Adolescents, Karalugwe, Michika, Nigeria, Qualitative Approach, Socioeconomic Challenges.

I. INTRODUCTION

Adolescents all over the world, irrespective of where they live or their nationality share similar characteristics such as age, gender, social status being children or young people and have similar biological need(s). Internationally, the enjoy certain similar provision of protection under the Child Right Act by the government and are accorded special attention. In 1959, the UN General Assembly adopted the Declaration of the Rights of the Child, which defines children’s rights to protection, education, health care, shelter, and good nutrition. This noble provision is obtainable all over the world for all children who are within the age bracket assigned for adolescents. However, nations of the world are not at the same level of economic and social progress, some are more developed than others, while some others are still developing. Hitherto, socioeconomic conditions around the world are not the same, for instance infrastructure and social amenities, career opportunities, access to quality education, quality health care, nutrition, security, and general standard of living. Consequently, because of these discrepancies in the level of economic and social progresses around the world, adolescents’ socioeconomic characteristics are also different.

Rural settlements are an important part of the society and are useful for many purposes. Whether they are an agrarian community, or a community located along the coastal areas all contribute to food production that those in urban centers need for their food requirement. However, these communities lack certain basic things for their comfort and well-being which affect every member of the community where they live. Unlike communities in urban centres where there is availability of social amenities and infrastructure, rural communities like Karalugwe are disadvantaged in every respect more so their adolescent youth who also have ambitions of becoming important personalities in the Nigerian society and the world.

In Nigeria, uneven level of social and economic development around the country shapes the kind of characteristics that adolescents possess. These differences in the level of socioeconomic conditions do not permit urban adolescents share the same adolescent challenges with those of their rural counterparts because of the problems posed by the high level of socioeconomic progress in urban centers compared to the low level of social and economic progresses prevalent in rural communities.
Adolescents’ social and economic characteristics in Adamawa state is akin to the characteristics of adolescents found in other parts of the country but also with a clear dichotomy in the socioeconomic conditions between rural and urban adolescents. The dichotomy in the socioeconomic characteristics of adolescents in Adamawa state is a product of the different levels of social and economic achievements obtainable in different parts of the State. These differences in the level of economic and social progresses of urban and rural communities have enormous social and economic implications for the development of human capital, policy and programs of government and remedial interventions for mitigating the effect of low-level socioeconomic progress in rural areas and also for solving the socioeconomic problems arising from the complex life of urban centers.

II. LITERATURE REVIEW

The study by Moses et al. (2021) on influence of socioeconomic factors on prevalence of teenage pregnancy in Nigeria further revealed the dimension of socioeconomic challenges that adolescents face around the world. The study investigated women socioeconomic factors influencing pregnancy in Nigeria using a total sample of 8448 female teenagers with pregnancy experiences from the 2018 Nigeria Demographic and Health Survey (NDHS). The study revealed that 19% of young girls with 15-19 years have experienced teenage pregnancy in Nigeria. The socioeconomic factors with significant influence on teenage pregnancy are age (18-19 years; 33.2%), geographic location (rural; 27.2%), religion (25.2%), poverty (32%), no education (43.7%), visited any health facility in the last 12 months (42%) and those who were informed about family planning at a health facility (84.3%). For adolescents in rural areas like Karulugwe, adolescent girls are the most vulnerable and easily fall prey to these socioeconomic challenges chiefly lack of health facility, poverty and lack of relevant education that would get them informed about their reproductive health.

Nick et al. (2016) published research on socialization into organized sports of young adolescents with a lower socioeconomic status, sport, education and society. A total of 9 girls and 12 boys from lower Socioeconomic Status families from Netherlands who participated in organized sport were investigated. The study was limited to the family, school and peers as potential socializing contexts. The result indicated that parents were found to be the main influence of the sports habits of these young adolescents. The school context appeared to have no influence on their sport socialization. Peers were found to have an influence on the choice for a specific type of sport. The further result indicated that there seem to be differences in the relative importance of the socializing contexts with younger children with a lower SES, although this has been hypothesized to change over time. One of the socioeconomic challenges of rural adolescents is lack of sport facilities that boost their recreation and promote their well-being. Absence of these facilities block the opportunity for young adolescents to develop their talents and socialize. Socialization helps to ease pressure from life’s difficult events and provides opportunity for faster recovery from bad events and the development of resilience overtime.

In a related study by Ngonidzashe and Godfrey (2015) on Factors Contributing to Teenage Pregnancies in a Rural Community of Zimbabwe opined that the prevalence of teenage pregnancies seems to be on the increase especially in rural communities of Zimbabwe. Using Hurungwe District, a rural community in Zimbabwe as a case study, qualitative research design was used. The target population were women who got married before they reached the age of 18 years, their husbands and local leaders in the community. A sample of 6 women who were married before they reached the age of 18 years and 5 men who are apparently married to some of these women was used to gather data using an in-depth interview instrument. The researchers also identified 3 key informants and a focus group of 12 people (8 men and 4 women) was also used in data collection. Findings revealed that factors contributing to teenage pregnancies in rural communities of Zimbabwe include socioeconomic background, peer influence, lack of sex education, non-use of contraceptives, traditional roles, low self-esteem and low level of education. The study recommended the empowerment of teenagers in the rural community and sexual health reproductive education on teenagers in rural communities of Zimbabwe.

The study by Daniel, James, and Douglas (2009) on the socioeconomic status and academic achievement trajectories from childhood to adolescence used four data points from Canada’s National Longitudinal Study of children and youth to examine how the academic achievement gap attributed to Socioeconomic Status (SES) changes from childhood to adolescence ages 7-15. The result indicated that the gap remains fairly stable from the age 7-11 years and widens at an increasing rate from the age of 11 to the age of 15 years. Socioeconomic challenges face by adolescents hamper their academic progress and achievement at every stage of their development. These challenges make it harder for the adolescents to fulfill and attain their life’s ambition as much as they would want to.

Curt (2007) researched on health inequalities among adolescents and the impact of parents’ academic orientation and education. The study was based on cross-sectional questionnaire data collected in 1999 and
2003 among 1,828 18-year-old students in year 2 of upper secondary school in a Swedish city. The data were analyzed using contingency tables and logistic regression. The result indicated that subjective health and health related behaviour were strongly linked to academic orientation but not directly to parents’ education. The pattern is reported to be unambiguous, poor health and health-damaging behaviour being significantly higher among students in non-theoretical programs than among students in theoretical programs. The study concluded that academic orientation is a useful concept in order to detect health inequalities and a powerful way of identifying adolescents at higher risk. The study noted that the unequal distribution of health and health-damaging behaviour according to academic orientation among adolescents turns out to be an important challenge for public health work. In rural areas in Nigeria like Karalugwe, one of the biggest socioeconomic challenges that adolescents face is access to functional education. Education is a key factor for addressing many health issues that affect rural dwellers in addition to parents’ academic orientation and education. Sadly, parents’ poor education and an ill-equipped and dysfunctional education system add up to affect the health of adolescents and eventually their aspirations to a better life in the near future.

Similarly, the study by Jorde and Guiomar (1999) on adolescents’ physical activity: association with socioeconomic status and parental participation among a Portuguese sample, sport, education and society opined that physical activity seems to have a positive influence on some health concerns in adolescence. The study reported that few studies have consistently reported the relationship between parents’ socioeconomic status (SES) and physical activity habits and adolescents’ activities. Specifically, the study reported that fathers SES significantly influence adolescents’ physical activity (r=0.16; p˂0.05) while that of the mothers was found to be insignificant (r=0.23; p=0.0001). Generally, physical exercise is essential and necessary for attaining a healthy living. Rural adolescents often lack the facilities and parental support that would boost their morale to physical exercises. By taking part in physical exercises, it would help to strengthen their physical outlook to resist diseases that are prevalent in their immediate environment. Their parents’ poor SES is responsible for the lack of time and attention that is required to support their children in ensuring a balanced physical development.

Childbearing as one of the socioeconomic challenges facing female adolescents has been a huge challenge as they grow to adulthood. John (2009) examined the socioeconomic consequences of adolescent childbearing on women in Osun State, Nigeria. The study surveyed 1,000 women Cross-sectionally. The first 500 women had their first childbirth below age 20 years while the second 500 women had their first childbirth by age 20 years and above. Findings show significant direct relationship between age at first childbirth and educational attainment at P<0.01. In addition, women who had their first childbirth during adolescence are less likely to return to school for further study. In conclusion, women who have their first childbirth as adolescents are more likely to have poor socioeconomic status at adulthood than those who delay childbearing until their twenties in the State.

A similar study conducted on adolescents’ pregnancy as a socioeconomic challenge was done by Kombi-Inyang et al. (2022) where they examined the regional trends and socioeconomic predictors of adolescent pregnancy in Nigeria. The study used pooled data from the 2008, 2013 and 2018 Nigeria Demographic and Health Survey (NDHS). A total of 22,761 women aged 15–19 years were selected across the three surveys. Multi-variable analysis revealed that poor households, increasing age, and low education as the main socioeconomic predictors of adolescent pregnancy in Nigeria. Exposure to media was reported as predictor in all regions except the North-East geopolitical zone, while all northern zones reported high levels of adolescent pregnancy in male-led households. To address adolescent pregnancy in Nigeria, the study therefore concluded that there is need to promote girls’ education especially among poor households.

III. METHODOLOGY

The study covered basic issues such as access to education, health and sanitation, safety and security and access to social amenities. Focus Group Discussion technique was used to generate responses from 33 adolescents, 15 males and 18 females who were randomly selected for discussion. The adolescents were put in an exclusive setting and were interviewed separately, boys and girls in their respective groups. Each group had in-school and out-of-school adolescents who were either enrolled in a school or not enrolled at any given time. Responses by both groups were recorded in a notebook and later typed in a computer for analysis. The responses revealed the challenges faced by adolescents in Karalugwe.

IV. DESCRIPTION OF THE STUDY AREA

Karalugwe is a disperse settlement in Michika local government area of northern Adamawa state in Nigeria. It has an estimated population of 1,500 people with an average of 7 people per household (Oral reporting). Family structure is both monogamy and polygamy. The community is predominantly agrarian,
cultivating crops like groundnut, beans, maize and rearing of animals such as cattle and donkeys. These animals are usually used by the community as a means for ploughing their farms for planting during raining season and also used for transportation especially moving farm produce during harvest time. The language of the people is predominantly Higgi but they also understand and speak Hausa language, although this is restricted to only the younger ones. The old ones (70 years above) only speak Higgi. The religion of the people is predominantly Orthodox Christianity with two different denominations, Church of the Brethren and Redeem Peoples Mission. The only school in the community is Kule primary school having a block of two classrooms and the head teacher’s office. The Karalugwe community has no medical facility for accessing healthcare services nor a commercial patent medicine store, no police outpost or unit, neither any form of electricity supply connected to the settlement either hydro or solar electricity. The entire community has no single toilet and the only source of water is a river that divided the settlement into two which supplies the entire community for their cooking, washing, drinking and bathing. The terrain on which houses are built in the community is mostly hills and valleys and very little of flat surface. The adolescents in Karalugwe community like adolescents in other civilized part of the world also have life’s ambition to pursue but their immediate environment constitute a huge barrier to their success.

V. LIMITATIONS OF THE STUDY

The description of the study area is purely based on interaction with people around the community and observation by the researcher. Effort was made to locate the study area on google maps, but no result was found. The closest community around Karalugwe that was found on google maps was Za Girta, which is estimated to be one kilometer away from the study area. The population of the community was an estimated figure given orally by a leader in Karalugwe community as no known official data exist prior to the survey.

VI. RESULTS

Table I shows the sex of the respondents; 45.5% represented adolescent boys while 54.5% represented adolescent girls. Both sexes share similar socioeconomic challenges even though there maybe differences in their specific needs as boys or girls. Table II shows the educational status of the respondents; 66.7% were enrolled in school while 33.3% were not enrolled. The table shows that more adolescent boys were enrolled in school than adolescent girls in Karalugwe; 36.4% boys enrolled in school while 30.3% for adolescent girls.

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<thead>
<tr>
<th>TABLE I: SEX OF THE RESPONDENTS</th>
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<tbody>
<tr>
<td>Male</td>
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<tr>
<td>Female</td>
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<tr>
<td>Total</td>
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<td>Source: Field Survey, 2019</td>
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<tr>
<th>TABLE II: EDUCATIONAL STATUS OF THE RESPONDENTS</th>
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<tr>
<td>12 Male Enrolled in government school</td>
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<tr>
<td>10 Female Enrolled in government school</td>
</tr>
<tr>
<td>3 Male Not enrolled in any school</td>
</tr>
<tr>
<td>8 Female Not enrolled in any school</td>
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<tr>
<td>Source: Field Survey, 2019</td>
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A. Age of the Respondents

Respondents were adolescents, both male and female between the ages of 13-22 years.

Note: 22 adolescents who were surveyed both male and female attend schools ranging from basic class six (6) to junior secondary class 2 in government schools in Karalugwe village.

B. Adolescents Schooling

In-school adolescents in Karalugwe attend Kule primary school for those at the Basic Education level, that is primary 1-6. Kule primary school is the only school in the community and has only one functional block of two classrooms and the head teacher’s office. One of the classrooms has no desks for the pupils so the pupils sit on bare floor to learn, and the other classroom has very few desks. The primary school has only two (2) teachers including one head teacher and a supporting teacher whose highest educational qualification at the time of the survey have National Certificate in Education (NCE). Due to lack of sufficient classrooms space and teachers, the school uses multi-grade approach of teaching where pupils of different grades are put together in the same classroom to learn. This method maybe appropriate for a case such as Kule primary school but may not be effective in building a solid educational foundation that adolescents would build on later in life to achieve their life’s goals. Secondary education is only accessible
within four (4) kilometers at Girta Za. So the in-school adolescents in junior secondary school have to trek for at least an hour to cover a distance of one kilometer to go to school. Therefore, Junior in-school adolescents have to cross a river to reach their school. During raining season when the river is flooded, accessing the school is difficult since no bridge has been constructed to allow for easy passage during periods of heavy rains when the river is over flooded.

In-school adolescents are also faced with the problem of inadequate number of teachers in their schools. For instance, at Girta Za, the number of teachers posted to the school is not up to 10 and the teachers are not consistent in attending school, noting that only 3 teachers are active and consistent. In addition to some of the aforementioned challenges adolescents face in the community, in-school adolescents are responsible for paying their school fees. I asked them how they are able to raise money for their education, they mentioned that they go to farm and use the income from the farm to pay their school fees. However, some parents try to pay their children’s school fees but noted that most adolescents pay their fees.

One of the biggest problems facing female in-school adolescents in Karalugwe that truncates their educational plan is early marriage. Once a girl is able to transit to junior secondary and she develops breast on her chest she is perceived to be of marriageable age and therefore she is married off! This happens mostly in their second year of junior secondary education. Girls are disadvantaged when it comes to continuing their education because of the importance of marriage that the community places on them, consequently many girls’ loose interest in furthering their education especially after basic level education. Generally, there is lack of parental support for children’s education especially female children. Out of the adolescents surveyed, only four (4) said one of their parents attended primary school. Since the parents themselves did not acquire formal education beyond basic primary school, they do not see any need for encouraging their children either by paying their school fees, buy books or provide moral support to encourage their children to continue to go to school and because of that many female adolescents dropout for marriage or forced to marry due to teenage pregnancy and the boys opt out for farming or move to the urban center in search for a better life. Furthermore, the adolescents said they are often faced with boredom, idleness and poverty with very few of them engaged in what they do as a form of business to earn money.

C. Adolescents Health

At the time of the survey, no single health center was found in Karalugwe neither a commercial patent medicine store. The only health center can only be accessed at a nearby village called Girta. Whenever there is an emergency, the patient is transported by means of motorcycle whether the sickness is mild or severe. In Karalugwe, the only sources of water in the community are a well located in the center of the town and a free-flowing stream. There was no single toilet in the entire community at the time of the survey, so the locals use the near-by bushes for open defecation. Absence of a primary health facility in Karalugwe has a huge implication for the locals in the wake of an epidemic such as cholera outbreak, snakebite, child labour or typhoid fever among other diseases that can occur. The Karalugwe community is fond of using chemicals on their farms such as gramaxone to kill grasses and other herbicides. These chemicals and faeces easily wash off into the river during the raining season where the locals fetch water for their domestic use. Contaminated water can cause diseases such as cholera and typhoid fever which the locals are vulnerable to, and they have no health facility to attend to them when these cases occur. Girls in Karalugwe village do not know what a sanitary pad is, how it is used and when. The girls often used rags to stop the menstrual flow. The adolescents in Karalugwe are vulnerable to morbidity such as malaria fever, typhoid fever, cholera, diarrhea and snake bite. Girls are susceptible to teenage pregnancy because they lack basic sex education and family planning advice and other services that can help them take care of their menstrual hygiene.

D. Adolescent’s Access to Social Amenities

In the entire village of Karalugwe, there is no electricity. Access road to the village is a difficult terrain that makes it difficult for moving people, goods and services. Because of their geographical location and size, there is no viable market for local exchanges of goods and services. Therefore, lack of social amenities and other infrastructures such as road have left the locals with limited opportunities of interacting with the rest of the world and have limited the amount of goods and services that promote their leisure and well-being. For example, accessing network services and signals is very rare and can only be accessed at a certain spot that is hilly with the network signal coming in from Cameroun Republic. Due to their geographic location, adolescents in rural Karalugwe have no access to basic social amenities that can promote their well-being and secure their leisure.

E. Adolescents Security and Safety

There is no police station nor a police outpost in the village. The only police station is located at Kargude. Consequently, all criminal cases are resolved traditionally where those involved are handled. Although the adolescents were not asked about the kind of crimes being committed in the community, all issues relating
to the safety and security of the inhabitants lie in the hands of the locals. Therefore, adolescents’ girls are vulnerable to rape incidents and other criminality that can affect their well-being.

VII. CONCLUSION

Adolescents in Karalugwe face many socioeconomic challenges such as lack of parental support for their education, dilapidated school infrastructure, inadequate classrooms and lack of enough teachers. Similarly, lack of social amenities such as electricity, safe drinking water, good roads, recreational center, etc necessary to facilitate adolescent’s leisure are completely absent in the area, thus adolescents continue to work and learn without corresponding leisure to ease their stress. Medical facilities needed to support and secure adolescents’ physical and psychological well-being is also lacking consequently making adolescents vulnerable and susceptible to health hazards that maybe found prevalent in the area. Female adolescents lack access to basic information that can promote hygiene during menstrual period and prevent infections and unwanted pregnancy. In addition to lack of basic sex education, adolescent girls face teenage marriage that the community is in support of, which truncates girl’s prospects for continuing with their education unto the higher level. Furthermore, lack of security outpost in the community makes adolescents open to molestation and other forms of social vices that are perpetrated by bad elements in the area. This makes adolescents vulnerable to hazards that maybe detrimental to their overall well being especially when adolescents in junior secondary school have to trek for a long distance to acquire education, they might be attack or rape on their way to school.

Despite the numerous socioeconomic challenges that the adolescent in Karalugwe face, they remain ambitious like their counter parts in the urban centers. Adolescents in Karalugwe have the ambition to be medical doctors, soldiers, lawyers, teachers, clergy in the near future, etc. However, the challenges that the adolescents face are very enormous which require the support of government and other critical stakeholders in order to provide infrastructures and social services that would promote the well being of vulnerable adolescents. When the adolescents are supported and they succeed, they would be useful members of the society that contribute to economic growth and national development. They remain a critical source for improving the human capital stock of the country that should be supported to realize their ambitions, become skillful and productive economic agents in the society.

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