

The Perception of Adults and Children on the Influence of Child Labour on the Physical Hazard of Children in Zaria Metropolis, Kaduna State, Nigeria

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Abstract

This study was carried out to establish the perception of adults and children on the influence of child labour on the physical hazard of children in Zaria metropolis. The population of this study consisted of working children and all categories of adults in Zaria metropolis. These adults and working children were clarified with the aid of pilot study that was conducted. The jurors in Medical Sociology, Health Education and Community Medicine in Ahmadu Bello University, Zaria, Nigeria validated the questionnaires used for this study. Two separate questionnaires with the same contents were developed for adults and children to collect information on physical hazard of child labour. 400 respondents were randomly selected at the market areas, bus stops, neighbourhood and on the streets. These questionnaires were administered to 200 children and 200 adults. Data analytical procedure involved both quantitative and qualitative methods were adopted. The result of the findings indicated that, there is a significant difference between the perception of adults and children on the influence of child labour on physical hazard of children. It is therefore recommended all the Government agencies and relevant Non-Governmental Organizations including the religious bodies to intensify their efforts through public enlightenment programmes, education, seminars and workshops and through legislative enforcement to curtail the practice of child labour in Nigeria.

Key words: Perception, Influence, Childlabour, Physical Hazard, Metropolis

Introduction

The practice of child labour occurs when children especially young ones are exposed to long hours of work in a dangerous and unhealthy environment with too much task for them to perform at their age and at the expense of their schooling. This practice was in contrast to the child-work in which the primary emphasis is on learning, training or socialization (UNICEF, 2001). Onuzulike (1998) said, the abuse and exploitation of children is one of the world's social problems. It has attracted both International and National attention. At the International level, concern for the rights of the child dates back to Geneva Declaration of 1924 and the adoption of the United Nations Convention on the Rights of the Child in 1989, this was followed in September 1990 by the World summit for children at United Nations Headquarters in New York (UNICEF, 2001). The ideals of these International conventions were reinforced and complimented by the African Charter on the Rights and Welfare of the Child in 1990. Also International Labour Office presented that, at least 200 million children under age 14 are employed worldwide (Nosakhare, 1999). At present, some researches had been carried out on child labour as Adeoye (2000) on patterns of child labour, Ayua and Okagbue (1996) on the Rights of the child in Nigeria, Oloko (2003) on concept and essence of child labour education and so on. But on issues of physical hazards of child labour have not been adequately addressed most especially in North-Central and North-West Nigeria in particular. In an attempt to contribute to the current issue and discussion on the physical hazards of child labour, this study

was carried out to investigate the perception of adults and children on the influence of child labour on the physical hazards of children in Zaria metropolis.

Purpose of the Study: To identify the physical danger of a child who engages in the practice of child labour is liable to.

Research Question: Is there any relationship between the perception of adults and children on the influence of child labour on physical health of a child?

Hypothesis: There is no significant relationship between the perception of adults and children on the influence of child labour on the physical health of a child.

Methodology

Population of the Study

The population of this study consisted of working children and all categories of adults in Zaria Metropolis. These working children were those found in the informal sectors of child labour, namely; street hawkers, street beggars, bus conductors, farm labourers, domestic servants and so on. While the adults were those recognized in Nigeria Constitution of 1999 to be age 18 years and above who are responsible in the society to be able to manage a home, and likely have children.

Sample and Sampling Techniques

Purposive sampling procedure was used to select the town of Zaria in Kaduna State. The reason for this is that, Zaria is a metropolitan town and with distinctive rural settlement which encompasses different cultures, religion, trade, professions, and ethnicity. Nworgu (1991) opined that, in purposive sampling, specific elements which satisfy some pre-determined criteria are selected. Although the criteria to be used are usually a matter of the researcher's judgement, he exercises this judgement in relation to what he thinks with respect to the research purpose. Based on this assumption, the town of Zaria was divided into four zones. The four zones are; Samaru, Sabon-Gari, Tudunwada and Zaria City. The points of entrance for collection of data were the major markets in Zaria. This is because all adults and working children have one thing or the other to do in the market. Thus, the market serves as a pool where people buy and sell. The selected markets were the Samaru market, Sabon-Gari market, Tudunwada market and Zaria City market. The respondents were the adults found around and within the markets and those around the neighbourhood. The other respondents were the children seen to be engaged in one work or the other that were termed to be exploitative and hazardous in nature at the market areas and at the neighbourhood of the four zones identified. Based on the census figure of 1991, Zaria has a population of 700,000 people (NPC, 1991). Thus, to select sample from these population, Krejcie and Morgan (1970) suggested that, in a population of between 75,000 to 1 million people, a minimum sample size of 382 should be drawn. Therefore, in this study, the researcher decided to increase the sample size to 400 subjects for this study.

Two separate questionnaires were developed for adults and children to collect information from the respondents in order to ascertain the physical hazards on street hawkers, street beggars, domestic servants, bus conductors and wheel barrow pushers. The researcher also made use of observation while collecting information from the respondents. The questions presented were in multiple choices which were reflected on the questionnaire.

In the administration of the questionnaire, systematic sampling technique was adopted to select the specified number of houses and also administered questionnaire to the adults and children found on the street of Samaru, Tudunwada, Sabon-Garri and Zaria City.

Procedure for Data Analysis

After the data had been collated, it was described using frequency and percentages, which enabled it to be subjected to analysis. The hypothesis was analyzed using Chi-Square statistical method at 0.05 level of significance

Results

A total of 400 respondents were used in this study. This was made up of 200 adults and 200 children. The children responses were those who were directly involved in the practice of child labour.

Table 1: Physical Hazards of Child Labour (Adults responses in percentages)

Variable	Category	Yes		No	
		Frequency	Percent%	Frequency	Percent%
Accident	Motor accident	140	70.0	60	30.0
	Cut	81	40.5	119	59.5
	Harm from spraying	45	22.5	155	77.5
	Falls	81	40.5	119	59.5
	Other hazards	12	6.0	188	94.0
Diseases	Skin rashes	147	73.5	53	26.5
	Common cold	61	30.5	139	69.5
	Cough	54	27.0	146	73.0
	Ringworm	80	40.0	120	60.0
	Malnutrition	40	20.0	160	80.0
Common symptoms of physical hazards	Others	10	5.0	190	95.0
	Headache	30	15.0	170	85.0
	Fever	70	35.0	130	65.0
	Dizziness	9	4.5	191	95.5
	Tiredness	77	38.5	123	61.5
	Hunger	80	40.0	120	60.0
	All of the above	46	23.0	154	77.0

Total response to each category = 200

Table I shows that 70% of the respondents agreed that working children are prone to motor accident, 40.5% to cuts, 22.5% to harm from spraying chemicals, 40.5% to falls and 6% to other hazards. 73.5% of the respondents said working children are prone to skin rashes, 30.5% agreed to common cold, 27% to cough, 40% to ringworm, 20% to malnutrition, while 5% agreed to other diseases. On common symptoms of physical hazards, 15% of the respondents agreed that working children are prone to headache, 35% to fever, 4.5% to dizziness, 38.5% to tiredness, 40% to hunger, and 23% agreed to all of the common symptoms of physical hazards listed above.

* Table II: Physical Hazards of Child Labour (Children responses in percentages)

Variable	Category	Yes		No	
		Frequency	Percent%	Frequency	Percent%
Accident	Motor accident	76	38.0	124	62.0
	Cut	60	30.0	140	70.0
	Falls	100	50.0	100	50.0
	Harm from spraying	2	1.0	198	99.0
	Other	40	20.0	160	80.0
Diseases	Skin rashes	77	38.5	123	61.5
	Cough	87	43.5	113	56.5
	Common cold	67	33.5	133	66.5
	Ringworm	37	18.5	163	81.5
	Malnutrition	17	8.5	183	91.5
Common symptoms of physical hazards	Others	6	3.0	194	97.0
	Headache	36	18.0	164	82.5
	Fever	59	29.5	141	70.5
	Dizziness	16	8.0	184	92.0
	Tiredness	87	43.5	113	56.5
	Hunger	80	40.0	120	60.0
	All of the above	17	8.5	183	91.5

The result of Table II shows that, 38% of the respondents experienced motor accident, 30% cut, 50% fall, 1% experienced harm from inhaled spraying chemical and 20% experienced other hazards at work. 38.5% had skin rashes, 43.5% cough, 33.5% common cold, 18.5% ring worm, 8.5% malnutrition and 3% had other diseases different from the options above. 18.0% of the respondents had headache, 29.5% fever, 8.0% dizziness, and 43.5% tiredness, 40% hunger while 8.5% agreed to have had the above listed options of common symptoms of physical hazards.

Table III: Chi-square cross- tabulation of association between the perception of adults and children on physical hazards (Accident) of child labour

Accident	Adult	Children	Total	X ² cal	X ² crit.
Motor accident	140 (122.5)	76 (93.5)	216	47.06	9.49
Cut	81 (80.0)	60 (61.0)	141		
Falls	81 (102.7)	100 (78.3)	181		
Inhaled chemical	45 (30.1)	8 (22.9)	53		
Others	12 (23.8)	30 (18.2)	42		
Total	359	274	633		

X² df4, = 9.49 P < 0.05

Table III shows that; the calculated chi-square value is greater than the critical chi-square value. This implies a significant association in the perception of adults and children on physical effect (accident) of child labour.

Table IV: Chi-square cross-tabulation of association between the perception of adults and children on physical hazards (Diseases) of child labour

Diseases	Adult	Children	Total	X ² cal	X ² crit.
Skin rashes	147 (130.9)	83 (99.1)	230	39.55	
Cough	54 (80.2)	87 (60.8)	141		
Common cold	61 (72.8)	67 (55.2)	128		
Ring worm	80 (66.6)	37 (50.4)	117		
Malnutrition	40 (32.4)	17 (24.6)	57		
Others	10 (9.1)	6 (6.9)	16		
Total	392	297	689		

X² df5 = 11.1 P<0.05

Examination of Table IV shows that, the chi-square calculated value is greater than the chi-square critical value. This is an indication that significant association exists in perception of adults and children on the physical hazards (diseases) of child labour.

Table V: Chi-square cross-tabulation of association between the perception of adults and children on the physical hazards (common symptoms of physical hazards) of child labour.

Symptoms	Adult	Children	Total	X ² cal
Headache	30 (33.9)	36 (32.1)	66	16.94
Fever	70 (66.3)	59 (62.7)	129	
Dizziness	9 (12.9)	16 (12.1)	25	
Tiredness	77 (84.3)	87 (79.7)	164	
Hunger	80 (82.2)	80 (77.8)	160	
All of the above	46 (32.4)	17 (30.6)	63	
Total	312	295	607	

X² df5, = 11.1 P>0.05

Table V shows the cross tabulation of association between the perception of adults and children on the physical effects (common symptoms of physical hazards) of child labour. It was revealed that, the chi-square calculated value is greater than the chi-square critical value.

Discussion

The result of hypothesis indicated a significant relationship between the perception of adults and children on the influence of child labour on physical health of a child. It was discovered that, the perception of adults and children on the proneness of children to accident to be significant, proneness to diseases and their proneness to common symptoms of physical hazards was as well significant. The view of Ayua and Okagbue (1996) was in line with this finding, that the practice of child labour has a demoralizing effect on the working children both physically and psychologically. For instance, children who hawked in the streets or are allowed to roam the streets are very often exposed to the risk of motor accidents, and nutritionally malnourished. The danger of children searching garbage dumps for food can not be over-emphasized as they are exposed to communicable diseases.

UNICEF/ANPPCAN (1986) was in support of this finding that, the harmful effects associated with child labour include fatigue arising from staying long hours standing or running after vehicles to sell their wares in excessive heat, exertion arising from long hours of work in their master's homes without rest, lack of hygiene especially those that work in hotels, workshops or open places in bad weather and dusty conditions. These can cause or predispose these children to skin troubles, bronchitis, and physical damage in cases of accidents. While ANPPCAN (1994) was in agreement with the findings of this study on her study on health problems associated with child labour. She discovered the following: malnutrition, stunted growth, risk of accidental injuries, and skin diseases such as scabies, ulcers and ringworms. A large percentage of children observed had poor oral hygiene. Anaemia and hematuria due to schistosomiasis of the bladder were frequently encountered.

But UNICEF (2003) in her submission said domestic labour posed a threat to all your children under any conditions. Many burn themselves while cooking and ironing, or cut themselves with knives whilst preparing meals. While the view of Donnel et al (2002) was also in support of this findings that work increases child's exposure to health hazards that threaten to subject the child to illness and injury. Likewise, Satyanarayanan et al (1986) were of the opinion that, children who worked in agriculture, small-scale industry and services grow up shorter and lighter than those who attend school that were tall and robust because they were not exposed to exploitative work. Onuzulike (1998) also agreed in her observation that child labour such as; bus conductors, factory workers, and other apprenticeship labour may sustain accident which may result to multiple injuries such as fracture of the skull, limbs, intra-abdominal bleeding and renal ruptures among others.

Conclusion

Nigeria was signatories to various forms of conventions and laws on child labour, but its impact are yet to be noticed on Nigerian children. For example, Nigeria signed a memorandum of understanding with the International Labour Organization in 2000, to launch a country programme for the Elimination of Child Labour (UNICEF 2003). However, Nigeria has not yet ratified two ILO conventions on child labour, namely Convention No. 138 of 1973, which sets a minimum age for hazardous work, and Convention No. 182 of 1999, which targets the elimination of the "worst forms of child labour". Even with the Nigerian Child Rights Act of 2003 which by now was to have been adopted and implemented in all the States, the acceptance was still foot-dragging in some States. Some States government believes the Act does not properly address their cultural norms and religious belief.

The Nigerian Child Rights Act of 2003 stipulated that each States is expected through consultative process involving relevant local stakeholders to determine which types of work are harmful and need to be targeted as a matter of urgency. Special attention should be paid to work which exposes children to physical abuse, involves the manual handling or transport of heavy loads or is carried out in an unhealthy environment, in particular difficult conditions, for long hours or where the child is unreasonably confined to the premises of the employer.

Recommendations

It is therefore recommended that:

1. all the Government agencies and relevant non-profit organizations should intensify their efforts through public enlightenment programmes, education, seminars and workshops and through legislative enforcement to curtail or reduce the practice of child labour.
2. Various religious organizations should educate their followers on the importance of education for their wards/children.

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