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TOWARDS THE ENHANCEMENT OF POPULATION AND FAMILY LIFE EDUCATION FOR NIGERIANS

Fan Akpan Fan and Sunday Udoh Usoro
Cross River University of Technology
and
S. D. Edinyang
Faculty of Education
University of Calabar, Cross River State, Nigeria.

Abstract
The thrust of this paper is to highlight the strong relationship that exists between population/family life education and the quality of life for Nigerians. It observes that Nigeria’s population is increasing exponentially and this has affected several aspects of her national life. Reflecting on the numerous health problems like vesico vaginal fistula, recto vaginal fistula, ante partum and post partum haemorrhage, eclampsia, obstructed labour that come with unwanted childhood pregnancies, as well as increased cases of sexually transmitted diseases, and widespread prostitution, the paper emphasizes that Nigerian students need more information on human sexuality now as future adults of the country. It therefore prescribes specific curricular contents of population and family life education and recommends a cooperative effort by home, school, church and community to provide selected learning experiences and guidance for young people in and outside schools concerning the need, interests, problems and goals that arise out of human psycho-sexual development primarily as related to love, marriage, parenthood and family life. The basic assumption here is that good families make a good society.

Keywords: Education, family, human, life, population, quality, sexuality.

Introduction

In 1988, Nigeria formulated the population policy to stem the continued burden of high fertility and population growth rates on the health of families, their standard of living, the country’s agriculture and food availability, unemployment, dwindling educational opportunities and limited economic resources. The goals of the policy are:
i) To improve the standards of living and quality of life of the people;

ii) To promote their health and welfare, especially through preventing premature death and illness among the high risk group of mothers and children. Thus, efforts are made to voluntarily discourage pregnancies before the age of 18 and after 35 and pregnancies less than two years apart and after the fourth birth, all of which are prevalent here;

iii) To achieve lower population growth rates by voluntary fertility regulation methods that are compatible with the attainment of economic and social goals of the nation; and

iv) To achieve a more even distribution of population between urban and rural areas.

Sources of rapid population growth in Nigeria

There are two ways in which the population of a country or any area can grow. First, population may increase as a result of natural change. Secondly, growth may occur because of migration. The natural increase in the population is due to the balance between births and deaths at a given period of time. Similarly, the increase in the population arising from migration depends on the balance between emigration and immigration. Generally, immigration is controlled by centripetal forces or the "pull" factors.

The birth rate is a product of several factors:

i) Good nutrition and medical services available

ii) Age of marriage e.g. child marriage. Adebajo (1992) submits that:

Some of the reasons adduced for child marriages in Nigeria include: desire to avoid dishonour to the family since it is believed that virginity can only be guaranteed between the ages of 8–10 years; economic reasons resulting from dowry and bride price payments and the need to reduce the burden on parents as it is put "one mouth less to feed" (p.9).

iii) Age distribution of the population.

iv) Marriage structure e.g. polygamous or monogamous marriages.
v) Social attitude towards children. In some communities, the social status of a man is evaluated on the basis of the number of children he has.

vi) Level of economic development. People value children as a source of traditional hands on the farms. There is therefore the need for such extra hands.

Death rate has equally been affected by the increased medical facilities available. The six childhood killer diseases (tetanus, measles, poliomyelitis, whooping cough, diphtheria and tuberculosis) as well as physical and mental inadequacies such as cretinism and acromegaly are now nearly extinct. Indeed, technological advances in medicine have led to a drastic reduction in the death rate of the human group.

The subject matter of population and family life education

Onyeneze (1998 p. 45) sees population education as the development of at least a minimum level of understanding of the causes of population growth and the consequences of such growth on the individual, his community, his nation and the world. Such education involves a study on population distribution, population change, population composition, population size, morbidity, dependence ratio, family planning, sexuality education, fecundity, occupational distribution of population, geographical distribution of population, working population, optimum population, vital rates (demographic processes – migration, death rate and birth rate). Population education therefore studies population situation in the family, community, nation and the world so as to sensitize the students and develop in them an awareness and an understanding of population problems. The study looks at the interrelationship between population change and available resources at the micro and macro levels thereby making students develop a more rational and responsible behavior towards a small family size, parenthood, delayed marriage, proper child-spacing and an improved standard of living. It thus plays an advisory and persuasive role leaving an individual to take a decision when an occasion demands.

Family life deals with the existence of family members and where they live which includes their physical and emotional needs. Preparing students for family life is a successful way of improving the family. Nwaiwu (1993) posits that:

Studies in and outside the classroom that would help in teaching family life education include: definition of family, polygamy, polygyny, extended
family, nuclear family, the family as a social institution, male/female differences, dating, courtship, engagement, wise mate choice, preparation for marriage, customs and rights, marriage problems (causes, solutions and adjustments) developmental tasks of the married couples (p. 105).

The basic assumption here is that good families make a good society. In the family life education therefore a student learns about relationships including his own through a study of what psychologists, anthropologists, home economists and other scientists have found out in their various researches. This relationships education helps the students’ social growth by helping the individual develop, be social adjusted and self-actualized.

Family life begins with engagement and marriage followed by child-rearing. The couple has to know how to feed the family with balanced meals, give them adequate shelter, clothing, health care, education etc. Family life education is very important especially now that science and technology are creating sophisticated environment for the family and the child (Obilo, Onyenze & Uchegbu, 1989).

Consequences of scanty population and family life education among Nigerians

Inadequate population and family life education among Nigerians has created three problems: population pressure on available resources, sexual abuses and child abuse.

i) Population pressure on available resources.

Population can be an asset to a country; it can also turn out to be a source of stress if the growth rate is not checked (Fan, 2004). Deep poverty and chronic hunger are the unrelieved lot of hundreds of millions in the least advanced countries and perversely, it is there that population/continues to multiply most rapidly (United Nations, 1980). This view is corroborated by Umar (1987) who posits that the most apparent cause of concern regarding human settlement in Nigeria has been its large population, rapid urbanization and the poor management of the limited human resources. A large population can impact negatively on the food supply, environment, social services and investment.

Despite the variety of factors responsible for food shortage in Africa, there is some measure of agreement among scholars and policy makers that rapid
increases in population and urbanization coupled with demographic imbalances which have occurred during the last few decades and which have regretfully been accompanied by relatively slow rates of food production and economic growth in many parts of the continent have played a major role in jeopardizing the continental food resources and nutritional well-being of the population (Idusagie 1979). Population growth is generally reflected in space both in the urban and rural areas. As population increases, land use intensity increases because more people are brought into existence who invariably will require space for residential and socio-economic activities. Under a given socio-economic system and technology there is an upper limit to the number of people which a land can support. This is called the population-carrying capacity of the land. One problem of environmental problem associated with land use in Nigerian urban areas is the uncontrolled land use development in the suburbs of the rapidly growing cities (Onokerhoraye, 1994). The development is a product of the difference between the population demand for housing and that supplied by the urban society. The inhabitants of these unplanned residential units area mainly migrants from rural areas or other towns and they regard their stay in the are as temporary. The unplanned rural-urban fringe areas of Lagos illustrates this type of environmental problem. In Lagos, the unplanned land use suburbs comprise places such as Ajeromi, Somolu, Ajegunle, Bariga, Idioro, Aggege and Mushin and they are on the whole characterized by poor street lay-out (Sada, 1980).

Closely associated with the problem of physical lay-out in these districts are other environmental problems such as waste disposal, drainage and general sanitation as well as shortage of facilities like education, health and investment. For instance, families with a large number of children find it difficult to save. This, in turn, reduces the volume of savings and hence the value of private investment especially in a country where investment is financed out of private savings. Empirical evidence from Nigeria where the public sector plays a major role in the investment of capital in the development programmes indicates that population growth has influenced the pattern of government expenditure. Rising population size and change in composition over the years have been reflected in the demand for specific services such as water, electricity, health, education and housing which are immediately required by the population (Onokerhoraye, 1994).

ii) Sexual Abuses

The fact that love and sexual intercourse are surrounded by fears, false beliefs, shame and ignorance leads the youths to be victims of sexual abuses when they
attempt to overcome these fears through experiencing sex. In this vein, Llewellyn – Jones (1979) posits that:

A more permissive attitude to sex does not mean abandoning all sense of sexual responsibility. Since religious prohibition and traditional sexual attitudes to pre-marital sex are increasingly being abandoned, they must be replaced by the much more difficult concept of personal responsibility (p. 79).

Of the many problems facing humanity in this turbulent century that of population growth is a major one. This problem is associated with increased birth rate among teenagers and the poor who see the number of children one has as a status symbol and cheap labour on rural farms.

It is believed that the greatest asset of a nation is the quality of her youths. If the youths have become morally bankrupt as to indulge in pre-marital sexual activities with the result of unwanted pregnancies, then the nation is doomed. Thus, in a situation where youths do not see sexual immorality as a delinquent act, something needs to be done to direct their attention to the implications of their actions.

The menace of teenage pregnancy has been attributed to ineffective education on human sexuality. In its broadest sense, sexuality education is any instruction given on the process and consequences of sexual activities. The expectation is that such instructions on sex matters are given to children and mostly, adolescents (Uko-Avionoh & Onaifeje, 2003). As observed by Onyemelukwe (1993), the level of sexual awareness among youth is quite on the increase. Nigerian youths have joined in the sex revolution prevalent in Europe and America. Recent studies (Microsoft © Encarta Encyclopedia, 2001) show that almost fifty percent of American adolescents under the age of fifteen and seventy five percent under the age of nineteen have had sexual intercourse. Coles and stokes (1985) opine that almost all adolescents think about sex and may think about it a good deal of time. By the time most girls are twelve or thirteen or boys are thirteen or fourteen they begin to engage in dating (Dickenson, 1975 & McCabe, 1984).

### iii) Child Abuse

This is the physical or psychological maltreatment of a child by an adult or adults. Child prostitution, sexual harassment and rape (forced genital contact) early sexual preoccupation of children by teachers, parents, siblings, house helps, neighbours are common in Nigerian society. A child’s sexual abuse can lead to
childhood pregnancy which according to Fan (2005) comes in its wake with monumental but hidden pediatric problems like ante partum, post partum haemorrhage, anaemia, craniotomy, Caesarian Section, eclampsia, obstructed labour, retained placenta, macerated baby, recto vaginal fistula (rvf: damage to the rectum) and vesico vaginal fistula (vvf – damage to the bladder). Both vvf and rvf are abnormal communication between the bladder and the vagina or rectum and vagina. They represent the worst and gruesome mortality befalling women and are severe child-birth afflictions to women who become incontinent as a result of an abnormal opening between the epithelial surface of the bladder and that of the vagina. According to Lawal (2006) vvf known as yoyon fitsari in Hausa language, is the greatest threat to womanhood in the North today. Despite the fact that there are eight centres spread across the North to take care of VVF and RVF cases under the supervision of Waldjik and support from international donor agencies, the cases seem to be growing in geometric progression as shown in the following tables.

Table 1: Statistics of operated cases Babban Ruga General Hospital, Katsina

<table>
<thead>
<tr>
<th>Year</th>
<th>VVF</th>
<th>RVF</th>
<th>Range Rate</th>
<th>Success</th>
<th>Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>450</td>
<td>45</td>
<td>13-40 Years</td>
<td>95%</td>
<td>3</td>
</tr>
<tr>
<td>2003</td>
<td>434</td>
<td>44</td>
<td>15-45 Years</td>
<td>95%</td>
<td>3</td>
</tr>
<tr>
<td>2004</td>
<td>440</td>
<td>20</td>
<td>14-34 Years</td>
<td>95%</td>
<td>4</td>
</tr>
<tr>
<td>2005</td>
<td>339</td>
<td>116</td>
<td>14-35 Years</td>
<td>96%</td>
<td>5</td>
</tr>
</tbody>
</table>

Table 2: VVF Hostel Kwalli, Kano State

<table>
<thead>
<tr>
<th>Year</th>
<th>VVF</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>124</td>
</tr>
<tr>
<td>2003</td>
<td>103</td>
</tr>
<tr>
<td>2004</td>
<td>235</td>
</tr>
<tr>
<td>2005</td>
<td>398</td>
</tr>
</tbody>
</table>

Table 3: Fati Ali Sheriff VVF Centre, Maiduguri

<table>
<thead>
<tr>
<th>Year</th>
<th>VVF</th>
</tr>
</thead>
<tbody>
<tr>
<td>2004</td>
<td>57</td>
</tr>
<tr>
<td>2005</td>
<td>53</td>
</tr>
<tr>
<td>Aug 2006</td>
<td>42</td>
</tr>
</tbody>
</table>

Some teachers unfortunately do not know what sexuality education is and how to handle it. They therefore become bashful and evasive associating it with promiscuity among adolescents. Most Nigerian parents, Uko-Aviomoh and Omatseye (2003) observe, shy away from such discussions because it is generally believed that it will make the adolescent attempt to experiment.

There are social risks involved. Early child-bearing is strongly associated with lower social and occupational mobility for the adolescent or kid parent. Surely, there is usually a temporary and sometimes permanent halt to education. Additionally, the high incidence of abandoned babies is tied to unwanted childhood pregnancies and excruciating level of poverty.

**Recommendations**

It is becoming increasingly evident that population control and population quality are intricately linked. Population control has benefited several countries whose methods of birth limitation, legalized abortion and voluntary sterilization have been observed.

In order to ensure a population quality in Nigeria the following suggestions considered apposite are made:

1) Nigerian youths should be made to understand how a sound knowledge of human sexuality can enrich an individual’s life. They should be aware of the consequences of sexual abuses before marriage (abortion, contracting diseases, terminating an academic career or even death). This would ensure self-understanding and consequently self-direction. If adults are well guided they will be able to understand themselves and their needs well enough to set realistic goals at the right times (Ukpong, 2000).

2) Education on human sexuality should be made compulsory in all Nigerian schools. This type of instruction would highlight the consequences of prostitution, the evil effects of adultery, the agonies of unmarried mothers and the hate of sex pervasions. Through adequate sexuality education, Okafor (1993) points out, students learn the possible dangers of sexually-transmitted infections.

3) The general expectation of an average Nigerian home is that the teachers will teach the children not only the physiological changes they are
undergoing but also pure and healthy attitudes towards human sexuality, reproduction as well as population dynamics and the impact they have on the family and the entire society. The following topics are therefore put forward as issues to be treated in the curriculum for population and family life education in Nigeria, viz:

a) The need for family planning
b) Family planning clinics
c) Ways to promote healthy living
d) Marriage and its necessity
e) Preparation for marriage and motherhood
f) Courtship and marriage
g) Prevention and control of sexually-transmitted infections (STIs)
h) Relationship between foetus and its mother
i) Structures of male and female reproductive organs.
j) Pregnancy and prenatal care
k) Functions of male and female reproductive organs
l) Budgeting for family health
m) The roles of institutions in promoting healthy family living
n) Functions of family members particularly to their handicapped or disabled members. There is much concern about the family in modern society because of slowly rising divorce rates, the "generation gap", difficult children and harassed parents and the gradual absorption of more family duties by the school and other institutions.
o) Diseases of the reproductive system. Common household diseases, types, causes, symptoms, prevention and care.
p) Accidents in the household. Types, causes and first aid.
q) Fertility and its effects on the family
r) Pollution and pollutants in the home and local community.
s) Advantages and disadvantages of single and foster parenthood.
t) Causes and consequences of family instability and their remedies.
u) Factors in the choice of partners
v) Some taboos about sex
w) The implications of population on family life, employment situation, vital registration and quality of life issues.

4. Parents should embrace spiritedly their role of educating their children on sound morals. They should also educate them on issues connected with pregnancy and childbirth. Properly planned exposure of the youth to problems arising from moral decay (smoking, drinking, sex, drugs) will further enhance their determination to cultivate desirable values for the survival of the society which they can consciously identify as theirs. They should educate their children on issues connected with pregnancy and childbirth also.

5. The essence of a good sexuality education programme is an open and honest dialogue in a trustful setting. Effective use of textbooks and audio-visual materials can contribute to this dialogue and sense of trust.

6. There is need for a cooperative effort by home, school, church and community to provide selected learning experiences and guidance for young people in and outside schools concerning the need, interests, problems and goals that arise out of human psycho-sexual development, primarily as related to love, marriage, parenthood and family life.

7. The provisions of Nigerian’s population policy should be revised to provide sanctions to defaulters.

Conclusion

This paper has examined population and family life education as an example of a response to curbing various demographic and social issues that might threaten future efforts of nation-building in Nigeria. Any humane and effective approach
to many of the problems associated with population will need to have as a significant dimension education in which young people are enlisted so as to study and deal directly with critical population problems.

References


