

DEMOGRAPHIC VARIABLES OF SAFETY RISK BEHAVIOURS AMONG SECONDARY SCHOOL STUDENTS IN AGBANI EDUCATION ZONE.

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Abstract

The study examined demographic variables of safety risk behaviours among secondary school adolescents in Agbani Education Zone, Enugu State. Three research questions and one null hypothesis guided the study. A descriptive survey design was adopted for the study. A sample of 388 secondary school adolescents which was drawn from a population of 13,105 secondary schools in Agbani Education Zone was used for the study. Structured questionnaire titled “Demographic variable of Safety Risk Behaviour Questionnaire (DVS RBQ)” which was validated by three experts, two from the Department of Human Kinetic and Health Education and one from Maths and Computer Department was used for data collection. The instrument yielded a reliability coefficient index of .78 showing that it is reliable. Mean statistics was used to analyse data collected in line with research questions while t-test statistic was used to test the null hypothesis at .05 level of significance. The findings of the study were; that secondary school adolescents in Agbani Education Zone were involved in safety risk behavior to a low extent, both male and female secondary school adolescents, both urban and rural secondary school adolescents in Agbani Education Zone were involved in safety risk behaviours to a low extent. The involvement of secondary school adolescents in safety risk behaviour is dependent on gender. It was concluded that secondary school adolescents in Agbani Education Zone involved in safety risk behaviour to a low extent. Thus, it was recommended among others that the state government through the PPSMB should organize orientation, Seminars and workshops on the consequences of safety risk behaviours for secondary school adolescents.

Introduction

Safety Risk behaviours have become an important public health concern more especially among secondary School Students. The increasing prevalence of health risk behaviours has drawn both international and local attention because of their contribution to disease burden. For instance, World Health Organisation (WHO) (2015) made to know that on the globe ,greater than 2.6million people between 10 to 24 years die every year mainly from preventable causes, 16million girls give birth daily as a result of risky sexual behaviors, while about 20% adolescents experience a mental health problem most commonly depression or anxiety every year. Estimate from United Nations Children's Fund (UNICEF) in 2016 also indicate that about 2.1 million adolescents between age 10 and 19 live with HIV worldwide. All these preventable health problems are consequences of health risk (safety risk) behaviours (WHO) 2015)

In Nigeria safety risk behavior of adolescents and its consequences are the same. In 2018 Federal government of Nigeria raised alarm over the increasing prevalence of health risk behaviors which safety risk behavior is inclusive, which have adverse effect on health and well-being of people. Ochimus(2021) in a study of safety risk behavior among the youth in Nigeria, observed that 15% of the adolescents within the ages of 10 and 19 years, do not follow rules or instructions in carrying out any assignment, do not use or wear personal protective equipment (PPE) , not following infectious control precautions to ensure protection against hazards in work place, some 25% did not adhere to traffic regulation and 15% showed poor hand hygiene practices. The ages as identified corresponds to ages of adolescents in secondary schools. In Nigeria also, there have been 94% increase in HIV prevalence among adolescents aged 15-19 years between 2010 – 2020 (Aboki ,2022). Nigeria follows South Africa in having the second largest HIV in the world (UNAIDS,2017). This development which is linked to safety risk behavior, unfortunately betrays holistic health being craved for worldwide.

Safety risk behaviours means involving oneself in behaviours or actions that increase the chances of injuries. Kate (2010) defined safety behavior as tactics or pattern of behaviour that an individual may adopt or use to cope with a whole variety of different situations or environment that they perceived as difficult , stressful or threatening . Poor safety behavior therefore could be seen as the failure of an individual to cope with a variety of situation perceived as stressful or threatening.

Shawn (2016) posited that unsafe behaviours are dangerous acts that often result in injuries and can be identified with common sense and experience. The author observed that when actions are highly probable to result in a negative outcome (ie injury) with high severity potential, they are viewed as unsafe. These are actions that negate safe behavior or safety practices. Safety according to Kumar (2023) is seen as the condition of being protected physical, social, emotional, occupational, psychological, educational, or other types of consequences of failure, damage, error, accidents, harm or any other event which could be considered non-desirable. Safety practices is seen as the use of personal protective equipment, training and following infectious control practices to ensure protection against hazards in work place (Nyame-Annan,2017). When actions above are not taken by individual to ensure safety, such behaviors is termed safety risk.

Such actions or behaviours that are seen as safety risk among others include non-adherence to traffic regulations, driving without seatbelts, receiving and making phone calls while driving on the road or while crossing road, non-adherence to instructions. Others according to Ochimus (2021), include non-use of personal protective equipment (such as glove ,masks, eye wear), lack of hand hygiene, non-implementation or observance of safety protocol, non adherence to guidelines and training programme, lack of inspection, equipment and facility maintenance.

Despite the impact of safety risk behavior on the health of individuals especially secondary school students, the rate of occurrence is increasing in recent times more especially in developing nations, Nigeria inclusive . In

Sub-Sahara Africa, there is wide spread evidence of safety risk behaviours among the adolescents (Ochimus, 2021). In Nigeria, Aboki (2022) found that safety risk behaviours were very common among secondary school students. In support of Aboki(2022) observation, Uzundu (2023) reported that Nigerians has the second burden of accidents and other diseases resulting from unsafe behaviours such as lack of personal protective equipment(PPE), lack of adherence to traffic regulations, inability to follow instructions in carrying out any assignment, abuse of drugs , unprotected sex ,etc with a national prevalence rate of 25% of youth within 12 and 19 years. These are mostly the ages of adolescents in secondary schools. WHO(2020) in its own reports stated that an estimated 2 million children and youths in Nigeria suffer from severe acute malnutrition(SAM), but only two out of every ten affected is currently reached with treatment . Emmanuel, Morah and Olaniyi (2017) reported that the prevalence of alcohol use .which is part of safety risk behavior among secondary school teachers in South West Nigeria was 1.4% in the last 12months , 80 (75.4%) male and 68(56.6%) female teachers drank alcohol. This consumption is considered high. In some other countries, some set of individuals unsafe behaviour is found to be low. Okolie (2021) reported that safety risk behavior among youths in Northern, Nigeria was 25% which was adjudged low. Safety risk .This was interpreted that safety risk behavior is a matter of lifestyle of an individual and not a matter of where you come from (country, ethnicity, and race).

As the safety risk behavior is not attributed to a particular race or ethni group, no one knows what the extent of safety risk behavior of secondary school students in Agbani Education Zone will look like, hence the need for this study.

Safety risk behavior is not without cost. Safety risk behaviours increases the probability of destructive physical, psychological and social consequences for the individual including the various behaviours such as poor diet, lack of physical activity, risky sexual behaviours, consumption of alcohol, tobacco and drug, high speed driving ,failing to wear personal protective equipment ,lack of adherence to traffic regulation (Doitus 2023). Ekenta(2023) in his own ,stated that unsafe behavior such as not following safety rules ,can directly lead to accidents and injuries. Continuing, the author stressed that these accidents can range from minor accidents to severe accidents with long-term consequences or even fatality. Olubido (2023) stated that safety risk behavior can impact both youth adjustment and long-term mental and physical health outcome. The economic impact of safety risk behavior can be significant. According to Ochimus (2021) safety risk behavior can lead to increased health costs due to injuries or illness, decreased productivity in the workplace and potential legal cost.

There are demographic variables that influence safety risk behaviours. Such variables as gender and location have been found to be major determinants of adolescent safety risk behavior (Enebechi, (2010). Gender is one of the variables that can influence health behavior.

Gender in the categorization of secondary school adolescents into male and female; Nnamdi , Obikezie and Obi(2015) found in their study that there is a significant difference between the male and female adolescents of senior secondary school in Anambra State in their exhibition of aggression. Also, male gender has been reported by Ochimus (2021) as a significantly socio-demographic characteristics associated with safety risk behavior just like location.

Locations are delineated into urban and rural settlements which are regarded as epidemiological spaces. Organisation of people into these epidemiological space could predispose them into involvement in safety risk behaviours. Ezema (2020) stated higher income per capita which is more prominent in the urban settings has been associated with accumulation of health risk behavior, Enebechi (2014) reported that violence related behavior of secondary school teachers in Enugu State are predicted by location.

Adolescents are important segment of Nigerian society which makes up over one third (31.6%) of Nigeria's population.

Adolescent is a young person who is no longer a child but who has not yet become an adult. The World Health Organisation (WHO, 2018) defines an adolescent as any person between ages 10 and 19. Adolescence is a transitional phase of growth and development between childhood and adulthood. It is a phase of maturation, a transition period of physical and psychological human development between childhood and adulthood.

Adolescent age is characterized by confusion, exuberance, desire for independence, zealotry, curiosity. Specialists consider adolescence as to be an intense and often stressful development period characterized by special types of behaviors like substance abuse, risky sex, alcohol consumption and other safety risk behaviors that place their health and well-being at risk. This characteristic nature of adolescents makes them more vulnerable to safety risk behaviours, hence the need to carry out a study on this group of people.

The choice of secondary school adolescents was informed by the fact that cases of unethical behavior associated with life style have been reported more among them. The study of secondary school adolescents safety risk behavior is critical at this stage of their development because it is stated that health risk behavior which may be initiated in adolescent could become damaging in adulthood, if it is overlooked at the onset. Due to the heavy burden that safety risk behaviour exerts on the global burden of disease especially among adolescents, more especially its contributions to poor academic achievement, it becomes necessary that this study be carried out among secondary school adolescents in Agbani Education Zone.

Research Questions:

To give direction to this study four research questions were raised to guide the study.

- What is the extent of safety risk behaviour among secondary school adolescents in Agbani Education Zone?
- What is the extent of safety risk behaviour among secondary school adolescent in Agbani Education Zone based on gender?
- What is the extent of safety risk behavior among secondary school adolescents in Agbani Education Zone Based on location?

Hypothesis:

The following hypothesis were formulated and tested at .05 level of significance

1. There is no significant difference in the extent to which safety risk behaviour among secondary school adolescents in Agbani Education Zone is based on gender.
2. There is no significant difference in the extent to which safety risk behavior among secondary school adolescents in Agbani Education Zone is based on location.

Methods

Descriptive survey research design was adopted for the study. The choice of this method was because it permits the description of the situation as they exist in their natural setting (Best, 1977). The population for the study was 13,105 from 51 secondary schools in Agbani Education Zone. The sample size for the study was 388 which was determined by the use of Taro Yamene(1964) formula. Structured questionnaire titled "Safety Risk Behaviour Questionnaire (SRBQ)" was the instrument used for data collection. The instrument was validated by three experts, two from the Department of Human Kinetics and Health Education and one from Science and Computer Department, all in Enugu State University of Science and Technology.

Reliability of the instrument was determined by the use of Cronbach Alpha statistics which yielded reliability coefficient value of .79 which indicated that the instrument was reliable enough.

The instrument was administered on the respondents with the help of 5 trained research assistants. Three hundred and eighty eight copies of the instrument was administered on the sampled students but at the end 371 copies (160 males 211 females, 191 urban and 180 rural) were correctly completed and returned giving a return rate of about 91%.

Data collection were analysed using mean and standard deviation. To make decision, mean scores greater than 0.1 but less than or equal to 1.1 ($0.1 \leq x \leq 1.1$) was regarded as very low extent, mean greater than 1.1 but less than or equal to 2.1 ($1.1 \leq x \leq 2.1$) was regarded as low extent, mean score greater than 2.1 but less than or

equal to 3.1 ($2.1 \geq x \leq 3.1$) was regarded as high extent, mean greater than 3.1 but less than or equal to 4.0 ($3.1 \geq x \leq 4.0$) was regarded as very high extent (Anugwu and Asugwa, 2015). T-test statistics was used to test the two hypotheses at .05 level of significance. If the p-value is less than 0.05 level of significance, the hypothesis will be rejected, but if greater than the .05 level of significance it will not be rejected.

Results

Data collected for the study was presented and analyzed based on the research questions and hypothesis that guided the study

Research question 1:

What is the extent of safety risk behaviour among secondary school adolescent in Agbani Educational Zone?

The research question 1 was answered using item 1-9 in the questionnaire. The data was presented in table 1 below.

Table 1: Mean Scores of Secondary School Adolescents on the Extent of Safety Risk Behaviour in Agbani Education Zone.

S/N	ITEMS	X	SD	DEC
1.	Do not wear helmet while riding on a bicycle	2.08	1.03	LE
2.	Do not wear sit belt while sitting in front of a car	2.19	1.00	HE
3	Ride in a car with a driver who is drunk	1.74	.855	LE
4.	Stay close to where people are fighting	2.06	.864	LE
5.	Look only left before crossing the road.	1.96	.873	LE
6	Climb and jump down from tree in the school	1.85	.868	LE
7	Answer call while crossing road	2.12	.869	HE
8	Stay in a building whose wall are cracked	1.95	.868	LE
9	Caring weight more than yourself	2.10	.889	LE
	Grand Mean	2.00	.539	LE

Table 1 indicated safety risk behavior's of the secondary school adolescents. It showed from the table that the students were involved in only two of the risk behaviours (i.e items 1 and 7) to a high extent. But the students were involved in the remaining safety risk behaviour (i.e. 2, 3, 4, 5, 6, 8 and 9) to a low extent. In overall, it indicates that the secondary school adolescents involve in safety risk behaviours to a low extent as was indicated by a grand mean of 2.00 with a standard deviation of .539.

Research question 2

What is the extent of safety risk behaviour among secondary school adolescents in Agbani Education Zone?

Table 2: Mean Response Score of Male and Female Secondary School Adolescents on the Extent of Safety Risk Behaviour.

S/N	ITEM	Male		Female	
		X	DEC	X	DEC
1	Do not wear helmet while riding on a bicycle	2.02	LE	1.85	LE
2	Do not wear sit belt while sitting in front of a car	2.10	LE	2.05	LE
3	Ride in a car with a driver who is drunk	1.25	LE	1.11	LE
4	Stay close to where people are fighting	1.72	LE	1.92	LE
5	Look only left before crossing the road	1.54	LE	1.23	LE
6	Climbs and jumps down from a tree in a school	1.38	LE	1.51	LE
7	Answers calls while crossing the road	2.01	LE	2.05	HE
8	Stay in a building whose walls are cracked	1.69	LE	1.72	LE
9	Carry's weight more than yourself	2.11	HE	1.95	LE
	Grand mean	1.76	LE	1.71	LE

Table 2 above showed that the mean for male secondary school adolescents ranges from 1.25 to 2.11 with a grand mean of 1.76. While the mean of female adolescents safety risk behaviour ‘/ranges from 1.11 to 2.05 with a grand mean of 1.71. This shows that both male and female secondary school adolescents are involved in safety risk behaviours to a low effect with female lower than the male.

Question 3:

Table3: Mean Respons Score of Urban and Rural Secondary School Adolescents on the Extent Eafety Risk Behaviour

S/N	ITEM	Urban		Rural	
		X	DEC	X	DEC
1	Do not wear hairnet while riding on a bicycle	1.55	LE	2.11	HE
2	Do not wear sit belt while sitting in front of a car	1.51	LE	1.72	LE
3	Ride in a car with a driver who is drunk	1.59	LE	1.05	LE
4	Stay close to where people are fighting	2.10	LE	1.95	LE
5	Look only left before crossing the road	2.01	LE	2.05	LE
6	Climb and Jump down form	1.57	LE	1.65	LE
7	Answer calls while crossing	1.68	LE	1.55	LE
8	Stay on a building whose walls are cracked	2.08	LE	2.00	LE
9	Carry's weight more than yourself	2.05	LE	1.72	LE
	Grand Mean	1.83	LE	1.76	LE

Table 3 above showed that the mean for urban secondary school adolescents ranges from 1.51 to 2.10 with a grand mean of 1.83. On the other hand, the mean of rural secondary school adolescents ranges from 1.05 to 2.11 with a grand mean of 1.76. This shows that both urban and rural secondary school adolescents are involved in safety risk behaviour to a low extent with urban higher than the rural secondary school adolescents.

Hypothesis:

There is no significant difference in the extent to which safety risk behaviours among secondary school adolescents in Agbani education zone is based on gender.

Table 4: Summary of t- test Analysis of Difference between Male and Female Secondary School Adolescents on the Extent of Safety Risk Behaviours in Agbani Education Z one.

Gender	N	$\bar{x}$	df	P-value	Dec
Male	160	2.69			
Female	211	2.58	369	0.39	Not significant (Do not reject)

The computed data in table 4 above shows that the P-value for safety risk behaviour (0.39) is more than .05 level of significance ($P < .05$). Thus the null hypothesis was not significant or not rejected. This shows that there is no significant difference in the extent to which safety risk behaviour among secondary school adolescents in Agbani education zone is based on gender.

Table 4: Summary of t- test Analysis of Difference Between Urban and Rural Secondary School Adolescents on the Extent of Safety Risk Behaviors in Agbani Education Zone.

Gender	N	$\bar{x}$	df	P-value	Dec
Urban	191	1.83	369	0.071	Not significant (Do not reject)
Rural	180	1.76			

The computed data in table 4 above shows that the P-value for safety risk behaviour (0.39) is more than .05 level of significance ($P < .05$). Thus the null hypothesis was not significant or not rejected. This shows that there is no significant difference in the extent to which safety risk behaviour among secondary school adolescents in Agbani education zone is based on location.

Discussion:

The finding to research questions 1 showed that secondary school adolescents in Agbani education zone are involved in safety risk behaviour to a low extent (2.00). This means that the adolescents do not take a lot of risk. Though, this finding is encouraging, it is also surprising. This result is unexpected bearing in mind the characteristics of this group of individual which is that they take a lot of risk which may stem from their curiosity over zealousness, and penchant for experimentation. This disposition is to a large extent due to the fact that they do not actually know the consequences of their risky action. This situation was captured by Rosenstock(1974) and Becker(1974) in Health belief model (HBM) of health promotion. The HBM posits that a person's adoption of a given health related behaviour is a function of the individual's perception of a threat to their personal health. However, the finding is in consonance with Ochiaka (2019) who found a low level of involvement of in-school adolescents in Public Secondary school in Enugu State in safety risk behavior. This finding means that the health of secondary school adolescents in Agbani Education Zone will be safe due to the low degree of risk behaviours they involve themselves in.

The finding pertaining to research question 2 showed that both male and female students in Agbani Education Zone are involved in safety risk behavior to a low extent (male 1.76, female 1.71). The involvement of male and female secondary school in safety risk behavior to a low extent is a welcome development. It is in agreement with common sense and shows that health education taught in schools has impact on the behavior of students. This finding is in agreement with that of Ochiaka (2019) who found that both males and females were involved in safety risk behaviours to a low extent.

The finding pertaining to question 3 revealed that both urban and rural secondary school adolescents in Agbani Education Zone involved in safety risk behaviours to a low extent (1.83 and 1.76 respectively). This finding is expected as the secondary school students offer health education in schools where the consequences of safety risk behavior is taught. This finding is in disagreement with that of Ezema (2020) who found that higher income per capita which is more prominent in the urban areas has been associated with the accumulation of health risk behaviours. Also this finding is in contrary to that of Enebechi (2014) who reported that violence related behavior of secondary school teachers in Enugu State are predicted by location.

The finding pertaining to hypothesis I revealed that there is no significant difference between male and female secondary school student in their involvement in safety risk behavior.

Exhibition of aggression. Also, male gender has been reported by Ochimusi (2019) as a significantly socio-demographic characteristics associated with safety risk behaviours just like location.

Conclusion

Based on the findings of the study , it was concluded that secondary school adolescents in Agbani Education Zone involve in safety risk behaviours to a low extent and also that the safety risk behaviours among secondary school students is not dependent on gender and location.

Recommendation

Based on the findings of this study, though there was low extent of involvement of secondary school adolescents in safety risk behavior , it was recommended that the state government through Post Primary School Management Board (PPSMB) should organize orientation ,seminar and workshops for the students on the consequences of safety risk behaviours.

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