

Investigation of Behavioural Modification Techniques among Street Children in Makurdi Metropolis

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Abstract

This study investigated behavior modification techniques among street children. The descriptive survey design was adopted. Three research questions and one hypothesis guided the study. A sample of 104 street children was randomly selected from four central areas in Makurdi, namely Wurukum, High-Level, Wadata and North Bank. Questionnaire titled (ABMTAA) was used for data collection, mean and t-test were used for data analysis Findings revealed that behavior modification techniques help in character reformation and alleviation of behavioural problems of street children ($102df = 000, p > .05$). The result shows that poverty is the major cause of street life in Makurdi metropolis. Based on the findings, it was concluded that, street children can be reintegrated with their families through adequate behavior modification techniques so that they became very useful citizens of the nation. Recommendations were made based on the findings of this work that poverty is the major cause of street life, therefore household suffering from poverty should embrace entrepreneur skills to improve on their standard of living. Parenthood education should include strategies for behavior modification that is preventive and rehabilitative procedures for child upbringing.

Key Words: Behaviour, Modification, Techniques, Street children misbehavior.

Introduction

The general perception about child's misbehavior is traced to the home background that is why most parents encourage children to be good ambassador of the family and home (Fakoya, 2009). Santrock(2005), Kembe (2005) and Nnachi (2007) asserted that environmental factors directly influence the behavior of an individual. Unfavourable environ-mental

stimulations, for instance are manifested in many social vices such as delinquency, corruption among public office holders, armed robbery, violence, mob actions, cultism, sexual misbehavior with attendant consequences on the development and well being of the individual (Kembe 2005). Earlier on, Ebigbo (2003) had reported that the major cause of street children misbehavior is poverty which

is described as any situation of serious deprivation or lack of resources and materials necessary for living. Fakoya (2009), reported that the persistent problem of street life is worsened by the social problems of poverty, ignorance and political mismanagement. This means that, these children have no reasonable provision to meet basic needs and therefore learn survival lifestyles from the streets. Dewees and Klees (2005) described street children as those growing up in unfavourable condition, who live on the street and derive their livelihood from the street. These street children abound in Makurdi metropolis. They constitute various forms of problems to themselves, their families and the society.

Ziegler and Stevenson (2007), stated that most street children share common problems which range from social, physical and psychological. Social problems include poverty and illiteracy, discrimination and lack of access to resources, hostile and violent environment and stigmatization (Oluwatayo 2008). Physical problems include lack of adequate nutrition, sexual and reproductive health problems and common diseases such as skin diseases, parasitic diseases, tuberculosis and dental problems (Jones *et al* 2003). Psychological and mental problems can be activated by a stressful past, transitory life-styles, and drug and alcohol abuse.

UNICEF (2004) revealed that children separated from their families and homes are likely to be malnourished, stigmatized, abused

and uneducated. Thus, if the society is indifferent to the plight of street children, it could in turn produce violence, high rate of robbery, theft, thuggery and other forms of deviant behaviours.

Ebigbo (2003), and Gorman (2011) asserted that for children to learn and mature, they must be given physical care including food, shelter and protection from harm, care and affection. These provisions will improve social and emotional stability that will help children overcome deviant behaviours. Mather and Goldstein (2010) revealed that all behaviors could be maintained, changed, or shaped by the consequences of such behavior. This means that if a child is well nurtured, protected, taught, given counsel, and guided in behavior. When these occur, the child's self esteem to a large extent is improved. This has to do with the principle of behaviour modification.

According to Nnachi (2007), human behaviour is an observable and measurable construct which is in response to environmental stimulation. Santrock, 2005 and Adanyi, 2008 stated that behaviour modification is a way in which children with behavioural problems can be helped in using psychological approaches in changing certain behaviours that are considered to be unacceptable in the society.

Ekpo and Adelekan (2012) highlighted two broad behaviour modification techniques, these are preventive and rehabilitative. Preventive techniques are associated

with extinction of unwanted behaviour through the use of selective reinforcements to bring out the desired change in behaviour (Bahago, 2004). This is achieved through habit formation and role modeling. This would occur for instance, where parents develop a positive lifestyle with positive values, beliefs and attitudes, and high moral standards. These may manifest in the parents coping with their physical, psychological, social and economic environments on a day-to-day basis. These behaviours of the parents constitute what their children do and become (Giddens, 2006; Kembe and Ifejika, 2013).

According to Kembe and Okonkwo (2013), rehabilitation technique includes institutionalization, counseling, acquisition of vocational and daily living skills. Developing appropriate skills help street children mentally, socially and economically and offers them the opportunity for self-reliance. Skills such as bead and soap making, sewing, dyeing, laundry work, snacks making, carpentry and joinery, metal work and fabrication, electrical installations, interior and venue decorations and small scale businesses are profitable ventures that are productive. Therefore, it is vital that both preventive and rehabilitative measures be identified and adopted to reduce the incidence of street life among children in Benue State.

Objectives of the Study

The general objective of the study was to investigate behavioural modification issues relating to street children in Makurdi metropolis. Specifically, the study:

1. identify factors that give rise to occurrence of street children in Makurdi Metropolis.
2. identify the behavioural problems associated with street children in Makurdi Metropolis.
3. determine effective behaviour modification techniques that could be applied to street children in Makurdi Metropolis.

Research Questions

The following research questions guided the study:

1. What are the dimensions of street children in Makurdi metropolis?
2. What are behavioural problems of street children in Makurdi metropolis?
3. What are the effective behaviour modification techniques used for the rehabilitation of street children in Makurdi metropolis?

Methodology

Design of the study: Survey Research design was considered appropriate for the study.

Area of the Study: The research was conducted in Makurdi Local Government Area of Benue State. Makurdi Metropolis is divided into designated government approved areas namely: High-Level, Wadata, Wurukum, and North-Bank.

The Population of Study: The population of the study comprises

children under the age of 18 years in Makurdi metropolis in Benue State. The target population was estimated 6,590 street children (Benue State Ministry of Women Affairs 2012).

Sample and Sampling Procedure: Multistage sampling techniques: Stratification, purposive and random sampling techniques were used to select 140 street children from the population. First, High-Level Zone was stratified into two (2) Low-Level and High-Level urban. Secondly, Wadata was purposely selected while North Bank and Wurukum Zones were randomly selected. Low-level (15 respondents), high level urban (20), Wadata (35), North bank (35), Wurukum (35) to get a total sample size of 140 respondents

Instrument for Data Collection: A structured questionnaire was the instrument used to collect data for the study. The instrument was fitted (IBMTASC) investigation of behavioural modification techniques among street children. The

questionnaire was divided into two sections A and B. Section A sought information on Bio-data of the respondents while section B sought information to answer the three research questions. A 5 - point Likert scale was used 5 (strongly agreed) 4 (agreed), 3(slightly agreed), 2 (disagreed) and 1 (strongly disagreed) mean of 2.50 was used for deciding level of acceptance. The instrument was subjected to validation by two experts from the department of Home Science and Management University of Agriculture, Makurdi.

Method of Data Analysis: Data collected were analyzed using frequencies, percentage and mean. Any mean score of or above 2.5 level indicates acceptance while below 2.50 was read as rejected.

Results

Demographic information showed that out of 140 respondents, 63% were within the ages of 14 - 18 years, while 37% are within the ages of 10 - 13 years.

Table 1: Mean of the responses on the dimensions of street children in Makurdi Metropolis.

Reasons of street children	Mean	Remark
Poverty	2.58	Significant factor
Parental separation	2.69	"
Escape from conflict/abuse	2.73	"
Cultism	2.62	"
To earn money	2.77	"
To live independently/peer pressure	2.77	"
Death of both parents	2.52	"
Abandonment	2.54	"

SF = significant factor NF = Not a factor

Table 1 shows that all the eight items are significant factors with mean score of 2.5 and above. This means that all the eight items are factors (reasons) that give rise to the occurrence of street children in Makurdi Metropolis.

Table 2: Mean Responses on Behavioural Problems Associated with Street Children in Makurdi Metropolis.

Behavioural problems of street children	Mean	Remark
Smoking and drug abuse	2.58	Problem
Alcoholism	2.58	"
Cultism and thuggery	2.54	"
Touting	2.51	"
Gambling	2.49	"
Early sex initiation	2.78	"
Multiple sex partners	1.62	Not problem
Petty stealing	2.53	problem

Table 2 shows the behavioural problems associated with street children in Makurdi metropolis. Items with the highest mean of 2.78 is early sex initiation followed by smoking and drug abuse with mean score of 2.58. The only problems not encountered by street children is multiple sex partners with mean value of 1.62.

Table 3: Mean responses on Techniques for behaviour modification of street children in Makurdi metropolis.

Behaviour modification strategies	Mean	Remark
Formal education	2.53	Strategy
Group counseling/therapy	2.56	"
Handicaps/skill acquisitions	2.56	"
Gardening	2.49	"
Music and sporting activities	2.53	"
Information and computer related skills (ICT)	2.54	"
Provision of care giving skills (nannies).	2.51	"

Table 3 reveals the techniques of behaviour modification with all the seven factors being significant.

Discussion of Findings

The findings of this study show that the menace of street children is a social problem arising from poverty. Table 1 reveals that street children are family breakdown ($x = 2.69$) and poverty ($x =$

2.58) and other social problems cause the occurrence of street children. This finding is consistent with Fakoya (2009), who reported that the persistent problem of street life is worsened by the social climate of poverty, ignorance which manifest in two interacting deprivations - physiological and social. Physiological deprivation describes

the inability of children to meet or achieve basic materials. Physiological needs can be measured either as a lack of income, which limits access to food, education, health, housing, water and sanitation services.

Social deprivation refers to absence of elements that are empowering such as autonomy, time, information, dignity and self-esteem. UNICEF (2004) reports that street children are separated from their families and homes and are likely to be malnourished, stigmatized, abused and uneducated. Onyenka (2009) revealed that petty stealing, cultism and political thuggery activities are some of the social problems associated with street life. Ebigbo (2003) and Ekpo and Adelekam (2012) stated that street children in order to survive become defenseless victims of violence, open to criminal activities and political thuggery. Thus, if the society is indifferent to the plight of street children the outcome is insurgency as witness in our society today. In modifying street children behaviour, Mather and Goldstein (2010) stated that behaviour can be maintained, changed or shaped, these is in line with Nnachi (2007) who stated that behaviour is an observable and measurable construct and response to environmental stimulations, therefore behaviour modification of street children will curb the social problems associated with street life. In line with the above, the report of Kembe and Okonkwo 2013, "rehabilitation of street children in orphanage homes involves adjustment and skill building

programmes such as entrepreneurship, special trade, including welding, wood work/ Joinery and other forms of training in life skills" will be a relevant strategy for behaviour modification.

Conclusion

The plight and behavioural challenges of street children in Makurdi metropolis continues to be a traumatic concern to the society. The dimensions of street life ranges from abandonment, escape from family abuse, parental separation (Divorce), peer pressure, death of both parents and poverty.

Behaviour modification therapy has proved to be a remedy in curbing some of these behavioural problems of street life it is therefore concluded that with behaviour modification strategies, street children can be restored into productive lifestyle for personal, community and societal development.

Recommendation

1. Children are very crucial set of people in the society and their issues cannot be treated with laxity. Based on the findings of this work, poverty is the major cause of street life; therefore household suffering from poverty should embrace entrepreneur skills to improve on their standard of living.
2. Parenthood education should include strategies for behavior modification that is preventive and rehabilitative procedures for child upbringing.

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