

## GIRL CHILD EDUCATION: A THREAT TO THE HEALTH RELATED MILLENNIUM DEVELOPMENT GOALS

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### ABSTRACT

*World leaders have agreed to create opportunity for the provision of quality education for all its citizens. This was after The World Conference on Education for All (EFA), 1990 and The Dakar Framework for Action, 2000. Nigeria Policy on Education submits that every child shall have a right to equal educational opportunities irrespective of any real or imagined disability. The Education for All (EFA), Dakar Framework for Action, (DFA) and 7Point Agenda (7PA) of Nigeria's President Musa Umaru Yar'Adua are complementary to the MDGs eight goals all to be achieved by year 2015. Goals 4 to 6 of the MDGs are health related (Reduce Child Mortality; Improve Maternal Health and Combat HIV/AIDS, Malaria and other Diseases). The girl child, a citizen of the world, does not seem to benefit from due to low enrollment and retention in schools. Evidence abound that educating girls is essential factor towards making societies healthier, wealthier and safer. However, some of them end up as street girls. The street provides numerous dangers to her health and social well being. There are evidences that education is a potent instrument if given, the girl child can scale over the dangers posed to her health. The paper concluded by giving the contribution of Gombe State University to girl child education.*

### Introduction

The World Declaration on Education for All (EFA) arising from the World Conference on Education for All (Jomtien, Thailand, March 1990) marked a turning point in the annals of international commitment, cooperation and collaboration for education. It presented a policy opportunity to the provision of quality basic education for all the citizens of the world. The Education for All movement was further heightened a decade later by the World Education Forum held in Dakar,

Senegal. This resulted in the development and adoption of the Dakar Framework for Action Education for All: meeting a collective commitment.

The document provided an enabling framework for the achievement of EFA goal by holding governments accountable, and providing concrete, time-bound targets and commitments for global monitoring and evaluation. In addition to this, the Dakar Framework for Action with its particular emphasis on girls' schooling was a significant contribution to the concerted effort to promote gender equity and eliminate gender inequality in education.

The EFA Declaration and the Dakar Framework for Action also complement the Millennium Development Goals (MDGs) especially MDGs 2 and 3 which focus on achieving universal basic education and promoting gender equity. Inculcating gender into and encouraging the use of gender lens on development goals has been found to be a critical "pathway" to other development outcomes (Timothy quoted in Obilade and Adelodun, 2007:206).

Despite the ambitious programs as designed for EFA and the Dakar Framework for Action, girl child education is still a global phenomenon. This is more prevalent in developing nations. Our country, Nigeria is a key to this aspect of underdevelopment.

### **Why Girl Child Education and Why is it a Threat to Health**

We all believe that education matters, but female education matters a lot. Development discourses within the past few decades have focused on the value of education for uplifting persons, communities and nations out of stagnancy and instability; and providing them a more promising future.

Research has established that educating girls is an essential factor towards making societies healthier, wealthier and safer. It is central to enhancing the 'quality of life'. Educating girls has been said to be one of the most important investments that any country can make in its own future because of the "documented social and economic returns" (Timothy cited in Obilade, 2007). An investment in girl child education can be considered a top ranked social investment in national development. (DFID, 2005; Kurz and Prather, 1995; and USAID, 2004). Obama (2009) said in his famous Cairo speech in June that "...it is no coincidence that countries where women are well educated are far more likely to be prosperous". Girl child education is indeed a critical factor in all aspects of development.

Gachie (2005) discussing the plight of the girl child in Africa likened it to the one of struggles where her very existence is beholden to external issues that pay little or no attention to her needs, capacities, potentials and abilities. She faces a problem from birth through adolescence, right to adulthood. She occupies a very weak position in her household dynamics and has little or no voice in making of choices that shape her future.

Nowhere is this more pronounced than in the area of education. Global and national figures abound to validate the entrenched marginalization and discrimination suffered by the girl child in the quest for equitability in access and retention to education. The girl child often spends the life being passed over in favour of her brother and is usually the first to be denied education when the family faces financial challenges. In very many communities in Africa the value of investing in the education of the girl child is questioned-why invest anyway in another man's wife.

When they are denied opportunity to education, they are denied opportunities to becoming relevant, significant and valuable hence they should be of concerned as threat to health.

Underpinning the achievement of the Millennium Development Goals (MDGs) that are related to health are MDGs goal 4 (Reduce Child Mortality); goal 5 (Improve Maternal Health); goal 6 (Combat HIV/AIDS, Malaria and other diseases sustainability). These goals listed above are directly related to girl child education and if not achieved will be a threat to her health.

### **Philosophy and Goals of Education in Nigeria**

A nation's policy on education is government's way of realizing the part of the national goals which can be achieved using education as a tool.

Nigeria's philosophy of education therefore is based on: "The provision of equal access to educational opportunities for all citizens of the country at the primary, secondary and tertiary levels both inside and outside the formal school system".

### **Trends in Girls Child Education in Nigeria**

This section merely presents to the reader the trends in girl child education in Nigeria. The paper will not present arguments adduced to the reasons for poor enrolment rate.

Scholars who want to delve into this area should be able to consult a lot of literature that abound in our libraries and other sources.

Global figures on primary school enrolment collected in 1998 indicated that of the 113 million school age children not enrolled in primary education, 97% lived in developing nations (such as Nigeria) and nearly 60% were girls (United Nations, 2001). In Nigeria, although there have been some slight improvement to the situation cited above, there have been no major shifts in the gender pattern of enrolment and retention in education. Disparities between boys and girls remain serious. The promise education holds remains an elusive dream for too many girl-children (USAID 2004). The gender disparity in education is further fueled by negative cultural practices which put fewer premiums on the training of the girl child. Bountiful data abound to establish the educational disadvantages suffered by the girl child in various parts of Nigeria. As an illustration, in 2001, of the 7 million children of primary school age not enrolled in school, over 62% were girls (DFID/UNICEF; 2004). More recent data arising out of concerted efforts at gender disaggregation of data at levels of education also established the gender disparities in education. For example the national average of gender disparity in enrolment at the primary school has put it at 12% in favor of boys. The situation is even worse in the Northern states with the gender disparity in primary school enrolment in favor of boys being as high as 30% and the Net Attendance Ratio (NAR) varying from 49.52% (male) and 34.2% (female). (Aina, 2004; National Population Commission (Nigeria). The situation at the secondary and tertiary levels of education is much worse with NAR for secondary school attendance in North Western States ranging from 19.8% (male) to 9.5% (female). It is no wonder that Tahir (2003) reported that literacy level among women has dropped from 44% to 41% in 1999.

#### **Threat to the Health Related Millennium Development Goals (MDGs)**

In discussing this topic, we need to refer specifically to the MDGs that are health related and these are discussed below:

Millennium development goals 4 and 5 address reduction of child mortality and improvement of maternal health. The major solution to the reduction of child mortality and improving maternal health is through educating girl-child (men and women of course) on the safe health practices. Health education programme consisting of life skills, family planning, reproductive health education care of the child or childcare education, etc. are programs that can be introduced to the girl-child. This can be achieved through education for living as a dimension of girl-child

education. The objective of this kind of education is to equip them to be able to deal with, defend and protect themselves from health threatening factors in their environment.

The Millennium Development Goals (MDGs) goal no. 6 is aimed at combating HIV/AIDS, malaria and other diseases. HIV/AIDS as a menace has gained worldwide prominence since 1981. The scourge is reported in almost all countries of the world today. By 1991, USA, Britain, France, Italy, Brazil and Haiti and Central and East Central countries of Africa had high incidence rate. We are all aware of the Benue State pathetic story of the devastating effect of HIV/AIDS, (NHSS 2008). (SENTINEL SURVEY 2008 gave the National as 4.6% and Benue State as 10.6%). We are also aware that many children in Nigeria have been orphaned by HIV/AIDS.

### **Impact of Girl Child Education on Health**

A major factor responsible for the spread of HIV/AIDS is adduced to lack of proper education (formal). Tahir (2003 : 93) puts it that, “educated girls and their off springs are more likely to be less vulnerable to harmful cultural practices, HIV/AIDS and other threats to their lives”. It is believed that lack of education is a cause for rising of HIV/AIDS infection, and that education is veritable tool for checkmating the scourge. UNESCO (2002: 4) notes that: “education is also critical to fight against AIDS. Lacking vaccine for the virus or a cure for the disease, education is one of the best social vaccines against HIV/AIDS”.

The prevalence rate of HIV/AIDS infection is lowest among 5-14 years age bracket, and so this age group offers what is known as a “Window of Hope” for the prevention of the spread of HIV/AIDS. In acknowledging the potency of education in taming HIV/AIDS scourge, UNESCO (2002) notes hopefully that “schools provide our best opportunity to reach the next generation with information and motivation to avoid risky behavior before they become infected with this deadly disease...”

Studies reported of some European countries e.g. Austria, showed reassuring results on the potency of education as a social vaccine against HIV/AIDS. In Uganda, especially in its rural areas, it was reported that over the course of time especially in the 1990s people who completed secondary education were seven times less likely to contract HIV and those completed primary education half as likely as those who received little or no schooling. The Zambian story of the 1990s also shows that HIV infection rates dropped among late adolescents who completed basic education but rose among those with little or no formal education. In Kenya it was found that

among seventeen-year old girls, those who were in secondary schools were about three times as likely to be virgins as those who could not continue beyond primary school (UNESCO, 2002).

Education has shown itself to be more potent vaccine than most anti-retroviral drugs presently available. This is because it disciplines people, increases their awareness of the killer disease and so, equips them to stay uninfected.

### **Girl Child Education, MDGs, Health and Street children**

Even though the World Declaration on Education for All, (EFA) and the adoption of the Dakar Framework for Action-Education for All are agenda that can be seen as ambitious for the reduction of poverty and improving lives that world leaders agreed on at the Millennium summit in September, 2001. Unfortunately, we are all living witness that none of the 7 point agenda or 7PA of President Umaru Musa Yar'Adua of Nigeria is realized in his over 2years in office. The effect of low enrolment rate of the girl child has brought about uncountable negative stories. One of which is their number in the street.

It is truism that many reasons are adduced to the influx of children on the street. Such reasons include social and emotional reasons. The public view street children are overwhelmingly negative.

Ritcher (1991) summarized the main elements of street children as:

- a) They live or spend a significant time on the street;
- b) The street is children's source of livelihood; and
- c) They are inadequately cared for, protected or supervised by responsible adults.

Girls who are not enrolled in schools might be found in streets in Nigeria as hawkers, vendors, domestic servants, etc. others suffer from physical exhaustion and are involved in employment which are hazardous to their physical and mental health. We can go on and on and will not exhaust what these children suffer especially from mental health related problems. The common threat is that streets have detrimental effects on girl child health, social and educational well-being.

As a way out, the girl child who is a prospective mother should be educated since experience has shown that strategies to increase women's education relative to that of man will tend to increase over all labour force participation. The girl child should not

be seen as a property because she has the same potential as the “boy child” for this reason, the girl child needs education for awareness in addition to employment.

### Empowering Street Children

The problem of street children is their education and health sectors can help reduce their conditions through the following ways:

- a) Open air street schools: - This is to be situated in strategic places such as entry points to cities or working places for girl child (children). The classes should last for 2 hours every day throughout the week;
- b) Drop in centre: - this should be aimed at persuading children to opt for more constructive life styles and take opportunity to shape a better future. The centre should provide safety and a place for rest as well friendship. It should be designed to provide a child friendly, safe and yet a challenging environment as well as serving as an avenue for reintegrating them with their families. It should be designed to provide various facilities such as counseling services, basic health centre and home placement. It should also provide life skills courses as sewing, weaving, knitting and other apprenticeship skills that empower them physically, emotionally, and psychologically.

### Gombe State University Efforts and the Girl Child Education

The table below (Table 1) shows the distribution of students of Gombe State University, Gombe admitted since inception. Something significant is demonstrated on the table; there is an appreciable growth in the number of females admitted as the years goes by.

**Table 1: Gender distribution of Undergraduates, Gombe State University, Gombe**

Session	Male	%	Female	%	Total	%
2005/2006	235	(68.31%)	109	(31.69%)	344	(100)
2006/2007	275	(62.64%)	164	(37.36%)	439	(100)
2007/2008	304	(63.07%)	178	(36.93%)	482	(100)
2008/2009	504	(63.32%)	292	(36.68%)	796	(100)

Source: Office of the Vice Chancellor, 2009

Total Male 1318  
 Female 743

Our female students consist of married and single ones. The married ones are allowed to continue child bearing. Since they have no maternity leave (even though they are at liberty to defer their studies) often most of them would prefer to take a few weeks off after delivery and continue to attend lectures. The Vice Chancellor, Prof. Abdullahi Mahadi, CON, in his wisdom has built a crèche for nursing mothers with adequate facilities provided. Nannies stay in the crèche with infants while the nursing mother attends her lectures and at interval visits and feed the child. The nanny is equally allowed to call on the mother in the event of critical condition of the child.

We have a strong policy of not allowing latecomers to lectures into a class. However, the law is fair on nursing mothers who may be allowed even after five to seven minutes into a lecture. This is novel development that most universities in Nigeria do not provide.

### **Conclusion**

Every Nigerian child "shall have a right to equal educational opportunities irrespective of any real or imagined disabilities each according to his or her ability" NPE (2004). The statement above can be said in another form to provide "Education for All" (EFA) and this is what the world declared in 1990. Despite the policy statement and the declaration, the girl child is being discriminated upon. Several customary practices and beliefs have placed the girl child in a secondary position when it comes to the provision of education. We have seen the disparity in practices that tend to favor the boy child. This disparity impacts negatively on the girl-child especially on her health.

Studies on the potency of education to impacting positively on the girl child's future have been reported and where it is unavailable the consequences are also shown especially on her health. Continuous denial of education for the girl child is considered a threat to her health.

### **Recommendations**

We have seen that other countries that employed education of the girl child impacted positively in their healthy growth and development, for this reason the following are recommended:



There should be aggressive pursuit in reducing gender gap in enrollment of girls and recruitment of female teachers who can teach in communities that are culturally sensitive to male teachers teaching females.

Concerted efforts by all agencies that evolved the ambitious programs of the MDGs must utilize all necessary framework targeted at increasing the girl child's access to educational opportunities. There is the need for compiling the list of street children including collating data on those working children for meaningful policy formulation. There is also the need for capacity building and networking among social sections that support the process of empowering street children through education. Also tertiary institutions in Nigeria should be encouraged to put up crèche for nursing mothers.

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