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# **Children's Mobility in Ghana**

## **An SBHA Special Issue**



Traffic dangers: a teacher helps pupils cross a busy road on the outskirts of Cape Coast at the end of the school day.  
Photograph © Gina Porter

**Volume 76, Issue 1, 2011**



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## Editorial

In this June/July 2011 issue of *Society, Biology and Human Affairs*, an enthusiastic group of Ghanaian scholars co-ordinated by guest editors Drs Gina Porter and Kate Hampshire, present the results of various aspects of a larger, ambitious and very successful project on 'Children, Transport and Mobility in Sub-Saharan Africa' (<http://www.dur.ac.uk/child.mobility/>).

Each of the accounts in this volume provide a fresh, intimate insight into the daily lives of Ghanaian children. All invite us to reflect on complex and sometimes uncomfortable ideas about the trade-offs between children's work, play, education and well-being. Most importantly, each provides some of the hard evidence needed to plan and implement policies that we hope will, sooner than later, pave the way for African youngsters to move forward towards a better future as adults.

I hope you enjoy reading this issue as much as I enjoyed working on it!

Alejandra Núñez-de la Mora  
Editor



## Guest Editorial: Children's Mobility in Ghana

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*Keywords:* Africa, children's agency, children's mobilities, children's work, migration

Children throughout Sub-Saharan Africa are extraordinarily mobile. Every day children travel to school, to markets, to fetch water and firewood, to work on farms and take farm produce to grinding mills, as well as to visit friends and family and to play. However, children's mobility is relatively invisible: most journeys that children undertake cover short distances and the vast majority are on foot. As such, very little research has been conducted into the extent of children's mobility and impacts on education, livelihoods, health and well-being. In this special issue, we make a contribution to this important gap, by presenting a series of papers on children's mobility in Ghana.

All of the papers in this special issue draw on data collected during a large-scale study on children's mobility and transport in Sub-Saharan Africa [[www.durham.ac.uk/child.mobility/](http://www.durham.ac.uk/child.mobility/)]. This work builds on earlier research by Gina Porter, Albert Abane and colleagues on gender and mobility in Ghana, which highlighted the need to look more closely at children's mobility as a topic of research in its own right (Porter 2009; Porter and Abane, 2008; Porter et al, this volume; 2003; 2007; 2011 and in press). The Child Mobility Study was undertaken among children aged between 8 and 18 years in Ghana, Malawi and South Africa. There were three strands to the methodology, which are presented in detail in the introductory paper, by Porter et al. Firstly, we used an innovative child-centred approach, in which 70 children (aged 11-19 when they started the project) received training and supervision to conduct research on mobility issues among their peers in their home communities (Porter et al, 2010a; Robson et al, 2009; Hampshire et al, 2012, forthcoming). Findings from this fed into a larger-scale qualitative study, undertaken by adult academic researchers in 24 study sites: eight in each country, comprising one urban, one peri-urban, one rural with basic services and two remote rural with no services (schools or health facilities) in each of two contrasting agro-ecological zones. The researchers used a range of

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[http://www.biosocsoc.org/sbha/resources/76\\_1/SBHA\\_756\\_1\\_Hampshire\\_et\\_al.pdf](http://www.biosocsoc.org/sbha/resources/76_1/SBHA_756_1_Hampshire_et_al.pdf)

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qualitative research methods, including: individual semi-structured interviews, focus group discussions and accompanied walks (see Porter et al, 2010b), with children, parents and community leaders. The interview and focus group questions centred on mobility in relation to four distinct themes: education, health, daily activities, and transport/migration. Finally, a survey was conducted with 1000 children per country (approximately 125 per study site) to test hypotheses generated by the qualitative phase of the research.

In this volume, we draw together papers from the Ghana study sites, to present a multi-faceted view of children's mobility in Ghana. The study sites spanned two of the principal agro-ecological zones in the country: the coastal savannah (around Cape Coast) and the forest belt (around Sunyani). In all of the study sites, children are very mobile, but the ways in which they move, the places where they go, and the ways in which they experience mobility vary between locations. The first paper, by Porter et al., gives an overview of the context, methods and key findings of the child mobility study in Ghana; the subsequent papers elaborate particular important themes in more detail.

The first two papers, by Esia-Donkoh and Mariwah consider children's mobility in relation to work and other activities that shape their daily lives. In all eight study sites, children are heavily implicated in domestic and extra-household tasks, both paid and unpaid, and many of these activities involve substantial journeys by foot, often carrying loads: water, firewood, maize, and assorted goods to trade. While much existing literature tends to be critical of children working, both of these papers try to understand the situation from the perspective both of the children involved and their parents. Thus, Esia-Donkoh and Mariwah explore children's lived experiences and emotional responses to the different tasks they undertake. While parents are the key figures directing children's household and extra-household work, they find that children also exercise varying degrees of agency, based on how they feel about the work they do. The following paper, by Mariwah and Esia-Donkoh, focuses specifically on children's paid work outside the home, specifically load-carrying work (carrying loads for payment or goods to trade, etc.) and considers the implications of this work within a child rights framework. Again, the situation is not straightforward. While children's work can interfere with their education and have negative potentially health implications (particularly for those carrying very heavy loads), the income generated from children's work can also provide resources necessary to facilitate schooling and healthcare expenditure. Moreover, many parents and children see work as a form of education or skills training.

While the two papers by Mariwah and Esia-Donkoh focus on children's daily mobility, the next two papers look at longer-term and often longer-distance movements of children. Temporary fostering of children is very common throughout Ghana; one in six children in our survey was living with neither of their biological parents, and only 11% of these children were orphans. Out-fostering of children may be done for a variety of reasons, including filling household labour gaps and improving educational opportunities for fostered children. Agblorti and Tanle consider the impacts on education opportunities and achievement of this form of mobility, and find a clear pattern of lower school enrolment and attendance among fostered children compared with biological children in the same household, coupled frequently with higher reported domestic workloads. Moreover, moving between households over extended distances can have a disruptive effect on education. However, fostering is not a uniformly negative experience, and in a few cases, children were fostered purposively to relatives in urban areas in order to facilitate access to education.

Tanle and Agblorti also focus on longer-term movements of children, but this time as their entire households move, and ask what the impact of this form of mobility might be on children's aspirations and on their ability to achieve these. Although the decisions to move households are almost entirely driven by adults, we see that children are able to exercise resistance to family migration in some cases, for example by electing to stay with relatives in the settlement of origin rather than moving with their parents, or staying in a boarding house in order not to disrupt their schooling. The mobility of households, and the children within those households, has important implications for children's aspirations and inter-generational transfers of knowledge and skills.

While the papers above underline how mobile children in Ghana are, both on a daily basis and undertaking longer-term movements, another key issue to emerge from the study was the limitations and constraints that children face in terms of mobility. Getting to schools, health centres, markets, and other places that they need or want to go, is often very difficult. The difficulties can be particularly acute for those living in remote rural areas, but even children living in urban and peri-urban settlements often struggle to travel around their communities easily and safely. Large distances, high costs of public transport, infrequent transport services to rural areas, and dangers experienced while traveling (such as the risks of traffic accidents, or encountering hazards along the way) mean that daily journeys to school, for example, could become a major ordeal, and even unfeasible for some children. Owusu and Amoaka-Sakyi consider the implications of children's constrained mobility in relation to access to health services. Their paper highlights some of the difficulties that both rural and

urban-dwelling children face in reaching health services and presents data on the impact of these difficulties on health-seeking practices.

One potential solution to mobility constraints is the use of Intermediate Means of Transport (IMTs), such as bicycles (Heyen-Perschon, 2001; Howe and Barwell, 1987; Howe and Dennis, 1993; Makapela, 2008). The final paper in this collection, by Amoaka-Sakyi and Owusu, explores the use of bicycles by children in Ghana, and the attitudes of children, parents and teachers to girls and boys cycling. While bicycle ownership is limited, many children cycle regularly, borrowing or hiring bicycles to run errands or for pleasure. However, children's bicycle use is strongly gendered, with many respondents (both children and adults) expressing disapproval about girls cycling; fears about road safety also constrain the use of bicycles by both girls and boys. The paper concludes by considering how various barriers to increased cycle use (cultural, economic, physical) might be overcome in order to improve children's access to schools, health services and other social amenities and opportunities.

Several key themes emerge from the papers as a whole. Firstly, it becomes clear that children's mobilities play a key role in relation to well-being, education and livelihoods. On the one hand, children are very mobile, but some forms of mobility (carrying heavy loads, walking long distances over difficult terrain) might be detrimental to educational opportunities, health and well-being. On the other hand, children experience serious constraints on their mobility, which means that access to schools, health services, markets and other places can be impeded, with potentially serious impacts on wellbeing and current and future livelihood opportunities. The constraints and associated impacts are most pronounced in rural and remote rural communities, where the distances that children need to cover to reach key services can be prohibitively long and difficult. However, even in more urban settings, there are important transport and mobility gaps, which impede children's access to services. We argue that addressing issues around children's mobility is crucial to the efforts of countries like Ghana in achieving the Millennium Development Goals with respect to education, health and poverty reduction.

A second theme to emerge is the complex and contingent nature of children's mobility in Ghana. For example, it is clear that many children experience high workloads from an early age, often carrying heavy loads of water, fuelwood and other goods, which can have very serious detrimental impacts on school attendance, health and wellbeing. However, as we have seen, for some children in some circumstances, engaging in this kind of paid work enables them to continue schooling and gain some measure of economic security. Similarly, while fostering is usually associated with negative impacts on schooling (a dominant

theme in much of the literature too: Case et al, 2004; Huisman and Smits, 2009), this is not always the case; indeed child fostering may have a variety of consequences for children, depending on the particular circumstances in each case. In other words, while the papers in this volume suggest some important emerging themes around young people's mobility and associated constraints and impacts, it is important to appreciate the heterogeneity of children's experiences. The complexities of local context must be properly understood in order to make sense of what is happening in practice, which often deviates from socially-prescribed norms and expectations (for a fuller discussion, see Hampshire et al, forthcoming, a).

A thirdly, related, point is that, despite the rhetoric suggesting that African children have limited agency with regard to mobility and activities, many of the children in our study were actively reflecting on their situations and are, in many cases, adopting creative strategies to overcome or mitigate some of the mobility difficulties they face. Agency and resistance can be expressed in more or less subtle or overt ways. While children rarely directly flout social convention or adults' instructions, there are myriad ways in which they can 'bend the rules' or tweak situations, with varying degrees of success (see Hampshire et al, forthcoming, b, for a fuller discussion of these issues in relation to health seeking). Thus, the papers in this volume add to the growing demand in the literature for us to take seriously children's agency (James et al, 1998; James and Prout, 1998; James 2007) even in situations where that agency may be severely constrained.

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## **Children's Mobility in Ghana: An overview of methods and findings from the Ghana Research Study.**

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*Key words: Africa, children's mobilities, research process, research methods, young researchers*

### *Introduction*

The papers in this special issue cover selected themes from a larger project on child mobility in Ghana, Malawi and South Africa. The themes are those which individual members of the Ghana research team identified as of particular interest and on which they have reflected, drawing on material collected and analysed by the team as a whole. In this paper we take a broader view, first presenting the background history and context of the three-country study in which the Ghana research is set (country selection, project design and methods), then focusing on the research process in Ghana. We follow this process from the preliminary selection of sites and refining of the project methods to suit local conditions, through to field collection of data in our two main research strands and its subsequent analysis.

The two research strands pursued in the study present different entry points through which we can explore children's mobility and access to services. One strand comprises relatively conventional academic research: the first part of this is qualitative (in-depth interviews with children, parents and other key informants; focus groups; life histories; accompanied walks), the second part consists of a large-scale quantitative questionnaire survey directed at children aged c. 9-18 years (N= 1000). Our second main research strand, less conventionally, is based in young people's own research, in which (following some preliminary training) they have selected their research methods and directly undertaken research with their peers. Findings from this second strand, which was undertaken at a relatively early stage in the project, by young people aged between about 11 and 20 years, also helped shape questions in the adult academic qualitative and quantitative elements.

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In the final sections of the paper some of the key findings emerging from the Ghana data are considered, with attention to the ways in which evidence from each of the research strands interrelates in building our conclusions. We also identify some practical interventions which might aid young people's mobility and service access in Ghana. Finally, we consider significant new questions which our mobilities research study has brought to the fore and reflect on the potential these offer for shaping a future research agenda.

### *Background history and context of the Ghana research study*

The research reported in this special issue was conducted in Ghana as part of a larger ESRC/DFID-funded child mobility study in three countries, Ghana, Malawi and South Africa. The whole project, however, has its origins in a series of earlier research projects on mobility and transport conducted principally in southern Ghana from 1997 onwards. These focused at first on women, transport and market access, and included an action research project in which transport equipment was introduced into five villages to assist women farmer-traders and its impact on village life then assessed. The studies entailed detailed traffic surveys which first highlighted the need to look at transport issues associated with children's mobility, because children were found to be transporting substantial loads of water, wood and agricultural produce for their families. Previous transport studies in sub-Saharan Africa had tended to subsume children's transport under women's work but this research indicated the need to disaggregate mobility data not only by gender but also by age. When we introduced Intermediate Means of Transport into the villages to aid women in their transport of farm produce, it transpired that it was only women who had children available to help who took up the offer of transport equipment (made available on credit). This refocused our attention on children's mobility and we undertook a series of small studies on children's mobility and use of transport in the five villages and neighbouring small towns, with particular reference to access to health, education and work (Porter and Blaufuss 2003; Porter, Blaufuss and Acheampong 2007; Porter 2009; Porter, Abane, Blaufuss and Acheampong 2011).

Our literature searches during this early phase indicated how little work had been conducted on child mobility and encouraged us to plan a larger study across a number of African countries. We had conceived of a conventional academic study but at this point were put in contact with an Indian NGO which works on child labour issues and has developed experience of working with children as researchers on their own account. This led to our piloting a child-centred study in India, Ghana and South Africa in which young researchers were given some basic training in suitable research methods and simple analytical techniques for

exploring mobility, with assistance from the Indian NGO, and then made small studies of children's transport and mobility issues in the neighbourhood (Porter and Abane 2008). In Ghana the work was conducted by 12 young researchers aged 11-19 years, close to Cape Coast, with assistance from then Masters' students in the Geography Department at the university, some of whom are contributors to this special issue. We were impressed by the output from this pilot study, in terms of the quality of understanding of young people's mobility issues it produced.

Having completed the small child-centred pilot studies and developed some understanding of the scale of children's mobility and transport challenges in small areas of southern Ghana and Eastern Cape South Africa, we proceeded to plan a larger-scale children's transport and mobility study in Africa. Our concern now was to make policy makers aware of the scale of children's mobility constraints in accessing education, health and other services and the likely level of demand for regional and national-level interventions: we needed a substantial and spatially extensive basic data to support this. Consequently, we planned a programme of research which would enable us to build a comparative database covering diverse agro-ecological, cultural and socio-economic areas.

We decided on three contrasting countries for the research: Ghana and South Africa (where we had undertaken the child-centred pilots), plus Malawi, one of Africa's poorest countries. Within each country we planned to work across at least two distinctive agro-ecological zones: in Ghana these would be the coastal savanna zone around Cape Coast and the forest zone around Sunyani. Within each agro-ecological zone, we needed to work in four contrasting types of site to pick up the diversity of children's transport and mobility needs and constraints: urban (a poor high density neighbourhood), peri-urban, rural with services (at least a primary school) and remote rural without services: thus, 8 sites per country, 24 sites in total.

In order to achieve a strong understanding of children's mobility issues, a child-centred approach was essential. However, given the large scale of the project, we decided that it would be necessary to build a two-strand approach in each of our study countries: one strand in which child researchers uncovered key questions (along the lines of our previous pilot), and a second academic researcher strand which drew on these findings to explore issues more widely across the 8 country sites. Within the child researcher strand we recruited and trained 70 researchers across the three countries, all in-school children between 11 and 19 years when they started the study: 33 girls, 37 boys (see Porter, Hampshire, et al. 2010 for full details of this strand).

Within the second (academic research) strand, the research collaborators met in Malawi for an inception workshop and drafted guidelines for intensive qualitative research (in-depth interviews, life histories, focus group discussions, accompanied walks) with young people, their parents, teachers and other key informants such as health workers and transport operators. The checklists were based on four separate key themes: education, health, activities (work and play) and transport and migration. Each checklist subsequently went through a series of drafts in response to the findings of the young researcher teams and academic researcher pilot studies which took place in each country.

Following the completion of a majority of the qualitative research, the academic team designed a substantial questionnaire survey, to test key hypotheses from the qualitative work. This was administered to approximately 1,000 children aged approximately 9-18 years per country and entailed obtaining a sample of about 125 respondents per settlement (through accessing households along transects, and randomly selecting one child per household for interview). The questionnaire first involved collection of some basic information from a parent or guardian, followed by the questionnaire completed with children (within sight of the parent but out of ear-shot).

#### *The research process in Ghana*

In Ghana, following preliminary work (the inception meeting in Malawi, which included young Ghanaian researchers from the pilot child researcher study in addition to the academic research team; preliminary site selection; grey literature review etc.) the main research process commenced early in January 2007 with the field pilot in Abura Asebu Kwamankese district, north of Cape Coast (an area transitional between the two agro-ecological zones where we would focus subsequently). During the pilot the UK project leader (Gina Porter) and lead Ghana country collaborator (Albert Abane) were able to train the seven field research assistants, explore potential research questions with the RAs, field test the draft qualitative checklists and survey questionnaire (which had already been tested in Malawi), and devise a broad programme/pattern of research for application in each field site. Final site selections for the academic-strand field studies in Central Region and the Sunyani area were also made at this time. We had hoped to include young researchers in the pilot but they had yet to start their first training workshop, due to school schedules which had to take precedence.

During the pilot we made the decision that, although interviews would be conducted in the appropriate local language, checklists were best prepared in English because of the emphasis on flexibility – developing a conversation. Each research assistant had selected one of the four themes on which to focus;

these were themes on which they subsequently worked in the main research phase and for these special issue papers.

After the pilot, the research study proceeded to the main phase. Sixteen young researchers were trained by Cape Coast staff at two regional workshops, one in the coastal region, one in Sunyani (eight children per region; 5 boys, 3 girls in each): they then undertook their own field investigations and their findings (such as the harassment of girls by taxi drivers and the work burden many children face before school) fed into the academic researchers' questions. In the academic strand the main phase commenced with detailed qualitative field studies, followed by a brief characterisation review of each research site (population size, distribution, principal economic activities, ethnicity, road access and transport services, other characteristics), prior to the application of the questionnaire survey which commenced in October 2007 (at the time of the UK monitoring review, when the young researchers were also interviewed on a one-to-one basis by Gina Porter about their experiences of the research process). The survey data (approximately 125 questionnaires per site) was subsequently brought to UK for input into SPSS by Durham research assistants because of difficulties with intermittent electricity supply at Cape Coast. The SPSS data was then shared by the UK and Cape Coast research teams.

The final project workshop for collaborators from all three countries took place at Mankessim, Ghana, in October 2008, and included representatives of the young researcher teams from each country. Preparations for a booklet written by the young researchers' about their findings started at this meeting; it is available on our project website at [www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility) Two thousand copies of the booklet were printed in Ghana and have been distributed to schools, ministries, communities, libraries and child-focused NGOs.

Subsequently, Kate Hampshire spent a term at Cape Coast during which she interviewed some of the young researchers once again about their experiences (which were still largely positive, see Hampshire et al. forthcoming) and ran writing workshops to help the project research assistants work on the data themes in which they had particular interest, resulting in this special issue.

#### *Findings from the field research in Ghana*

The three research elements pursued in the study– the young researchers' work, the academic qualitative studies and the academic survey research - present different entry points through which we can explore children's mobility and access to services.

The young researchers' studies took place over a number of weeks in school and in their home communities. They took place within the same regions as the adult academic research studies, but mostly in different sites. They usually worked with children of the same gender and age or those a little younger than themselves and followed diverse routes to understanding the mobility and access problems of their peers, from load weighing and accompanied walks to photography (using disposable cameras). Their investigations drew particular attention to the family contexts and associated workloads which help shape children's mobile lives. Their vignettes document not only the daily grind of domestic chores but also children's widespread required participation in family enterprises, whether trading, farming, fishing or sand-winning. The accounts of the adverse impacts this work has on children's lives - from load-carrying pain, exhaustion and fear of snakes when walking on the farm, to school punishments for late attendance, fear of getting lost on trading expeditions or meeting ghosts when going to collect water – not only have a particular poignancy but also provided a valuable base from which to develop questions that could be explored across diverse sites in the qualitative and survey research which followed.

The academic qualitative research also presents some very rich accounts of children's mobility and access constraints, again set within the broader context of their daily lives. We found the accompanied walks with children particularly valuable in this respect (in all three countries), because they allowed children to talk to adult researchers as they walked in companionable conversation, while avoiding embarrassing eye-to-eye contact and difficult silences. Interviews with parents and other key informants such as health workers and teachers and life histories with young adults in their 20s add to the texture of the work, offering an adult perspective which often confirms children's narratives but also contributes a longer view regarding impacts of current mobility constraints on future lives and life chances.

Our survey data, which covers over 300 variables, provides important complementary quantitative information on diverse mobility-related issues and the broader context within which they are set. With 1000 questionnaires per country, extensive statistical testing is also viable. This is especially important for convincing policy makers, for whom numbers are still often key to action, and for transport engineers who mostly have little regard for qualitative data. Very occasionally, however, the numbers seem to contradict our qualitative data, suggesting the need for a closer examination of the divergent patterns emerging. For instance, qualitative interviews in Ghana suggest that commercial portage is substantially more important than our survey data indicates (Porter et al. forthcoming). Hampshire et al. (forthcoming) show a similar pattern with

respect to fostering, which is highly significant for affected individuals (in terms of workloads and other negative outcomes reported in qualitative interviews) but seemingly insignificant insofar as statistical correlation between fostering and workload is concerned.

*Some key findings from the project data for Ghana are as follows:*

*1. Access to education and livelihoods:*

Mobility constraints interacting with heavy work demands place a particularly strong constraint on rural girls' education. Distance from school, when coupled with a heavy workload at home, affects school attendance, punctuality and performance: a long journey can be the tipping point in the decision to withdraw from formal education in a context where school attendance is a constant process of inter-generational negotiation. This has inevitable impact on livelihoods and life chances since girls' mobility constraints not only limit their educational achievement but also limit their potential to build the social networks needed to obtain work (Porter et al. in press). The richest evidence for these findings comes from qualitative interviews with children (including walking interviews) and their teachers but is supported by survey data such as that indicating the (high) proportion of children walking daily to school, required work tasks, reasons for lateness, reasons for withdrawal from education etc.

*2. Surveillance, sexuality and inter-generational tensions*

Inter-generational frictions around access to resources, youth sexuality, mobility and adult surveillance are widely in evidence in our qualitative data, though the way these play out varies with family and local context. In urban neighborhoods the greater potential for mobility and escape from surveillance can exacerbate inter-generational tensions. Although perhaps not as overt as in the South African study sites (Hampshire et al, 2011), the construction of girls' bodies as sexual objects makes their lives particularly difficult. However, harassment is not merely perpetrated by peers and in travel contexts: male teachers at both primary and secondary schools, for instance, seem to regard sexual access to young girl pupils as their right, as a few of our life histories with young women in their twenties attest (but is only rarely reported in interviews or in the survey question about reasons for leaving school; Porter et al, 2010 and in press).

*3. Load-carrying*

There has been remarkably little recognition of children's contributions to filling Africa's transport gap. Our qualitative data emphasizes the scale of children's

load carrying in Ghana and suggests the particularly important role of girls as load carriers. However, especially in Ghana's coastal savanna zone, the gender distinctions are considerably smaller than those we found in Malawi and also less than those in South Africa (where children's load-carrying overall is much more limited in scale): our survey data shows that both boys and girls carry a heavy water burden in Ghana. Fuelwood loads present an even heavier burden for children in remote rural sites. Perhaps unsurprisingly, at least 50% of both girls and boys in all our Ghana survey sites complained of pain associated with headloading (and 70% girls, 72% of boys for the country as a whole). This is higher than in comparable sites in our other study countries.

#### *4. Access to health services and related issues*

Physical access presents a major barrier to health service use for children. In Ghana over one-third reported that travel costs/difficulties had prevented them seeking healthcare in the preceding year. Other factors, such as high costs of treatment and perceived low quality of care also limit health service access but, like school attendance, physical access can be a tipping point. While rural children bear the brunt of these difficulties (reflected in extremely low rates of service use), urban-dwelling children fear negotiating busy roads/public transport when unwell (Hampshire et al. forthcoming).

#### *5. Mobile phones and virtual mobility*

Mobile phone use among young people expanded dramatically during the course of our project, primarily for social/family interaction: the survey data is particularly valuable in illustrating the scale of usage. In our urban sites in Ghana over 35% of children had used a phone in the previous week (mostly mobile phones). Boys make more use of phones than girls in sites with low phone usage (remote rural sites and rural sites with services) but girls make more use of phones than boys in (urban and peri-urban) sites with usage over 25%. Complex impacts reported in qualitative interviews include increased rural-urban linkages through virtual mobility for stretched families, but also some concerns regarding girls' acquisition of phones (Porter et al. forthcoming).

#### *Review and prospect*

The findings outlined above (discussed in detail in a number of publications), in conjunction with the ensuing papers, indicate the scale of young people's mobility constraints in Ghana and the diversity and complexity of the associated problems they face. In this concluding section we firstly review some suggestions for practical interventions which might improve conditions for the

children we interviewed and then reflect more broadly on our findings and their implications for shaping a future research agenda.

A number of suggestions can be made for follow-up activities to improve children's mobility and service access:

**Walking buses:** In contexts where children are threatened by traffic dangers or human attack en-route to school, the introduction of walking buses [travel groups utilising a register, supervised by adults and with 'bus stops' where children join the group] may be a valuable route to improved safety. There is no history of walking bus application outside Western contexts but we suggest the application has substantial potential to improve safety from attack or traffic [as opposed to a common Western focus on improving health/obesity reduction].

**Mentoring for girl 'self-boarders':** many girls from rural areas have to travel long distances to school each day or must board. Boarding facilities are often limited at secondary schools and absent at primary/JSS. Consequently many girls have to stay with relatives in town, or rent a room [termed self-boarding] in order to attend school. Girls who are self-boarding are vulnerable to advances from predatory men, especially when they have insufficient funds for personal upkeep. Child respondents and parents reported various cases of girls who become involved with boyfriends to help support them in town, but as a consequence return home pregnant and drop out of school. Although schools now officially allow girls to return to class after their babies are born, there are often insufficient family funds/support for the mother and child to make this feasible and they face stigma. One low-cost scheme to support girl self-boarders may be to introduce a mentoring scheme whereby older women [preferably those who have themselves been self-boarders, such as university staff in university towns] provide advice and emotional support within an organized structure of regular meetings. In Cape Coast this mentoring system could draw on university education department staff.

**Teacher sensitization to lateness contexts:** many children –especially girls – face punishment for late arrival at classes due to pre-school household work demands or travel distance constraints, especially from remote rural areas in the wet season. Teacher punishment – which is widespread and ranges from work tasks such as lavatory cleaning and compound sweeping to beatings and being excluded from class - encourages pupil truancy (because it may be safer not to attend that day if the child is late) and early drop-out. The teachers who provided support at our child researcher training workshops expressed considerable surprise about the extent of this problem for children and its repercussions and said this would change their own practices: with long periods



of urban residence they had inadequate appreciation of the constraints children face and the impact of punishments. One low-cost intervention we have suggested would be to design and provide teacher sensitization programmes in conjunction with the Ministry of Education for a number of teachers within the region. Schools would be helped to design and implement contextualized lateness policies. A preliminary workshop was held at the University of Cape Coast with the Education Directorate of Ghana's Central Region, plus head-teachers and other staff from both state and private schools in the Cape Coast area and organizations overseeing church-run schools. This resulted in a set of guidelines for addressing pupil lateness to be implemented by participating schools, drawing on and extending existing good practice.

Dedicated health counseling for young people: our data shows that it is extremely difficult for young people to obtain counseling and treatment at health centres unless they attend with an adult. Attendance with an adult can be particularly difficult in remote rural areas where health services are distantly located, or where adults are severely time-constrained by livelihood and other responsibilities. In Ghana the fact that the National Health Insurance Scheme only covers children whose parents are paid-up scheme members is an additional constraint. Children commonly resort to treatment on their own account simply by purchasing drugs (which may or may not be appropriate to their health problem) from drug and grocery stores (Hampshire et al, forthcoming). A set of guidelines could be developed, in conjunction with the Ministry of Health and a local health NGO for use by pharmacists and grocery stores when dealing with health-seeking children regarding where they can obtain appropriate advice and/or treatment for specific needs (including contraception) and illnesses. A training scheme using the guidelines would then be implemented with drug-store pharmacists and attendants, run by a local health NGO. This would need to be an accredited programme with the Ministry of Health and would require appropriate ethical approvals.

Traffic road safety training for out-of-school children working around busy roads: our data show that in-school children generally receive some basic road safety training (through their national curriculum requirements). Out-of-school children, however, receive no training yet are probably most in need of guidance. Traffic accident rates in Ghana are already high and set to rise as urbanization and vehicle numbers increase. Trading along busy roadsides is a common cause of traffic injury and death among young people. A road safety training programme is needed which is explicitly designed for work with illiterate young people. This could then be implemented with local NGOs specially focused on road-safety.

These are potential practical interventions, but our mobilities research with young people has also brought to the fore many new research questions: for instance, about the expanding role of mobile phones for young lives and their potential to substitute for physical mobility; the significance of fostering patterns for young people's livelihood trajectories and life chances; the growing dangers associated with children's independent pedestrian mobility as road traffic expands exponentially and how to address them; the potential to expand (safe) bicycle use among young people for improved access to school and work; and a broader question regarding the usage of qualitative and survey research findings in mixed-methods studies. However, there are two particular questions which merit priority in a future research agenda and which we hope to pursue.

Firstly, there is a clear need to explore the health impacts of headloading on children (and their mothers). Our research emphasises the pain which a large proportion of children report suffering as a direct consequence of pedestrian load carrying but we do not know its short and longer term impacts on health. The majority of information on health impacts of headloading (usually related to women and men) to date is anecdotal and comes as a by-product of transport-related research rather than studies made with/by health professionals. Research on bio-mechanical and reproductive health impacts is very limited and largely based on retrospective studies and, crucially, has not been adequately related to the socio-cultural context. The potential to reduce women's and children's pedestrian carrying burden may be limited, but, by addressing a series of significant knowledge gaps, intensive research in this field would enable appropriate health interventions and policy changes to minimise the risks involved.

Another important issue raised by our research is the intergenerational linkage in mobility patterns: in particular, the linkages between children's mobility and that of older carers. The relationality between children and older people's lives has been considered in general terms (e.g. Whyte and Whyte, 2004), but needs analysis in a mobility context (see Turner and Kwakye 1996 for a rare study re Accra, also Abane 2010). In Ghana 9% of the children we surveyed live with grandparents (usually a grandmother alone): a total of 15% of children live with someone other than their biological parent(s) in the coastal savanna and 20% in the forest zone. Many older carers whom we interviewed lack financial support from the child's parents and struggle to provide for children in their care. Poverty is a common characteristic of older people since government does not provide social security for the elderly (Apt 1997; van der Geest 1998; Aboderin 2004): family support for them is assumed. Ill-health and infirmity may introduce further problems, in a walking world where pedestrian transport dominates among all ages. The mobility and access constraints experienced by

older people may impact negatively not only on their own lives but on the educational, health and livelihood opportunities of children and young people in their care and thus reduce overall long-term potential for poverty eradication. However, the scale and nature of impact is unknown. We need an evidence base to elucidate the circumstances in which this is likely to occur (and what measures might be introduced to ameliorate it).

To conclude, the child mobility project in Ghana has proved extremely demanding in terms of the research process and the labour inputs entailed. However, it has also been an exciting and rewarding enterprise – hopefully, not just for the authors of the papers in this special issue, but ultimately for the young people who participated in the study and the wider constituency on whom our research is focused. Inevitably, perhaps, it has answered some questions but raised many more!

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## Work and Happiness: children's activities in Ghana

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### *Abstract*

*Background:* Children constitute a form of social labour in Africa. They are engaged in various forms of activities. In Ghana, adults typically decide activities for children. Some of these activities constitute a positive element in the child's development; others contravene existing frameworks that seek to protect children. However, very little research has been done to explore children's agency in contesting views of adults with respect to their activities. The study therefore explores children's deployment of agency to contest normative views about their work.

*Methods:* The study draws on data from a larger project entitled 'Children, Transport and Mobility in sub-Saharan Africa'. In Ghana, the Central and Brong Ahafo Regions were selected. Four study settlements comprising remote-rural, rural, peri-urban and urban characteristics were selected from each region to explore the similarities and differences in activities among children between the ages of 8 and 18 using qualitative and quantitative techniques. This study focuses on the qualitative data.

*Results:* Sex, age, cultural orientation, seasonality and status of a child influenced tasks assigned to children. Likes and dislikes of tasks depended on the tedious, duration and associated dangers. Children used resistance, rearrangement, group work and 'delay tactics' as forms of agency to express dislike of certain tasks. Male-children were more likely to exercise agency in one of these ways compared to female-children.

*Conclusions:* Cultural perception of childhood defines children's activities in Ghana. In order to support the interests of both children and adults, activity-evaluation must be done with children. This would enhance work and happiness.

*Keywords:* children, portering, agency, activities, work.

## *Introduction*

Children engage in wide range of activities. As social assets to households, children may help their parents or guardians, and in some cases themselves, by performing certain tasks for domestic and economic purposes. Some tasks are seen to serve as a platform for a gradual initiation into adulthood and a positive element in the child's development (United Nations International Child Educational Fund (UNICEF), 1997; Fyfe, 1989). As a result, children are often engaged in a number of household work or activities in many parts of the world (International Labour Organisation, 2000; Ahmed and del Ninno, 2003; Porter and Abane, 2009).

Children's work is categorised into domestic and economic activities. In relation to age, when a child's work exceeds a minimum number of hours, it ceases to be work, but labour. For instance, if a child aged 5-13 is engaged in an hour of economic work or 28 hours of domestic work per week, such work is defined as 'labour' (UNICEF, 2008). For adolescents aged between 14-17 years, work becomes 'labour' if its duration is more than 43 hours work per week (UNICEF, 2008). From the perspective of children, especially within the African (including Ghanaian) context, they are expected to obey and respect directives of adults including the work they engage in (Twum-Danso, 2009).

A number of legislative instruments and frameworks guide children's engagement in work. These include the UN Convention on the Rights of the Child (United Nations, 1989), respective national constitutions and legislations such as Ghana's 1992 Constitution and The Children's Act, 1998, as well as other regional and sub-regional frameworks (Twum-Danso, 2009; Randell Gergel, 2009). However, in Africa, and specifically in Ghana, children's activities are often largely decided by adults. This can be attributed to a strong cultural view that a child is supposed to obey the adult in all circumstances without any protest (Porter and Abane, 2009). However, very little research has been done on exploring children's agency in contesting views of adults regarding their activities or work.

This study is situated within the theoretical framework of cultural relativism. The theory explains that values are shared ideals which give rise to beliefs and norms of behaviour around which a people or a group organizes its collective life and goals. These values, according to the theory, are relative to the cultural setting out of which they arise (Rosado, 1994). This study, therefore, endeavours to explore children's and adults' perceptions of children's activities in Ghana to address the following questions:

- To what extent do children enjoy the activities they are engaged in?
- How do children respond to views of adults about their work?
- To what extent and how do children exercise agency in contesting normative views about their work?

### *Theoretical and Conceptual Issues*

In Ghana, as much as of Africa, many household activities are strongly gendered. Traditionally, household activities including home management and child rearing were considered the preserve of women, while men were the principal bread-winners. Until recently, this orientation detrimentally affected the formal education of females but favoured that of their male counterparts (Randell, 2009; Canagarajah and Coulombe, 1997).

Some of these cultural influences, which were considered discriminatory, culminated in the enactment, establishment and development of some legislative instruments to protect, guide and promote the interests, development and welfare of children. For instance, the United Nations Convention on the Rights of the Child (1989) generally prescribes three broad categories of rights encompassing protection, provision and participation.

In Ghana, affairs that affect children are guided by the 1992 Constitution of Ghana, The Children's Act, 1998 (Act 560) of Ghana, as well as other legislative instruments such as the Human Rights Act of 1998. In addition, there was deliberate government policy to promote and encourage more girls to attend school. This has resulted in a sharp decline of illiteracy rates among females from 1960 to 2000 and a reduction in gender imbalances in literacy and education. Notwithstanding, illiteracy is high in rural areas (National Population Council, 2006).

Meanings and values of childhood are highly culturally specific (Boakye-Boaten, 2010). Culture plays a key role in shaping the tasks that people, including children, perform. According to Boakye-Boaten (2010), children in Ghana are socialised through various institutional structures to acquire cultural behaviours of the society. Thus, as explained by the theory of cultural relativism, cultural systems are said to constitute a total social world that reproduces itself through enculturation; a process by which values, emotional dispositions, and embodied behaviours are transmitted from one generation to the next (Brown, 2008). Conformity and obedience to such values and norms of these institutional structures, controlled by adults, are crucial in child training.



The government of Ghana and international institutions have different chronological bases of conceptualising childhood. The 1992 Constitution of Ghana and the International Labour Organisation (ILO), for instance, define a child as a person below age 18, while the World Health Organisation (WHO) defines a child as a person less than five years. These definitions provide various roles and responsibilities of adults and governments regarding the welfare and development of the child. In this study we use the terms ‘children’ and ‘young people’ interchangeably to refer to our study participants aged 8-18 years.

Contextually, lack of or inadequate access to certain social infrastructure such as good roads, potable water, health facilities and schools, especially in rural and remote-rural communities in Ghana, profoundly influences children’s tasks and workloads. Children in such communities do not only sometimes forgo education; they may also be involved in some activities inimical to their welfare and development (Tanle and Awusabo-Asare, 2007). Sometimes, some of these cultural or adult dictates go contrary to existing legislative instruments outlined above, either knowingly or not.

#### *Methods and study setting*

This paper draws on data collected in Ghana as part of a large multi-country research project: *Children, Transport and Mobility in Sub-Saharan Africa* ([www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility)), designed and led by Durham University (UK), in collaboration with the University of Cape Coast (Ghana), and the University of Malawi and CSIR (South Africa). Details of the project study design, methodology and analysis (where it relates to Ghana) can be found in Porter et al (this volume); see also Porter et al (2010a, 2010b, 2010c, 2010d, 2011 in press; Robson et al, 2009). Briefly, the Child Mobility project was conducted in 24 field-sites across three countries: Ghana, Malawi and South Africa. In each field-site, qualitative and quantitative research methods were used to gather data on children’s mobility in relation to education, health, livelihoods, transport and migration. In this paper, we draw on the material collected in the Ghana field-sites.

In Ghana, fieldwork was conducted in Central Region (southern coastal zone) and Brong Ahafo (central belt forest zone). The Central region constitutes about 9% of the national population with Cape Coast as the metropolitan capital. Akans form 82% of the region’s population, of which 69% are Fantes. The forest zone is also mainly composed of Akans (62.7%), mainly Bonos and Asantes. Other prominent groupings mainly from the northern part of the country include the Mole Dagbon, Gurma and Grusi.

Four study settlements were selected in each zone: one urban, one peri-urban, one rural with basic services and one remote rural. Urban and peri-urban settlements comprised settlements with social services such as school, health centres and communication networks. While school services (basic, not secondary) were found in rural settlements, remote rural settlements had no services. The purpose was to explore the similarities and differences in activities and mobility issues among children between the ages of 8 and 18 (see Porter and Hampshire, this edition). Children make up a substantial proportion of the population in Ghana: according to Ghana's population and housing census, children under fifteen years constituted 41% of the population (Ghana Statistical Service, 2005).

The project adopted both qualitative and quantitative approaches. Qualitative data were first collected from children (in-school and out-of-school), parents (both male and female) as well as settlement leaders such as chiefs, head teachers, and religious leaders. Qualitative methods of data collection included accompanied walks with children (Porter et al, 2010a), in-depth interviews, life histories and focus-group discussions (with children and settlement leaders).

The project also trained children on basic research methods to collect data (qualitative and quantitative) from other children in their various localities (Porter et al, 2010c; Robson et al, 2009; Hampshire et al, 2012, forthcoming). In addition, the young researchers were introduced to basic skills in photography to help them to collect data with a camera. The young researchers used the data to write a book entitled 'Children, transport and mobility' (available on the project website at [www.dur.ac.uk/child.mobility/](http://www.dur.ac.uk/child.mobility/)).

A random sample of 1005 child-respondents comprising in-school and out-of-school children of ages 8 to 18 was selected and questionnaires were administered to them accordingly to collect the quantitative data. About 53% were females while 47% were males. This is broadly consistent with the national data of 51% and 49% respectively (Ghana Statistical Service, 2005). In this paper we present analysis of the data that relates to children's activities in Ghana.

Field assistants were drawn from the University of Cape Coast for the entire project. These were made up of lecturers, research assistants and post-graduate students. After a week training and pre-testing, a pilot study was conducted not only to ensure reliability and validity of the instrument, but also to enable the research team to organise administratively and culturally to minimize challenges during the actual field work (Babbie, 2005; Sarantakos, 2005). Notwithstanding, the team faced some challenges especially with out-of school children, some of whom were concerned about loss of income from time being interviewed.

Economic activities varied by study site. The urban settlements served as commercial and administrative towns in the respective zones. The other settlements were mainly farming communities. Other secondary occupations included charcoal processing and *pito* [local drink] brewing specifically in the coastal and forest zones respectively.

Poverty dimensions in the study zones are worth noting. The coastal zone lies within the fourth poorest region in the country (Ghana Statistical Service, 2005). Because a major focus of the Child Mobility Study (see below) was poverty, settlements of relatively low socio-economic status were selected. However, the remote rural sites in each zone experienced the highest levels of absolute poverty.

## *Results*

### *Children's activities*

Generally, adults expected children to work in one way or another to support households domestically and, in certain instances, economically. Children are involved in two broad types of activities: *in-house* and *out-of-house* activities. Examples of in-house activities are sweeping, washing dishes, and cooking and, sometimes, income-generating activities such as selling iced water or toffee from the home. Out-of-house activities include fetching water from water sources outside the house, other portage activities, tasks on the farm, and activities at the market.

Children's task schedules were found to vary according to time and day of the week. Morning tasks were commonly in-house, apart from fetching water from different sources, while afternoon and evening tasks were more often out-of-house, especially for children in the forest zone. On Saturdays, most of the activities were out-of-house. Out-of-school children were more likely to be involved in out-of-house activities for most of the day.

### *In-house activities*

Children's tasks differed according to age and sex as determined by parents/guardians, based on their cultural orientation or general perception. Generally, older children performed more household chores than younger children in both ecological zones. Washing dishes, sweeping rooms and compounds and other minor errands in the house were usually performed by younger children. Older children on the other hand were tasked to undertake some household chores that demand more cognitive and physical ability such as taking care of younger

children, washing clothes, cooking, and pounding *fufu* [a local cassava-based staple food].

Tasks, however, varied with the sex of young people in both ecological zones. Cooking, washing household clothes, bathing of younger children and fetching water were usually the preserve of female children. In the forest zone, this division of labour is most pronounced among migrants from the northern parts of the country, and is culturally-bound. Alongside performing household chores, female children in rural and remote rural settlements also engaged in farm and farm-related activities, as did male children.

Among the Akans, particularly in the coastal zone, gender differences in activities were generally less pronounced than among ‘northern groups’. Though tasks were still gendered, it was not uncommon to find male children assigned tasks at the kitchen including cooking. Other parents said that they assigned tasks to their children not on the basis of gender, but simply to ensure that work was completed on time:

I don't have any particular reason for giving different tasks to different children (including foster children). I have shared the tasks to the children to facilitate early completion. I do this so that the children can go to school early.  
[Parent, 48 years, urban, coastal zone]

Fostering can also affect young people's activities. Fostered children typically report being involved in more household tasks as compared to the own-children of guardians. Respondents who were fostered commented that they had to do a lot of tasks which at times affected their school attendance (see Agblorti and Tanle, this volume).

#### *Children's evaluation of in-house activities*

The key factors shaping children's evaluation of activities, irrespective of sex, study zone and residence status, were: how tedious it was seen to be, how long it would take, other characteristics of the tasks (e.g. tiring, dirty work), and perceived usefulness for future. These issues are highlighted in the following children's accounts:

I enjoy cooking. Food preparation helps one to know how to cook very well especially if it is done consistently. I want to cook well in future so I enjoy cooking in the house.  
[Female, 14 years, rural, forest zone]

It is a bit difficult cooking. That is what I dislike. I always cook everyday so I get tired. I wake up at 5:30 am and go to bed at 10.00pm. I spend most time cooking. I don't get enough sleep, mainly due to hours of cooking.

[Female, 13 years, peri-urban, coastal zone]

I dislike washing dishes. This is because I dislike contact with oily substances in the dishes. I like sweeping because it is the easiest of tasks. I only sweep one room daily.

[Male, 15 years, remote rural, coastal zone]

These accounts suggest that the task *per se* is not the object of dislike, but rather, the motivation of the child, the direct physical effects of the task as well as personal orientation of a child.

### Out-of-house activities

Children's activities transcend to domains outside the home. Common among these are portering and weeding. Portering, practised widely by both boys and girls in Ghana, includes carrying of water, firewood, charcoal and foodstuffs from the farm, wares and other loads to and from the market (Porter, Blaufuss and Acheampong, 2007; and in press; Porter et al. forthcoming). While some of these activities are performed daily, others are executed on a weekly basis depending on the settlement type, the prevailing season as well as economic activity a household is engaged in.

### Portering

#### *1. Fetching and carrying water from the riverside and other water points*

Water was the most commonly carried load by children. A little over 76% percent of the children surveyed carried water every day in the week preceding the survey (Table 1), while 42.4% said it was the heaviest load carried in the preceding week. Children in remote-rural and rural settlements often fetched water from rivers/streams, but even in urban and peri-urban areas, many households do not receive a reliable supply of water, and children are often charged with fetching water from various points, including rivers.

Formerly, we were drinking from a river here until we got connected and provided with pipe-borne water from a reservoir. Unfortunately, we have experienced cessation of pipe-borne water

flow for the past many months....So now most of the local people fetch from the river.

[Settlement leader, 49 years, peri-urban, coastal zone]

Every child in my household is supposed to fetch water four times a day with a gallon. At times we go once in morning and thrice in the evening to avoid being late to school. We fetch from the river which is about 400 metres from my house.

[Male, 12 years, peri-urban, coastal zone]

**Table 1: Number of days respondents carried water in the week preceding the survey**

| Sex of respondent | Number of days (%) |                       |                      |            | Total     |
|-------------------|--------------------|-----------------------|----------------------|------------|-----------|
|                   | Not at all         | A few days (1-3 days) | Most days (4-6 days) | Everyday   |           |
| Girls             | 60 (11.5)          | 35 (6.7)              | 28 (5.3)             | 401 (76.5) | 524 (100) |
| Boys              | 58 (12.3)          | 35 (7.4)              | 21 (4.5)             | 356 (75.7) | 470 (100) |
| Total             | 118 (11.9)         | 70 (7.0)              | 49 (4.9)             | 757 (76.2) | 994 (100) |

Source: Child Mobility Survey (2005)

The water availability situation becomes grave during the dry season in both ecological zones, particularly in the rural forest-zone settlements. This is because many water-points (rivers/streams) dry up in the dry (harmattan) season in Ghana. Some children recounted walking for more than two kilometres to look for water for the household. This did not only make them tired, but also affected regular attendance to school and farm (see also Porter et al. 2011 in press). Some of them complained of neck and back pains.

Other children secured water in the dry season by *digging out*, a process where the bedrock of the river/stream is dug and scooped to reach out for water. In Ghana both boys and girls carry a heavy water burden: about 77% of girls and about 76% of boys (Table 1) carried water every day (see Porter et al. forthcoming for further discussion).

## 2. Portering of firewood, foodstuff and charcoal from the farm

After water, firewood was the second most carried and second heaviest load in all study settlements, especially in peri-urban and rural communities where firewood is the main source of fuel for cooking. Firewood was usually collected from farms and bush-land. Average distance covered was between 3-5 km, while

loads carried weighed up to 20kg. Just over half of children surveyed had carried firewood in the preceding week. Most children (46% males and 44% females) carried firewood a few days (one to three days) of the preceding week (Table 2). Other factors influencing frequency of firewood collection by children included availability and accessibility of wood, frequency of use as well as prevailing weather conditions.

**Table 2: Number of days children carried firewood in the week preceding the survey**

| Sex of respondent | Number of times (%) |                          |                         |          | Total     |
|-------------------|---------------------|--------------------------|-------------------------|----------|-----------|
|                   | None at all         | A few days<br>(1-3 days) | Most days<br>(4-6 days) | Everyday |           |
| Boys              | 223 (47.5)          | 217 (46.3)               | 12 (2.6)                | 17 (3.6) | 469 (100) |
| Girls             | 238 (45.4)          | 231 (44.2)               | 26 (5.0)                | 28 (5.4) | 523 (100) |
| Total             | 461 (46.5)          | 448 (45.2)               | 38 (3.8)                | 45 (4.5) | 992 (100) |

Source: Child Mobility Survey (2005).

During the harvest season, many children carried foodstuffs such as cassava, plantain, yam and maize, mainly for household consumption, as well as charcoal for economic purposes. Some children carried charcoal from the processing points to accessible farms for tractors to cart it to the communities or the market centres. The charcoal business was vibrant in the peri-urban community in the coastal zone. These tasks were usually performed by older children on Saturdays and Sundays. In some instances, boys borrowed or hired hand trucks to carry the load for financial rewards.

### 3. *Porterage at market places*

Porterage goes beyond just carrying goods to the market. Two main forms of porterage were identified in the study; hawking and *kayayei* (see Tanle and Awusabo-Asare, 2007). *Kayayei* is a local name for girls who carry goods for economic purposes. Hawking goods was commonly done by in-school children, usually after school, to supplement household income; out-of-school children were more involved in *kayayei*, especially in the forest zone as a survival strategy.

There were also a few instances where in-school children, mainly girls, were actively involved in personal economic enterprise under the guidance and supervision of their parents; in most cases, the parents were involved in a similar business. A 14-year old female primary six pupil in a peri-urban settlement in the coastal zone shared her experience.

I realised that my parents were not able to meet all of our needs so I decided to enter into charcoal trading because it is the main product to sell here. I started selling charcoal in Elmina and my mother encouraged me. I now sell in Cape Coast. The charcoal business is my own business.

This girl, and others like her, exercise agency in adopting income generating activities in order to meet some of the personal, school or other needs because their parents are incapable of meeting all their personal and academic expenses largely due to household poverty (see Mariwah and Esia-Donkoh, this volume).

*Dangers associated with out-of-house activities*

Children's lived experiences of carrying out daily tasks entailed physical and psychological challenges. Activities such as fetching water and going to work on the farm could expose them to dangers, including fear of animals, especially snakes, and risk of physical injuries, especially among children in the remote rural sites:

I see snakes often on the road to farm and this is scary. Also I have cut my hand before [shows scar on the left hand]. I was weeding and held a tree to cut it and unfortunately, I cut my hand.  
[Male, 13 years, rural, forest zone]

I usually go to the riverside with my siblings or other children in the community. I am scared of 'water snakes'. We have been told that they are very poisonous. I am therefore scared to fetch water alone from the river.  
[Female, 12 years, peri-urban, coastal zone]

Urban and peri-urban children were also subject to danger during their work activities. Some of the children were scared about rough terrains while working. Others were scared about 'dangerous' vehicles such as tipper trucks and taxis. These were attributed to narrow roads, lack of pedestrian paths and to some extent reckless driving.

Other common complaints among children were pains associated with load-carrying. In the week preceding the survey, 41.1% of children reported experiencing neck-ache, 16.8% headache and 10.7% waist/back pains as a result of portage (see also Porter et al, forthcoming). Some children were given pain killers for relief by their parents or guardians; others self-medicated. Some (but



not all) community leaders and parents also commented on these health impacts of children's load-carrying work (see Mariwah and Esia-Donkoh, this volume).

*Children's evaluation of out-of-house activities*

Children evaluated their out-of-house tasks based on a number of factors, mainly, difficulty in performing a task, duration involved, physical pain/discomfort, potential dangers as well as environmental conditions such as the weather. A few children reported that they preferred fetching water to other tasks such as cooking because it was less tedious and mostly unsupervised so there was room to play at water points. At times, they went to play on the pretext of going to fetch water.

Farming and farm-related activities were considered the most tedious tasks, usually in rural and remote-rural settlements, while market-related activities such as *kaya-yei* and hawking were also considered tedious, especially when performed under the scorching sun:

Going to farm and carrying loads like cassava and firewood is the tedious of all the tasks I do. It is difficult for me. I usually feel pains in my neck and feet. I therefore dislike such task.

[Female, 14, remote-rural, coastal zone]

I dislike going to the farm. We work in the sun and that is most tedious. After those tasks in the sun, you are supposed to carry firewood as well and walk for an hour before coming to the house to cook and eat. If I had my own way, I would stop going to farm.

[Male, 16, rural, coastal zone]

Hawking is difficult. I hawk in the sun so it becomes difficult for me. I wish I don't sell that way but in a store or under a shade. I am scared when hawking also because of the fear of someone taking my money. I once lost my sales and got beaten by my mother.

[Female, 10, urban, forest zone]

*Children's general perceptions about their tasks*

It is difficult, if not impossible, for children to openly express their views about tasks assigned to them by adults and parents. Complaints about work are seen as amounting to disrespect towards elders, who are thought to know what is best for the child (Porter and Abane, 2009; Twum-Danso, 2009). However, some children were of the opinion that some of the tasks assigned to them were tedious while others were wrongly assigned. Some thought that some of the

tasks conflicted with their scarce leisure opportunities; and some male children in urban settlements and mostly in forest zone opined that it was inappropriate for them to engage in in-house activities such as washing dishes and cooking, which are seen as female-related activities.

Children responded to views about the tasks with varying degrees of openness. In most cases, girls and fostered children had more latent responses than boys and biological children. A similar difference existed between rural and urban settlements, perhaps because traditional values prevail more strongly in rural settlements.

Culturally, girls are expected to do all domestic tasks. Boys are not really supposed to do house chores if females are around. That is why males are not involved much in domestic tasks and females don't complain of such workloads.

[Male parent, 45 years, rural, forest zone]

Responses of urban boys were generally more open, perhaps, partly owing to some forms of local and media-related exposure (Twum-Danso, 2009).

### *Exercise of agency*

Although not always explicit, some children exercised some form of agency in the performance of their activity, which sometimes involves contesting social norms. This agency can take a number of different forms. First is active resistance, which was most markedly exercised by male children, usually for tasks that were perceived as being tedious or too time consuming. Beating, insults and denial of food are some of the punitive measures instituted by adults to mitigate resistance and/or ensure compliance, as this parent indicates:

The boys are too stubborn and would not mind even if they are called to work in the house. They prefer to play and be beaten. If you give birth to a male, you are in trouble. They are all stubborn.

[Female parent, 42 years, peri-urban, coastal zone]

Girls were less likely to refuse directly to undertake tasks, perhaps because of cultural conditioning to accept a lot of domestic tasks (see UNICEF, 1997). Some girls explained the reason they found it difficult to play:

I don't play at home. I only play when I come to school. I am always busy at home. After school, I fetch water and cook. Before

I complete my chores, it's almost dark. At weekends and vacations we go to farm during the day.

[Female, 12 years, rural, forest zone]

I don't have time to play. I am always busy in the house or in the farm or at the market. The little time I get is in the evening when I am about to sleep and I use that to learn too.

[Female, 14 years, rural, coastal zone]

A second form of agency exercised by children in relation to work was rearrangement. Some children rearranged with other siblings to help or perform tasks on their behalf to enable the child who initiated the rearrangement to go and play with other children. In some cases incentives such as a portion of food were used to achieve such an objective. Older male children especially in the coastal zone often exercised this form of agency.

Thirdly, some children mitigated workloads by doing tasks in groups. Group work took two forms. The first was that children intending to play at a certain time would agree to perform a particular task together in their respective household. Sometimes fetching water was arranged this way. The second form of group work was when friends of a child agree to help perform a task such as carrying loads, weeding, etc. In most cases the child who was helped was either a group leader or someone who owned a football or bicycle which was used by group members at play.

Finally, some children used 'delay tactics'; intentionally loitering or delaying coming home from school, church, errand, etc to avoid certain types of tasks. Others would play before coming home because some did not have the opportunity to play at home. One boy who used this approach said that:

I hardly play while fetching water in the morning because I could be late for school. But in the evening we play football at the bank of the river when asked to fetch water. Also, during Saturdays and Sundays we go to play with the pretence of going to fetch water.

[Male, 12 years, peri-urban, coastal zone]

As well as exercising agency to resist (overtly or otherwise) adult-directed tasks, other children made active and strategic choices, sometimes unbeknown to their parents/guardians, to undertake certain activities, usually economic enterprises. These included hunting, weeding, portage of farm products such as charcoal, firewood and other foodstuffs for economic benefits. Cash benefits accrued from such ventures were used to purchase some preferred foods, school items or

footballs. Male children were most often involved in such activities usually in a group, especially during the major farming season.

### *Discussion*

Children's work and leisure activities have potentially important impacts on their physical, social and mental wellbeing. Children's work is economically and culturally important in Ghana. As Fyfe (1989) has asserted, child's work as physical and mental involvement in a family or social activity can provide the child with a platform for a gradual initiation into adulthood. However, there can be tensions between this and other aspects of children's wellbeing, as well as with some legislative frameworks.

The context and practice of children's work need to be interrogated further in contemporary Ghana. We suggest that children should be engaged to discuss their physical, social and mental needs with influential adults as prescribed by The Children's Act, 1998 (Act 560) of Ghana and the Human Rights Act of 1998. If children participate and discuss such needs with adults, it may help both parties to understand each other's needs. This may not only fulfil demands of existing legal frameworks but also address issues that children could not openly express them to adults.

Danger and risks associated with children's work also merit discussion. The exposure to dangerous animals and vehicles as well as physical injuries associated with certain tasks such as economic enterprises is inimical to the mental and physical health of children. Though physical injuries were often dealt with, no mention was made about how children's psychological traumas were addressed. Perhaps, children do not report it or parents do not see it as an issue. Whichever the case may be, mental health of children is as important as their physical health (World Health Organisation, 2005).

Also crucial are the issues of child rights and agency. Rights of children are, to a large extent, embedded in the culture of a given group. Thus, rights to leisure, 'formal' education and other associated rights are not universal in their practice, but are culturally mediated. In Ghana, the process of child socialisation by adults often gives little or no room for children to freely express their perspectives about activities they engage in, or appropriate means of exercising agency about their work in ways that are acceptable to adults. Cultural relativism is thus an appropriate lens through which to study children's work in this and other contexts.

There are also a number of issues regarding the level of parents'/guardians' knowledge about the current and future needs of their children, and also legal frameworks, departments and agencies responsible for child welfare that need to be explored further. Such knowledge can help to inform parents and other key adults in understanding childhood issues generally, and how/why children may adopt certain forms of agency to resist some activities imposed on them. Developing effective agency is a crucial part of growing up. Parents and guardians should not see children's agency within this context as inherently threatening. Rather they should create appropriate platforms for children to express themselves freely and willingly for amicable cooperation. This might help to avoid the perception of 'stubbornness' (Santrock, 2005).

It should also be highlighted that children enjoy certain tasks for various reasons. Even those that are associated with fear and difficulty such as fetching water from the riverside, are enjoyed by some children to an extent, because they get access to play while performing the task. Knowledge about these is important because it provides a clue to guardians about children's interests, which, when developed, will benefit the child and the broader household and community.

### *Conclusion and recommendations*

Children's activities are varied and contingent. Studies into child issues, especially in developing countries show variation in how such communities conceptualise childhood, which is highly culturally contingent. These influence the employment of children for different tasks. This variability makes it difficult to prescribe a standard set of guidelines for children's work. However, such tasks need to be carefully evaluated with the children. This would serve as a platform for children's voices to be heard, at least at the household level.

Children's work and happiness are both complementary and in tension. Whereas some work activities provide avenues for children to learn basic skills useful in their development and as a source of happiness, other tasks compete with the space of schoolwork and play. Though none can be ignored, each must focus on the best interests of the child which is the prime consideration and focus of all legislations regarding children. There is therefore the need for governmental agencies and departments, as well as other non-governmental organisations to intensify civic education on this subject.

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## **Child labour or skills training? A rights-based analysis of children's contributions to household survival in Ghana**

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### *Abstract*

The high incidence of poverty in Africa means that households explore multiple survival strategies, one of which is heavy reliance on the productivity of their children. This issue has generated a lot of debate, with one school of thought viewing it as unacceptable child labour while others perceive it either as a method of socialisation for children or an informal apprenticeship. However, within the UN Convention of the Rights of the Child, children's contribution to household survival could be said to represent both an enhancement and infringement of child rights. Therefore, this paper seeks to examine children's contribution to household survival in the context of child rights, child labour and skill training. Using a qualitative approach, this paper draws on 323 interviews and 31 focus group discussions conducted with children, parents and key informants in eight (8) communities from two (2) ecological zones in Ghana as part of a larger research project on Children Mobility and Transport in Sub-Saharan Africa. The results showed that child portage and selling are the commonest activities children engage in to generate income to support their families. While some parents and children see children's work as a contribution to the survival of their households, others see it as part of children's upbringing and socialisation, both of which have accompanying negative and positive impacts on rights of the child. The study recommends that in the context of high poverty, children's involvement in income-generating activities can be substantially reduced if parents are economically empowered.

*Key Words: Child labour, skills training, children's contributions, household, portage, Ghana*

## *Introduction*

The high incidence of poverty in Africa means that households explore multiple survival strategies. One strategy adopted by many households is heavy reliance on the productivity of their children. Thus, household poverty pushes children into the labour market to earn money to supplement family income or even as a sole means of survival. According to ILO estimates “there were some 211 million children aged from 5 to 14 at work in economic activity in the world in 2000. About 73 million of these working children are less than 10 years old” (ILO, 2002). The issue of child labour is sometimes debated on the basis of a cultural framework, whereby children’s activities are perceived either as a method of socialisation for children or an informal apprenticeship (Ballet et al, n. d.). Proponents of this view assert that rarely do households who engage their children in income-generating activities see it as exploitation. Thus, children’s activities are often regarded as skill training that will usher them into successful and productive adulthood. To such households, children’s livelihood activities are seen as a way of preparing children to take care of themselves and other family members when they grow up. In contributing to the argument that child work can be a form of skill training, the Department of Labour of the US Government noted: “The general perception in Asia is that children should work to develop a sense of responsibility and develop a career.... It is argued that child employment apparently teaches children of the poor to acquire moral and ethical attitudes and work habits at an early age” (US Department of Labour 1994: 24).

Even though social change, urbanisation, technology and even the growth of the service sector have changed a lot of the socialisation process of children whose parents/guardians work in the formal sector, there are still parents or guardians in the traditional/informal sector such as farming, trading, fishing, food vending etc (both in rural and urban areas) who expect their children to help them in the household’s work as part of the learning process the child goes through when growing up. In other words, while economic development and the spread of education may have put an end to full-time child employment in some sectors of some countries, it has not removed children from the world of work, or from labour markets. For instance, the majority of children in developed countries such as the UK, the Netherlands and the USA have some experience of regular involvement in part-time or seasonal labour markets before they reach the age of sixteen (White, 2009).

Internationally, there are two main views dominating the debate regarding children’s work. The abolitionist perspective claims child labour should be ended, while others argue that excluding children from work also excludes them from

assuming positions as productive agents in society (Schultz, 2009). Liebel (2004) takes a clear position that work provides important social recognition as well as economic support that is a critical part of children's development as subjects. Liebel argues that children's work should be recognized as an essential activity and at that point, it will be possible to end exploitative child labour. He suggests that work can be "a free expression of life for children" (p. 9). On the other hand, Marie-France (2000) argues that the socialising aspect of work is something of a smokescreen, concealing the reality of children's working conditions and their economic role. She contends that it makes one wonder what lies behind representations depicting child labour first in a negative light – as exploitation – and then in a more positive (or neutral) light – as a factor of socialisation and apprenticeship.

There are a number of factors that necessitate children's contribution to household survival, of which household non-labour income and farm assets (Orazem and Gunnarsson, 2003) are particularly relevant for this study. Most children who work are engaged in household enterprise activities, whether it is a farm, a home-based manufacturing operation, or a retail enterprise. These productive assets can have mixed impacts on the children involved. On the one hand, they may raise a child's opportunity cost of time in school because the child is productive in labour activities. On the other hand, adults in the household may also be more productive, so the household can better afford allocating child time to schooling activities, instead of working to support the family.

The most common form of child work in most developing countries remains unpaid work on a peasant farm or other family-based enterprises. According to Raynolds (1991 cited in White, 2009), where anthropologists have studied time budgets in farm households, they have sometimes found children contributing more than half of all household productive labour. Bourdillon (2006a) and Jacquemin (2004) also note that paid domestic work in urban areas has been one of the most common destinations of child migrants, and one of the last forms of child work to be regulated. White (2009) asserts that, like adults, child workers have historically been involved in a huge variety of work relations. These range from various forms of unfree labour (slavery, tributary, bonded, or indentured labour) to family-based petty commodity production and wage work. While these were no doubt exploitative, there is evidence that children themselves often opted for wage work in preference to unpaid work as helpers in patriarchal peasant farms or other family enterprises (Grier, 2006).

Nevertheless, the adverse consequences of child labour may differ according to whether they are oriented toward market or home production, as well as whether

they are inside or outside the home. Although children's decision-making is constrained by the structure of the household and its more powerful members, linking children's work to a household strategy allows us to consider children as actors who actively contribute to the welfare of the household (Bass, 2003). In addition, within the UN Convention of the Rights of the Child, children's contribution to household survival could be said to represent both an enhancement and infringement of their rights. Thus, children's work might provide incomes for their education and health needs, but at the same time might negatively affect school attendance and performance. It is against this background that this paper seeks to examine children's contribution to household survival in the context of child rights, child labour and skill training. Specifically, the study examines the children's activities that contribute income to the household, children's and parents' view on such contributions, as well as the effects of these activities on children's health and education. This study focuses mainly on children's activities that generate income, directly or indirectly, for their households (for domestic/non-income generating activities of children in the household, see our paper on work and happiness, in this volume).

### *Significance of the study*

The study is important for three reasons: first, it contributes to the on-going debate on children's work as a way of ensuring household survival, and the tensions between work as part of socialisation versus potential child exploitation. Secondly, the study highlights a paradox implicit in the UN Convention of the Rights of the Child. Finally, the study has policy implications for child labour regulation and poverty alleviation in Ghana, where many children from poor households contribute to the economic sustenance of their family.

### *Context and methods*

Children contribute to both social stability and social change through a process of interpretive reproduction. They are inventive and resourceful social participants in the preservation (reproduction), interpretation, and formation of their social world as they actively interpret the social world by constructing the meaning of social messages (Corsaro, 1997). This view of the child's active interpretation of the social world, termed interpretive reproduction, conceptualises children as research participants and social individuals (Baker-Sperry, 2007). However, as several commentators have pointed out, this is not as straightforward as it may seem, and many attempts to elicit and integrate 'children's voices' and children's knowledge have been criticised for being tokenistic (James, 2007). There are contrasting perspectives on children and childhood that underpin current research and understandings of the nature and

value of children's knowledge (Porter et al, 2010a; 2010c; Robson et al, 2009; Hampshire et al, 2012 forthcoming). One strand, which is relatively new and relevant to this study, extends the recognition of children's subjectivities to see children as social actors in their own right, rather than merely dependent on other social institutions (the family, school, etc.): 'Children are seen to act, take part in, change and become changed by the social and cultural world they live in' (Christensen and Prout, 2002: 481). According to Anderson (2000: 151) 'children are the primary source of knowledge about their views and experiences'.

Strategies of narrative inquiry were employed for the study. Narrative enquiry focuses on individuals' personal experiences, and the ways in which those experienced are re-told as 'stories' to the individuals themselves and others (Clandinin and Connelly, 2000 cited in Obeng, 2002). Children's stories helped to reveal their experiences from their own point of view (Polkinghorne, 1988). These experiences, although personal, help us to understand respondents' social world.

This paper draws on data collected in Ghana as part of a large multi-country research project: *Children, Transport and Mobility in Sub-Saharan Africa* ([www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility)), designed and led by Durham University (UK), in collaboration with the University of Cape Coast (Ghana), the University of Malawi and CSIR (South Africa). Details of the project study design, methodology and analysis (where this relates to Ghana) can be found in Porter et al (this volume); (see also Porter et al 2010a, 2010b, 2010c, 2010d, 2011 in press; Robson et al, 2009). Briefly, the Child Mobility project was conducted in 24 field-sites across three countries in Africa: Ghana, Malawi and South Africa. In each field-site, qualitative and quantitative research methods were used to gather data on children's mobility in relation to education, health, livelihoods, transport and migration. In this paper, we draw on the material collected in the Ghana field-sites.

In Ghana, data were gathered from children, parents, teachers and key informants in eight communities from two ecological zones in Ghana (Forest and Coastal Zones). In each zone, four study sites were purposively selected for the study: one urban, one peri-urban, one rural with basic services and one remote rural. In each site, a wide range of issues on children's transport and mobility relating to their education, health and activities were explored using qualitative research methods, including individual interviews, focus groups and accompanied walks (Porter et al, 2010a) with children (aged 8-18 years), parents, teachers and community leaders. In all, 323 interviews and 31 Focus Group Discussions (FGDs) were conducted. Data were recorded and analysed based on

their broad thematic areas. Following analysis of the qualitative data, a questionnaire survey was conducted with 1005 children and young people aged 8-18 years<sup>1</sup>. Another component of the project involved training children to conduct research on mobility issues among their peers. In this paper, however, we draw primarily on the qualitative material collected by adult researchers.

### *Results*

Three prominent themes emerged in relation to children's income-generating work, which are considered in turn here: (1) children's contributions to household survival, (2) children's and parents' view on such contributions, and (3) the effects of these activities on children's health and education. This enables us to analyse children's activities within the social and economic context of child socialisation, training and household survival strategies.

#### *Children's contribution to household survival*

Children's work can provide income for the household, and varying levels of training for the child worker (Bass, 2003). Many children in Ghana involve themselves in income-generating activities, often under the instruction and supervision of their parents or guardian. Children's contributions to household survival in Ghana can be seen in the following cases, reported by the children themselves:

I sell charcoal, eggs and sugarcane to help my mother. I sell the charcoal and sugar cane in Cape Coast but sell the eggs only in village  
[16 year old girl, rural].

I sell charcoal by hawking in Cape Coast. I started selling at the age of about 10 or 11 years. It is a difficult task. I hawk in the sun for a long time. My mother asked me to sell. The charcoal I carry to sell is heavy  
[14 year old girl, urban].

Head portage represents a very common way of carrying items in Ghana (as opposed to some part of Asia where loads are mostly carried on the shoulder or the back). Head portage is common among people coming from farm or going to the market. As well as those who carry loads for their parents, there are a

<sup>1</sup> We use the terms 'children' and 'young people' interchangeably to refer to study participants, who were aged 8-18 years.

number of children who have resorted to load carrying as a means of earning income to support themselves or their households (Porter, Blaufuss and Acheampong 2007; Porter, et al. 2011, in press; Porter et al., forthcoming).

I sell kenkey (a local food made from maize) after school. I carry the Kenkey on my head and move from one place to the other. I do this every day after classes from mostly from 2pm to 5pm. I started selling the Kenkey more than two years ago and make an average sales of GH¢1.50 (about US\$ 1) daily. I give the money to my mother to expand the business. Part of the proceeds is also used to buy clothes for me and my siblings.

[15 year old boy, urban]

Other children operate their own 'businesses' and therefore provide direct financial support to the household on a regular basis. In such instances, the children may be out of school as in the case of a 17 year-old truck pusher from the Coastal zone of Ghana.

The only work I do regularly is pushing my truck. Yes I am paid for every truckload of goods I carry. I buy clothes for myself and all other things I need, keep some as my pocket money and give my mother some to help take care of us. I can't measure it but I bring my mother food-stuff and money.

[17 year old boy, urban]

### *Children's views on their contributions to the household survival*

How do children view their activities that contribute to family survival? It was found that some of the children were happy to know that they are contributing their quota to the household through selling, carrying food items to the market and weeding for money. Others also see their contribution as the only way to help the parents or guardians to take care of them (children) as well as other members of the household. The following excerpts from the interview and FGD with the children are illustrative.

I am self sponsoring my education. Sometimes when I get a contract to weed, I estimate the size of the land and charge accordingly. I use the money to buy books, shoes and clothes for school and other clothes for wearing at home. I sometimes use the money to buy food. My grandmother does not have money so sometimes I use the money I get to buy food in school.

[16 year old boy, peri-urban]



My mother sells rice so when I come back from school I usually take some to sell for her. Sometimes when sales are good my mother buys thing for me; sometimes I get shoes or a ball or minerals (soft drinks) when I come back from selling.

[17 year old boy, urban]

I used the money that I earned from carrying loads to cater for my needs. I sometimes give some to my younger sister.

[17 year old boy in an FGD, peri-urban]

Some of the children see their ‘commercial’ activities as part of their upbringing and socialisation. They regard participation in household survivorship as a right and duty, rather than exploitation, as indicated by this 15-year boy:

I assist my grandmother in the selling of bush meat. I have to support her; after all that is where I think we get our daily bread aside the subsistence farming. I have also learnt the skills of bargaining in buying and selling. So if my grandmother is not there, I can take over the business.

[15 year old boy, rural]

In an interview with a 24 year old teacher, this is what he said about the views of some children on their contribution to their households:

Some of the children say they must reciprocate the kind gesture of their parents by selling to make money to support them. To them their parents buy them school uniforms, books and feed them and they in turn can show appreciation by making small sales to help them run the family. Others say they trade to support themselves in school and also to acquire extra things their parents cannot afford to give them.

[24-year old teacher, peri-urban]

#### *Parents’ views on children’s contribution to family survival*

While children’s contribution in the family is often seen as part of the household’ “survival strategy”, access to unpaid labour of women and children can also be a first step towards expansion and accumulation in small-scale enterprises, known as “endo-familial accumulation”, which if successful may be followed by the hiring in of labour and the partial withdrawal of family members (White, 2009). The study found that parents acknowledge the contribution of their children towards household survival in Ghana. This is what

a 48-year old man had to say about his 14-year old son who has completed Junior High School:

My son contributes so much to the welfare of my life and the household. If I am to pay it would be in millions and I would not even get the money to pay. He virtually does everything for me. He is like a wife, a child, a business partner, everything.

[48-year-old man, rural]

A similar story came up in the coastal urban settlement as indicated by a 40-year old shop keeper.

Children's work actually helps the parent to make a little more time and money to take care of the family. When they come back from school the youngest goes to sell for their mother and the elder comes to help me in the shop. On weekends they go to the farm to work and when they come back the younger boy helps their mother to sell and the older helps me in the shop.

[40-year-old man, urban]

Parents are also generally of the view that although children's contribution is important for the survival of the household, the children also benefit from such activities as it constitutes part of their overall training and upbringing. The following excerpts are illustrative:

Yes it does benefit them when they do small carrying like my children. They help the family and they start getting an idea about trading. But if they do heavy loads, yes the children get money to help in their up keep but their health suffers.

[40-year-old man, urban]

Children carry cassava, fuel wood, water and charcoal. It forms part of their normal schedules. They have to assist their parents in the farm and in other activities to enable the parents take proper care of the children.

[35-year-old man, peri-urban]

### *Effects of children's activities on their health*

Many children recognise that some of their activities, especially carrying heavy loads can have negative effects on their health; they nonetheless continue to carry loads because of the income they get from such activities.

I have suffered neck pains, headaches and cough from head portorage. There are times I force myself to carry some loads beyond my strength and these are the days I suffer the pains.

[16 year girl, remote-rural]

I carry firewood, cassava and plantain. I often carry firewood. But the heaviest of all is the cassava. The distance to farm is about 2.5km. Usually, I feel pains in my neck and feet. My uncle gives me rob at times to massage the neck and feet if I feel pains.

[14-year old girl, remote rural]

Parents recognise the effects of head portorage on children's health as the following excerpts illustrate:

I think children naturally should carry loads that are not above their strength but sometimes we the parents are compelled to give them loads due to our circumstances. For example, if we go to farm of about 2km and have to carry some foodstuffs to the house for domestic consumption and sell the excess, we will have no option than to share the load with the children. After all, we use the proceeds on their welfare. However, I am of the view that some parents overload their children with loads to the extent that the child falls ill in no time.

[50-year old man, remote rural]

My son carries a lot of foodstuffs....; some for sale and others for household consumption..... By the time we get home every one of us would be tired. Everyone complains of all kind of pains; knee, waist, back and neck. We do not have the money to go to hospital. In this case, we use drugs bought from hawkers. The pains then subside temporarily only to resurface at another time. Thus for some of us it is chronic.

[50-year old man, remote rural]

However, other parents played down and ignored such concerns, and even considered children who complain of work-related illness or pain as lazy. An excerpt from an interview with a 32 year old woman is illustrative of this phenomenon:

Sandra (13 year old daughter) often carries things on her head. During market days, we go to the farm and bring some cassava for

sale. She carries about half of standard load (25-30kg) for a distance of some 3km. It is the norm that she complains of pains either in the neck, back or the body attributable to the load carried. I just ignore it and do not give her any medication [32 year old woman, remote rural].

Several children reported experiencing pains from head-loading that are so bad they resort to medication (tablets, capsules or ointments). Sometimes these are administered by parents; other child self-medicate:

I often carry things such as plantain, cocoa, and palm nuts from the farm to the house. Since they are for sale, the volumes are big and often times, I have to go on several trips (usually 3 times). For a trip I carry things around 30kg. Most times the weight of the load gives me bodily pains, headaches and pains in the neck. When I tell my mother, she buys me painkiller and I take them and it stops. [14 year old girl, remote-rural]

I carry cassava, maize, firewood charcoal and oil palm fruits from farm to the house. I carry great quantities of those for longer distances often about 2km. As a result, I sometime wake up with pains my neck or my back. I complain to my grandma, and she buys a local analgesic (*Nyenko Oye*), smears the affected part and sometimes uses a black thread to tie my neck loosely. After some days the pains subsided. [16 year old boy, rural]

#### *Effect of children's contribution on school attendance*

One major potential problem of children working is that it might conflict with schooling. As noted above, for some children in the developing world, working might be seen as an alternative form of livelihood training to formal schooling. Some of the activities performed by school-going children (especially before going to school) appeared to affect the school attendance and subsequently academic performance of such children. As one teacher commented when she was asked whether or not children's activities affect school performance:

Yes, it impacts a lot on their studies. They do not make time to do their homework or study on their own. When in school, they find it difficult concentrating because they keep thinking about when they would have to go home and sell to make money. After classes, some complain when they are asked to stay on in school for one

reason or the other because if they do not sell, they will have nothing to eat at home. I have a girl in my class who sells cereals. She therefore rushes to the market straight from school in her school uniform and changes over to her house attire at the market. She goes home late when the day's work is over.

[29 year old teacher, peri-urban]

Similar observations were also made by other children. For example, in a focus group discussion, one boy commented:

The children who sell always think about the strategies to be adopted in the selling, how to maximise returns and what have you. They therefore lose concentration in class even when a teacher is in the class teaching. They will just be thinking about what to sell after school and this, to me, affects learning.

[14 -year old boy in an FGD, peri-urban]

Again, when an 18-year old dropout (urban) was asked to comment on the punctuality of his younger sister in school, he said:

She is sometimes late for school, especially when she is on the afternoon shift. This is because, my grandmother is a farmer and sometimes, brings some foodstuffs from the farm home so that my younger sister can sell and make some money for the family. She goes to hawk around in the morning before going to school in the afternoon. She usually ends up late for school.

[18-year old dropout, urban]

### *Discussion*

Children remain involved in many different forms of work, and work relations can vary from complete subordination (whether in family, bonded or wage relations) to relative autonomy (Liebel, 2004). Oftentimes, children become workers who contribute labour to aid the household, especially in poorer households. Thus, children's work often represents a family strategy for economic survival. The concept of a household adaptive strategy is useful in this case because children's households can be viewed as actively securing what they need to survive (Bass, 2003). Children who engage in income-generating activities for their own upkeep contribute indirectly to household survival by reducing the stress on household financial resources. This is because the items bought by the children themselves would otherwise need to be provided by their parents or guardians. In such instances, parents or guardians can instead use their

financial resources on other pressing household needs. The study revealed that many children see their 'commercial' activities as part of their upbringing and right to participate in the household survival rather than exploitation.

The income-generating activities performed by children were found to have potentially negative effects on their formal education and health. Children's activities often interfere with school attendance, as some children have to miss school in order to work for money to take care of themselves and other members of their household. Though children's activities, such as selling in the market after school, do not necessarily adversely affect school attendance per se, it can make children get so tired that they find it difficult to study in the evenings or do their homework. This phenomenon has the potential of affecting their academic performance negatively, which can eventually lead to children dropping out of school (Porter et al. in press). Poor academic performance has been found to constitute one of the major factors leading to school dropout (Boateng, 2003). This link is based on the fact that poor academic performance leads to decreased interest in school activities and eventually dropout.

Similarly, head portering as a commercial activity has the potential to affect children's health; many complain of headaches and neck, back and waist pains after carrying heavy loads. Many resorted to self-medicating with pain-killers and for some, work-related pains / illnesses constitute serious threats to well-being (points further discussed in Porter, Blaufuss and Acheampong 2007; Porter et al. in press; Porter et al. forthcoming). Indeed, the WHO (1987) indicates that child labour can lead to increased muscular and skeletal disorders.

However, it is argued in this paper that income generated from these activities can also facilitate education and health-seeking opportunities for children. As many children said, without the income earned from this work, many could not afford to continue going to school (Porter et al. 2011 in press), and several children also reported using money they had earned to purchase healthcare (Hampshire et al, 2011, forthcoming).

Therefore, within the framework of the United Nations Convention on the Rights of the Child, this study posits that children's involvement in income-generating activities to support themselves and their households does not present a black and white picture. Some children's work activities appear to infringe upon certain rights while, at the same time, these same activities have the potential to enhance rights. For example, it could be argued that parents' involvement of their children in their economic activities as a way of training them to become responsible adults enhances their right to appropriate education, as stated in the Article 29(1a): *education of the child shall be directed to*

*development of the child's personality, talents and physical and mental abilities to their fullest potential.* Involving children in parents' economic activities could help to develop talents of children, which are likely to be important for their future livelihoods (see also Esia-Donkoh and Mariwah, this volume). Similarly, such activities can help to ensure the survival of the child's household, which will further enhance the child's wellbeing (including the rights to life and health; Article 24). If children were not to work, survival of their entire family could be at stake. In other words, child labour can be beneficial to the child, not only in terms of the preparation for the tasks of adulthood, but also in terms of direct improvement of education and health conditions. Since children's work adds to the household income, it might also add to the nutritional intake of the young worker, and the morbidity levels of the working child may even be lower than the levels prevailing among comparable counterparts (Lieten, 2001).

However, activities like head portorage that can affect child's health; other activities, which hamper children's school attendance and subsequently their academic performance, infringe on their rights to education. Even here, though, the picture is not straightforward: incomes generated from head portorage can be used to offset educational and health expenditure of the working child and other household members.

### *Conclusions and policy implications*

In the context of substantial poverty and inequality, children's labour will sometimes have to be relied upon to supplement household resources to ensure the survival of its members. Children's involvement in income-generating activities can contribute to the survival of their households while preparing them for a responsible and successful adulthood, and can also help fund their education and healthcare. At the same time, some of these activities might be dangerous to the health and education of the child. Therefore, strategies that seek to limit children's activities in the households should consider that households need income that would replace that from the children in order to survive, and that to do this, parents or guardians should be economically empowered. Thus, policies concerning child labour and children's involvement in commercial activities must go hand-in-hand with wider poverty-reduction measures.

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## Child fostering and education in Ghana

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### Abstract

*Introduction* The literature on fostering of children and their welfare, especially on education, presents ambivalent outcomes. While some children in foster care may have access to better education than what would have been possible in their biological residences, others are prevented from attending school regularly or do not attend school at all due to labour demands in their foster households.

Drawing on data collected by researchers as part of a larger study of child mobility in Ghana, Malawi and South Africa, we explore the extent of child fostering in two agro-ecological zones in Ghana and how it relates to education.

*Methods* Data in the child mobility study were collected in-depth interviews and focus group discussions, followed by a questionnaire survey. This generated data for children (between 8 and 18) – both in-school and out-of-school.

*Findings* Our findings lean heavily towards the school of thought that maintains that child fostering is detrimental to the educational outcomes of fostered children. Even where children were fostered by relatives, the negative impact on education was evident. Fostered children were less likely to be enrolled in school, less likely to be attending regularly, and more likely to be ‘behind’ in their schooling, than those living with their biological parents. Serial fostering of children emerged as another dimension of fostering that needs further investigation in terms of its impacts on schooling.

*Conclusion* We conclude that fostering impacts negatively on foster children’s educational experiences and outcomes.

*Keywords:* Child fostering, educational outcomes, Ghana, serial fostering, current grade, current age

## *Introduction*

There is a growing literature on the phenomenon of child fostering in general and, in particular, its impacts on the welfare of children. However, empirical reports on the effects of fostering on child welfare present mixed outcomes dependent on the social context of fostering, the motives for fostering, the existence of living mothers or fathers and the relationships between biological and foster parents (Serra, 2009: 158). Serra (2009) argues, based on earlier works by Akresh (2004) and Bennell (2005), that where fostering is sought by both sending and receiving households within acceptable cultural contexts, foster children do not appear to be disadvantaged with regard to schooling and therefore cautions against outright condemnation of non-parent residence as detrimental to children's welfare. This argument supports an earlier assertion by Goody (1982) that the purpose of pursuing fostering was to provide opportunities for the fostered child in terms of widened knowledge, experience and training.

In spite of the foregoing arguments, household labour deficits have been identified as a major force behind the decision by a household to accept foster children in West Africa. Ainsworth (1996) noted in Côte d'Ivoire that the motivating factor for fostering-in children aged 7-14 was solely driven by the need for children's labour services. This underpins Akresh's (2009) argument that parents reap the benefits of fostering whilst the fostered children often shoulder the costs. The sending parents benefit not only by receiving material payments; but they also save income that would have been used for the upkeep of the fostered child. Similarly, receiving parents benefit through the services provided by the fostered children, usually at a lower cost than alternatives.

The possible negative impacts of fostering on the welfare of children notwithstanding, Serra (2009: 166), when rationalising the pervasiveness of fostering in Africa, argues that the phenomenon "is an efficient way of raising and training children and preparing them for adult life under very specific conditions typical of African societies". Bledsoe (1990) made a similar observation within the Mende ethnic group of Sierra Leone: children can develop best by leaving the comfortable yet confining home in which they were born and striking out into the wider world. Kuyini et al. (2009: 440) put it more forcefully, asserting that the principal aim of fostering is to "provide the best and/or appropriate alternative care for children whose biological parents, for some reason, are unable to undertake the caring role". As Madhavan (2001) argues, kinship, family and networks need to be examined in order to understand the effects of fostering on children.

Child fostering in Sub-Saharan Africa has been attributed to a number of reasons. In Ghana, Kuyini et al. (2009) reported that strengthening and maintaining family ties were the key reasons for fostering children but were quick to point out the intimidation and physical and emotional abuse that characterised the phenomenon. Vandermeersch (2002) and Serra (2009) considered fostering as a demographic regulator of family size. Bledsoe's (1990) report from Sierra Leone regarded fostering as central to child-rearing and socialising of children. In Burkina Faso, Akresh (2009) and Hampshire (2006) observed the role of fostering in regulating household size as a temporary coping strategy against external shocks while Ansell and Van Blerk (2004) noted in Malawi that fostering could help meet household labour deficits. These reasons reinforce the argument by Serra (2009) above that where there is an agreement between out-fostering and in-fostering households within acceptable cultural contexts, the impacts of fostering could be minimal.

The effects of fostering on children's educational outcomes present similarly ambivalent reports (Pilon, 2003). On the one hand, children may have access to education as a result of being fostered whereas on the other hand, household demands sometimes prevent children in foster households from enrolling in school. However, foster children's schooling, according to Charmes (1993) is often more vulnerable and unpredictable than that of non-fostered children (Cited in Pilon, 2003). Charmes notes that foster children, especially girls, were more vulnerable to disenrolment from school than non-foster children. Similarly, Kuyini et al. (2009) found in Ghana that a quarter of the fostered children they interviewed indicated that they did not think that they were given the same treatment as non-fostered children. But Zimmerman (2003) noted in South Africa that fostered children were just as likely to attend school as non-fostered children, because of purposive fostering of children to households that were better able to enrol them in school. Fostering could therefore affect children's welfare in general and their education in particular either way – positively or negatively. With parental background being a key determinant of children's educational outcomes (Smyth et al., 2009; Nonoyama-Tarumi, 2008), this paper contributes to the debate by exploring the relationship between child fostering and education in Ghana using data from two agro-ecological zones – coastal and forest.

### *Child fostering defined*

Child fostering, a pervasive phenomenon in Sub-Saharan Africa (Isiugo-Abanihe, 1984; Akresh, 2005), has been variously defined by different authors. The phenomenon, which is widespread in Ghana, is generally considered as the relegation of parental responsibilities to non-biological carers (Vandermeersch,

2002). Isiugo-Abanihe (1983) defines child fostering similarly as sending children out to be raised by non-biological parents. Pilon (2003), while admitting the two definitions above, goes further to give a precise age range – from birth to nineteen. However, there are situations where fostered children are orphans and therefore the issue of relegating one's parental responsibility does not pertain. Drawing on these definitions, we define a foster child as one who is not above 19 years and not staying with his/her biological parents whether such parents are alive or dead.

Two categories of fostering have been identified in the literature – kinship and non-kinship (Kuyini et al., 2009). According to Scannapieco, Hegar, and McAlpine (1997) kinship foster care involves sending children to blood relations to be catered for, while the foster parents in non-kinship foster care are not blood relations. In the case of Ghana in particular, kinship foster care might not necessarily be regarded as the relegation of parental responsibilities as noted by Vandermeersch (2002) because kinship foster care is culturally accepted within the extended family system. However, we are quick to note that fostering (whether to kinship foster household or non-kinship foster household as noted by Kuyini et al. (2009)) could mean relegating parental responsibilities. Often, arguments which tend to defend fostering as a way of securing better future opportunities for foster children contend that the in-foster households are usually better in terms of their potential to provide better future opportunities for foster children than the out-fostering households (see Serra, 2009; Pilon, 2003; Bledsoe, 1990). Thus, the better opportunities in the in-fostering household serve as a motivating factor. Although not a major focus for this paper, it is important to note that a particular fostering arrangement – whether kinship or non-kinship – could have different outcomes on the welfare of fostered children based on Kuyini's et al. (2009) argument that fostering, especially kinship fostering, is intended to keep family ties alive.

#### *Data and methods*

This paper draws on data collected in Ghana as part of a large multi-country research project: *Children, Transport and Mobility in Sub-Saharan Africa* ([www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility)), designed and led by Durham University (UK), in collaboration with the University of Cape Coast (Ghana), the University of Malawi and CSIR (South Africa). Details of the project study design, methodology and analysis (where this relates to Ghana) can be found in Porter et al. (this volume); see also Porter et al. (2010a, 2010b, 2010c, 2010d, 2011a in press); Robson et al. (2009). Briefly, the Child Mobility project was conducted in 24 field-sites across three countries: Ghana, Malawi and South Africa. In each field-site, qualitative and quantitative research methods were used to gather data

on children's mobility in relation to education, health, livelihoods, transport and migration. In this paper, we draw on the material on mobility and education collected in the Ghana field-sites.

There were eight field-sites in Ghana: four sites (one urban, one peri-urban, one rural with basic services and one remote rural, classifications based on those of the Ghana Statistical Service, 2000) in each of two agro-ecological zones: coastal savannah (Central Region, around Cape Coast) and forest (Brong Ahafo Region, around Sunyani). A variety of methods were used to solicit data from the respondents by two categories of field assistants – adult researchers and child researchers (Porter et al, 2010a, c; Robson et al, 2009; Hampshire et al, forthcoming 2012). This paper draws on the data collected by adult researchers. Quantitative data involved a survey of 1005 child respondents aged between 8-18 (around 125 children per settlement). This number included both in-school and out-of-school children living with either foster parents or biological parents. Households were sampled randomly along transects in each study settlement; one child per household was then selected for interview at random by drawing lots.

Qualitative data collection involved focus groups and in-depth individual interviews with both in-school and out-of-school children (fostered and biological children), as well as with parents, teachers and community leaders. Both foster parents and non-foster parents were interviewed. Participants of the focus groups were selected with the help of the Assemblyman/woman<sup>1</sup> for each study site. In selecting respondents for the in-depth interviews, spatial distribution of the respondents was taken into consideration. The fieldwork started in January, 2007. This was preceded by a pilot study from the 10<sup>th</sup> -19<sup>th</sup> January, 2007. The pilot study was conducted in communities with similar social characteristics to the selected study centres. The fieldwork lasted till October, 2008.

### *School enrolment and parenting background of child respondents*

School enrolment, especially at the primary level, has been phenomenally high in Ghana, reaching a gross ratio<sup>2</sup> of 98% for males and 97% for females. (UNICEF, 2007). A more refined measure, the net ratio<sup>3</sup>, puts this at 75% for both males and females. The substantial differences between the gross and net

<sup>1</sup> An Assemblyman/woman is an elected member to the District Assembly, the lowest political administration structure in Ghana.

<sup>2</sup> Enrolment ratio regardless of age and grade

<sup>3</sup> Enrolment ratio of children in grades which their ages qualified them to be.



measures (23% for males and 22% females) in Ghana by 2007 show clearly that many children are lagging behind the appropriate class for their age group. In Ghana, the recent increase in school enrolment has been attributed to the pro-poor policies introduced within the last decade, especially the Capitation Grant<sup>4</sup> and School Feeding Programme<sup>5</sup>. A teacher from coastal Ghana summarised the reason for high enrolment rate as follows:

Because the capitation grant caters for school fees, about 90% of children tend to come to school regularly. Apart from the capitation grant, there is also the realisation by majority of parents/guardians that sending their children/wards to school can be rewarding in the future. Some also send their children to school to avoid public ridicule.

[A basic school teacher, Female, Coastal Ghana]

However, one should not lose sight of the fact that pro-poor policies alone are not enough to enrol and maintain all children in school. For example, viewed within the earlier context provided by Ainsworth (1996) that household labour deficits were responsible for fostering; pro-poor policies would not make any substantial impact on the educational outcomes of fostered children if household duties were given priority (Esia-Donkoh and Mariwah, this volume).

**Table 1: Living arrangements of children interviewed (Children aged 8-18y)**

| Response                                  | Frequency   | %            |
|---|-------------|--------------|
| Staying with no one                       | 3           | 0.3          |
| With both biological parents              | 542         | 53.9         |
| With biological mother only               | 201         | 20.0         |
| With biological father only               | 55          | 5.5          |
| Fostered (with neither biological parent) | 200         | 19.9         |
| Missing                                   | 4           | 0.4          |
| <b>N</b>                                  | <b>1005</b> | <b>100.0</b> |

Our quantitative data show that about a fifth of children surveyed were fostered (i.e. living with neither biological parent, according to our definition above): Table 1. A quarter were staying with one biological parent and only just over half were living with both biological parents. This relatively high proportion of children living without their biological parents reflects the wide cultural

<sup>4</sup> This grant covers school fees at the basic level of education in Ghana, although parents still incur other expenses in sending their children to school.

<sup>5</sup> Under this programme, school children at the basic level are provided with one nutritious meal per day but the programme does not cover the entire country as at the time of this study.

acceptability of fostering as a child-rearing strategy in Ghana (see Kuyini et al, 2009).

*Perceptions of formal education and school enrolment*

In order to understand and appreciate why foster/biological parents would want to cater for the educational needs of the children under their care or not, it is important to put into perspective their own perceptions about formal education. If they perceive education as a necessary condition for successful outcomes in adulthood then denying foster children such opportunity may be regarded as tantamount to active discrimination. But if foster parents do not perceive education as a necessary tool for the fortunes of individuals during adulthood it would be difficult to attribute the disadvantaged position of foster children as a deliberate attempt by the foster parents not to cater for their educational needs.

The qualitative data show that formal education is widely perceived as the gateway to future success in Ghana (Porter et al. 2011 in press). Respondents indicate that going to school serves as a means to acquiring the necessary ingredients for a successful adulthood. Indeed, this was reported by both foster and biological parents as one of the reasons for the high enrolment rate these days. The following views are illustrative of the majority of interviewees' perspectives:

These days, it is important to send children to school. The world has changed. Because I never went to school, I am unable to get any well-paid job to do. I don't want my children to face the same problem in the future. My children must go to school in order to brighten their future chances of getting good job.  
[Biological Parent, Female, Rural, Coastal zone]

Now, you cannot do without education. Even if you want to sell in the market you need a certain level of education. For example, now they expect that you have at least Junior Secondary School certificate before you are given driving licence so you can't do away with education. Also, education brightens your chances in the future.

[Foster parent, Male, Rural, Coastal zone]

The above statements from both a foster and a biological parent indicate that formal education is seen as being indispensable nowadays. Even parents who had no formal education themselves saw the need to educate their children as demonstrated in the first statement. These two

statements, therefore, set the context within which foster children's access to education was analysed.

Most children also reported the importance of formal education:

We need to attend school to ensure a brighter future for ourselves. You can get a better job and be able to cater for your parents. I like to walk the long distance to come to school everyday because I will not like to be in the house and go to the farm. I like learning in school.

Male, 14, In-school, Remote rural, Coastal zone]

However, there were a few exceptions. A few children interviewed said that they did not value school-based education. Such children would often drop out of school, regardless of their parents' or guardians' wishes. This 18-year-old young woman, for example, stopped schooling despite her parents' apparent support for her education:

I used to attend school. I completed P5 and was about to go to P6 when I stopped. I just decided to stop schooling without any reason. My parents were taking care of me but I just decided to stop. I have no regret for not attending school because I made up my mind that even if I finished school, I would learn sewing and I am now learning it so I don't have any regret. Distance to school those days was not a problem. The school is within five minutes walk from my house. So, nothing was responsible for me not attending school. Even during those days I was above average in terms of performance in school.

[Female, 15, Apprentice, Urban, Forest zone]

Children's own desire to attend school is thus a crucial factor influencing schooling outcomes. The above quote indicated that the fostering status would not make any significant impact on the child's education. In other cases, it may be parental pressure that precipitates a child dropping out of school early, or even failing to enrol in the first place, as this young man describes how he fought against being prevented from enrolling in school:

It was because of my father; he did not want me to go to school, he wanted me to be at home but I wanted to go to school so whenever he came home from work I was always bothering him and crying that I wanted to go to school but he was still adamant. I persisted and it came to a time that my mother also intervened;

he still did not want to send me to school. It took more persuasion from my mother and me before he finally gave in and sent me to school. He claimed that we were not serious children and he did not believe that we would achieve anything in the future because my elder brothers went to private primary and junior secondary school and then to senior secondary school but they did not pass their exams.

[Male, 15, Completed JHS, Rural, Coastal zone]

In summary, schooling is affected by the attitudes of both the children themselves and of their parents or carers. Children's desire to go to school may be a necessary condition for school enrolment and regular attendance, but it is not a sufficient condition. The attitudes and actions of parents can be key, as we elaborate below.

#### *School enrolment, attendance and fostering*

Our quantitative data confirm the high enrolment figures reported for Ghana, with 87% of the 8-18-year-olds surveyed currently enrolled in school (Table 2). A similar proportion reported that they were attending school (either regularly or not), while 13% had either dropped out of school or had never attended.

**Table 2: School enrolment and attendance (Children aged 8-18y)**

| <b>Enrolment status</b>                                | <b>Frequency</b> | <b>%</b>     |
|--|------------------|--------------|
| Enrolled   | 875              | 87.2         |
| Not enrolled   | 129              | 12.8         |
| <b>N</b>   | <b>1004</b>      | <b>100.0</b> |
| <b>Attendance</b>                                      |                  |              |
| Attending school everyday                              | 780              | 78.4         |
| Attending school some days                             | 86               | 8.6          |
| Not currently attending school but has attended before | 99               | 9.9          |
| Has never attended school before                       | 31               | 3.1          |
| <b>N</b>   | <b>996</b>       | <b>100.0</b> |

Both the qualitative and the quantitative data reveal that fostering affects children's schooling status. The survey data show a strong relationship between parenting status and schooling status (Table 3). As anticipated, children staying with both biological parents were more likely to attend school every day (82.7%) than those children staying with one biological parent (74.4% for mother only and 81.5% for father only) and those living with neither biological parent (69.3%) [ $p(\chi^2) = 38.579$ ;  $p < 0.000$ ].

By contrast, fostered children were significantly more likely never to have been to school, or to have dropped out of school, than those living with at least one biological parent.

**Table 3: School attendance by parenting status (N=996 children aged 8-18y)**

| Parenting status<br>Staying with: | Attendance (%)     |                     |  |                           | Total |
|-----------------------------------|--------------------|---------------------|--|---------------------------|-------|
|                                   | Attending everyday | Attending some days | Not currently attending, but has attended before | Has never attended before |       |
| Both biological parents           | 82.7               | 7.5                 | 7.3  | 2.5                       | 100.0 |
| Biological mother only            | 74.4               | 13.6                | 11.0   | 1.0                       | 100.0 |
| Biological father only            | 81.5               | 7.4                 | 11.1   | 0.0                       | 100.0 |
| Fostered                          | 69.3               | 7.6                 | 16.1   | 7.0                       | 100.0 |

Chi<sup>2</sup> = 38.579; p < 0.000

A similar trend was found between fostering and school enrolment. But here the difference was more pronounced. Nearly a quarter of children living with foster parents were not enrolled in school, compared with around 10% of those living with biological parents [ $p(\chi^2) = 24.293$ ; p < 0.000]. (Table 4). These highly significant relationships between fostering on one hand and school enrolment and attendance on the other reveals how strongly fostering impacts on both schooling processes.

**Table 4: School enrolment by parenting status (N=1004 children aged 8-18y)**

| Parenting status<br>Staying with: | Enrolment (%) |              |       |
|-----------------------------------|---------------|--------------|-------|
|                                   | Enrolled      | Not enrolled | Total |
| Both biological parents           | 90.6          | 9.4          | 100.0 |
| Biological mother only            | 87.6          | 12.4         | 100.0 |
| Biological father only            | 89.1          | 10.9         | 100.0 |
| Fostered                          | 77.0          | 23.0         | 100.0 |

Chi<sup>2</sup> = 24.293; p < 0.000

The qualitative data give further insights into how fostering can affect children's schooling. Fostering was frequently mentioned as a reason for not enrolling in school or dropping out of school. The following interview extract exemplifies this situation.

...Just after the kindergarten, I moved to start the P1 at [A] in the Upper East Region. I could not remember that journey. Initially it was just a visit to see my grandparents. Anytime I wanted to return to [B] where my father lived, my grandmother kept procrastinating it. Any time she left for market she asked me to take care of the millet. At a time, I realised that she would not allow me to come to my parents so I started P1 at [A]<sup>6</sup>. But I realised she was not interested in my schooling because she kept on preventing me from going to school. At a certain time I realised that my grandmother was not going to allow me to attend school so I sent a message to my parents at [B] about the problem I was facing. When my parents received the message, they sent me some money to come down to [B]. One day I left [A] (about 700 km from [B]) without informing my grandmother. I only informed her after I reached my parents. She was annoyed but since my parents were aware she had nothing to say. When I returned to [B] my parents hired a room for me and my siblings for us to attend school at [C], (about 20 kilometres from [B]) the nearby big town to [B] where I started from P4.

[Male, 15, In-school, Rural, Forest zone]

*Fostering, age of children and current grade*

In Sub-Saharan Africa, one major issue that is hidden behind the high gross enrolment ratios that have been witnessed in recent years is the mismatch between age and current grade at school. Whereas school enrolment of children and/or adults with ages above the expected age for a particular grade should not necessarily be considered as a problem in itself, it comes with developmental challenges especially where this segment of the schooling population is substantially large. 'Over-age' school-goers may contribute to the pressure on the educational infrastructure of such countries; they also impact on the age dependency ratio where people who should be in the productive sector are still in school. Being 'behind' in school can also have serious impacts on pupils' motivation, and can itself precipitate drop-out. Our qualitative data reveal that this is an issue worth looking at in Ghana in the following quote:

... I started my education in one of the villages near Bogoso at the age of eleven. Due to my age they sent me straight to class one (1), they did not let me go to the kindergarten though the school that I was enrolled in had one.

[Fostered, Male, 16, Rural, In-school, Coastal zone]

<sup>6</sup> Place names are not disclosed to protect interviewees' identities.

**Table 5: Fostering, current age and current grade (N=974 children aged 8-18y)**

| Level           | Parenting status<br>Staying with: | Current age |           |           | Total (%) |
|-----------------|-----------------------------------|-------------|-----------|-----------|-----------|
|                 |                                   | 8-11 (%)    | 12-14 (%) | 15-18 (%) |           |
| <b>Primary*</b> |                                   |             |           |           |           |
|                 | Both biological parents           | 43.2        | 46.7      | 10.1      | 100.0     |
|                 | Biological mother only            | 33.1        | 50.0      | 16.9      | 100.0     |
|                 | Biological father only            | 21.9        | 62.5      | 15.6      | 100.0     |
|                 | Fostered                          | 28.4        | 47.7      | 23.9      | 100.0     |
| <b>JHS</b>      |                                   |             |           |           |           |
|                 | Both biological parents           | 4.8         | 42.3      | 52.9      | 100.0     |
|                 | Biological mother only            | 5.1         | 38.5      | 56.4      | 100.0     |
|                 | Biological father only            | 4.8         | 28.6      | 66.6      | 100.0     |
|                 | Fostered                          | 0.0         | 31.5      | 68.5      | 100.0     |
| <b>SHS</b>      |                                   |             |           |           |           |
|                 | Both biological parents           | -           | -         | 100.0     | 100.0     |
|                 | Biological mother only            | -           | -         | 100.0     | 100.0     |
|                 | Biological father only            | -           | -         | 100.0     | 100.0     |
|                 | Fostered                          | -           | -         | 100.0     | 100.0     |

\*Chi<sup>2</sup> = 21.498; p < 0.001

In the following analysis of the relationships between fostering, age and school grade, we grouped child respondents into three age categories, corresponding to the ideal educational level of that age group. Thus, 8-11 corresponds to primary school; 12-14 corresponds to junior high school (JHS) and finally 15-18 to senior high school (SHS) (Table 5).

Fostering status appears to be a significant predictor of being 'behind' at school, for those attending primary school at least. Among fostered children who were attending primary school, only just over a quarter (28.4%) were officially of primary-school age (the others were old enough to be either at JHS or even SHS); this compares with over two-fifths of primary school pupils who were living with both their biological parents: Table 5 [ $p(\chi^2)=21.498$ ;  $p < 0.001$ ]. A similar direction of effect was apparent for JHS pupils (Table 5), although this was not statistically significant at the 5% level.

### *Quality of schooling*

Another key issue relates to the *quality* of schooling. It is generally believed in Ghana that private schools offer better quality education than public (state-run)

schools, reflected in better outcomes for pupils. We hypothesised that parents would be more willing to pay the extra costs of private education for their biological children than for fostered children, and that this would be reflected in the proportions of fostered and non-fostered children attending different school types. However, this was not borne out by the survey data (Table 6). From the qualitative data, it appears that proximity is the over-riding factor influencing choice of school, and the vast majority of children attend the nearest (usually state-run) school.

**Table 6: Type of school attended by parenting status (children aged 8-18y)**

| Parenting status<br>Staying with: | Type of school (%) |                      |       |
|-----------------------------------|--------------------|----------------------|-------|
|                                   | State basic school | Private basic school | Total |
| Both biological parents           | 93.6               | 6.4                  | 100.0 |
| One biological parent             | 91.7               | 8.3                  | 100.0 |
| Fostered                          | 92.2               | 7.8                  | 100.0 |

Chi<sup>2</sup> test: no significant differences.

*Serial fostering: A demotivation for school enrolment?*

Although the literature is replete with issues on the impacts of fostering on education, repeated fostering and its impact on education is rarely discussed. Repeated fostering occurs when a child is fostered from one household to another serially. A child who is fostered and re-fostered may lack the consistency needed for academic progression which could subsequently affect the child's motivation for school attendance. This report from the qualitative data is illustrative of the problem:

I was born at [A] near [B]. I stayed in this village till my parents moved to [C]. At [C] I started school at [D] Primary when I was 6 years old. I was the sixth born of eight children. I was then coming to school at [D] in the company of my older siblings. I continued schooling at [D] till Primary 3 when I left to stay with my senior sister at [E]. I combined schooling with farming at my sister's place till I reached Primary 5 when I was sent to another extended family member at [F] to continue my education. Less than a year my father requested that I should come back to continue my schooling at [D] where I started. When I returned to my father I lost interest in schooling due to how I was being tossed here and there. I subsequently stopped schooling at P5.

[A 19 year-old, male, school drop-out, Rural, Coastal zone]



This dimension of fostering has a strong potential for impacting negatively on education. As a child is fostered and re-fostered, the locational characteristics also change, creating adjustment problems each time the child is fostered, thus affecting the child's development as a whole and education in particular.

### *Summary and discussion*

Fostering of children is relatively common in Ghana (Table 1). In summary, the study has revealed generally negative impacts of fostering on education. Specifically, the quantitative data reveal significant relationships between living arrangement of children on the one hand and their enrolment, schooling status and progress on the other. Children staying with both biological parents were more likely to attend school regularly (a prerequisite for successful schooling outcomes) than their counterparts staying with foster parents. Moreover, there seem to be a continuum with regard to living arrangement of children and schooling status, with children living with both biological parents attending school most regularly, to fostered children who are least likely to be enrolled in and attending school, with children living with one parent occupying an intermediate position. Fostered children significantly lagged behind their ideal grade at the primary school level.

The quantitative data did not support the earlier hypothesis that fostered children were more likely to be enrolled in state basic schools which are comparatively cheaper. But relatively few children surveyed attended private schools, probably because of the relatively poor socio-economic status of the study settlements and the dearth of private schools in many areas.

The in-depth interviews also reveal the perceived disadvantaged experience by fostered children with regard to education and further indicate the expressions of fostered children as a clear manifestation of their awareness of the situation. Emerging from the qualitative data is the role of serial fostering as a disincentive to school attendance. Fostered and re-fostered children have an additional burden of having to adjust to different and new socio-academic contexts which could slow or even stall progress in schooling (for a discussion of issues mediating between fostering and educational outcomes, see Hampshire et al. forthcoming).

The foregoing arguments lend clear support to the view that fostering is detrimental to at least some schooling outcomes (Kuyini et al., 2009; Akresh, 2009; Pilon, 2003; Ainsworth, 1996 & Charmes, 1993). Indeed, our findings from both the qualitative and quantitative data reveal a negative impact of fostering on fostered children's educational outcomes. Thus, our findings run

contrary to views that fostering creates better educational opportunities for those children who would not have had access to the quality of education provided under foster care (Serra, 2009; Akresh, 2004; Bennell, 2005; Goody, 1982 & Bledsoe, 1990).

Nevertheless, it is important to note that discussing impacts of fostering on education should be done with caution, especially when viewed against the background that strengthening and maintaining family ties (Kuyini et al., 2009) and opening opportunities in terms of widen knowledge, experience and training (Serra, 2009) are some of the reasons for fostering. An important limitation of this study is that the pre-fostering situation of fostered children was not known since the study was a cross-sectional one; therefore it was not possible to compare before and after situations of fostered children.

### *Conclusion*

In all, our paper suggests that fostering impacts negatively on the educational outcomes of children in Ghana. Fostered children are less likely to be enrolled in school, and less likely to attend school regularly, than those living with both biological parents. They are also more likely to lag behind their ideal grade, especially at the primary school level, than their counterparts either living with both biological parents or either biological parent. However fostering status does not appear to affect the type of school a child attends (private or state-provided). Living with only one biological parent also impacts negatively on children's schooling. In addition, we suggest that serial fostering is an under-considered issue, which may dampen children's enthusiasm for schooling and may lead to early drop-out. The cross-sectional nature of our study meant that we were not able to understand fully the processes of change over time, as children are fostered and re-fostered, or fostered and return ultimately to their biological parents. Future research on this issue should take a longitudinal approach and to ascertain the schooling status of the children before fostering in order to address these issues.

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## Exploring the influence of household internal migration and parents' main livelihood activities on children's occupational aspirations in Ghana

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### *Abstract*

*Background:* Although individuals and entire households engage in internal migration in Ghana, the literature mostly focuses on individual migration. The main objective of this paper is to explore the influence of household internal migration and parents' main livelihood activities on children's occupational aspirations.

*Methods:* This paper draws on data collected from study sites in Ghana as part of a larger research project on Children Mobility and Transport in Sub-Saharan Africa (which took place in Ghana, Malawi and South Africa). During the project survey questionnaire, a total of 125 children and young people aged between 8 and 18 years were interviewed within urban, peri-urban, rural and remote rural sites in two agro-ecological zones in Ghana (eight sites in total). Additionally, the paper draws on qualitative research undertaken in the project in all sites using individual interviews and focus group discussions with key informants, parents and children.

*Results:* The main motives of household internal migration among study participants were economic and social. While parents were mostly engaged in agriculture, their children generally aspired to non-agricultural occupations based on their interests, capabilities and perceptions. The children in both rural and urban areas aspired for occupations of fairly similar status.

*Conclusions:* Children's occupational aspirations are shaped by exogenous and not endogenous factors from their parents but their aspirations in both rural and urban areas are fairly similar. The paper has implications for career counseling at home and in school as well as the National Youth and Employment Programme (NYEP) in Ghana.

*Keywords:* Internal migration, household, livelihood, children, occupational aspirations, Ghana

## *Introduction*

Household migration may be defined as a situation where an entire household decides to migrate from one locality to the other as a family unit. In the literature two main patterns of household migration have been identified: these are split-household migration and entire household or family migration. Split household migration is a situation whereby a member of a household, usually a husband, migrates from a rural to an urban area but occasionally visits the rest of the family in the rural area (Agesa and Kim, 2001). This may be because the costs of living in urban areas are generally higher than rural areas and therefore it is more economical for most of the household members to reside in rural than urban areas, particularly when the motive of migrating is economic. On the other hand, an entire household or family may decide to relocate to a different destination for various reasons.

This paper focuses on the latter form of household migration, which involves whole household relocation. Four patterns of household migration are considered: urban-to-urban, urban-to-rural, rural-to-urban and rural-to-rural. The literature on household migration and associated livelihoods is now well established (e.g. Meikle, Ramasut and Walker, 2001; Cahn, 2002; Ellis, 2003). A number of studies have looked specifically at the educational achievements of migrants' children at destination (Smith and Tomlinson, 1989; Grisay, 1993). What appears to be less documented in the literature are studies that examine the impacts of household migration on children's occupational aspirations; this issue has been under-researched in general and almost no work on this in Ghana exists (Ocansey, 2005). The main objective of this paper therefore is to assess the influence of usual place of residence and parents' main livelihood activities on children's occupational aspirations. The paper seeks to answer the following research questions:

1. What are the determinants of household internal migration in Ghana?
2. Do parents' main livelihood activities influence the occupational aspirations of their children?
3. Are there any differences in occupational aspirations between children in rural and urban areas?

## *Conceptual and theoretical perspectives on migration, livelihoods and occupational aspirations*

Migration may be defined as a form of spatial mobility involving a change of usual residence between clearly defined geographical units for various reasons (International Organization for Migration, 2003). Traditional economic theories of migration postulated that the decision to migrate was made by the individual,

independently of other members of the household (Harris and Todaro, 1970). But subsequent theories were developed which recognized the role of the household in migration decision-making (Stark, 1991; Chant, 1998; Arango, 2000). The concept of 'household' has been defined in many different ways. Friedman (1992) defined a household as a residential group of persons who live under the same roof and eat out of the same pot while the Ghana Statistical Service defined a household as 'a person or group of persons who live together in the same house or compound, share the same housing-keeping arrangements and are catered for as one unit' (Ghana Statistical Service, 2002 : viii). These definitions seem to suggest that a household is a homogeneous entity but in reality it comprises members with varied background characteristics, perceptions, preferences and aspirations. Also, in a household, particularly in Ghana and other African countries, differences in power relations exist, particularly in terms of sex and age. In Ghana, for example, a male is almost always the *de jure* household head; a female becomes a head of household only in the event of the death of her spouse or when her spouse migrates or when she is not married (Ghana Statistical Service, 2002). Also, in most ethnic groups in Ghana (particularly in northern Ghana), females and children are rarely involved in household decision-making. This paper is situated within the context of the household strategy approach proposed by Chant (1998), in which the household is considered the social arena where family members take collective decisions concerning their well-being. Migration arises because a household needs to satisfy livelihood requirements, and therefore may decide who can leave and who has to stay behind. The entire household could however, relocate depending on the prevailing circumstances.

The term 'livelihood' has been defined by Chambers and Conway (1992) as the capabilities, assets, and activities required for a means of living. It is based on the assumption that the asset status of an individual is fundamental to understanding the options open to him/her, the strategies he/she adopts to attain a livelihood, the outcomes he/she aspires to and the vulnerability context under which he/she operates (Ellis, 2003). Livelihood activities have been defined as all activities that generate the means of household survival. Scoones (1998), Carney (1998) and Ellis (2000), cited in Cahn (2002), have identified three main types of livelihood strategies or activities: natural resource base, non-natural resource base and migration. Household migration could thus, in some cases, be a form of livelihood strategy aimed at improving upon its livelihood status.

Occupational aspiration refers to a strong feeling of interest and preference for a particular occupation, vocation or job accompanied by the desire to enter that occupation, vocation or job (Ocansey, 2005). There are a number of theoretical



perspectives in both sociology and psychology that have outlined factors that influence occupational aspirations of young people (Hotchkiss and Borow, 1990; Leung, Comdey and Scheel, 1994). One sociological perspective on occupational choice is the Status Attainment Model (Hotchkiss and Borow, 1990). Among other things, the model focuses on the influence of family background and parents, friends and relatives on occupational aspirations of children. The underlying assumption is that parents' status—educational/professional level and main occupation— influences the occupational aspirations of their children (Ocansey, 2005). However, empirical results from Herting's (2005) studies on the development of elementary-aged children's career aspirations and expectations indicate little relationship between parents' jobs and the jobs the children stated they wanted to have when they grew up. Only six percent of the children aspired to the same occupation as their mother's and 10 % aspired to the same occupation as their father's.

There is some disagreement about the developmental stages at which children form occupational aspirations (Herting, 2005). Gottfredson's (1996) theory suggests that children under five will express fantasy occupational aspirations and that at approximately age five, children's occupational aspirations begin to be shaped by social influences such as gender expectations, social prestige, and the perceived difficulty of the career. Earlier work by Ginzberg (1951) indicates that children up to age 11 base their career choices on fantasy, and around age 11 they begin a transition to viewing career choices more realistically. Also, Havighurst (1964) proposed in his stages of career development that between ages five and ten the concept of working becomes ingrained in a child's conception of adult life. As a result, parents and other adults close to the child are important models in creating this vision. In sum, these theories of children's career development all describe a developmental process whereby children come to refine their thoughts and plans regarding desired careers as they grow up.

Although some research has been carried out on the relationship between parents' main occupation/ profession and their children's occupational aspirations, the conclusions are generally ambivalent. This study introduces a third element (place of residence) into the usual relationship (i.e. relationship between parents' main occupation and their children's occupational aspirations), and specifically examines the possible influences of usual place of residence (whether remote-rural, rural, peri-urban or urban) and main livelihood activities of parents on the occupational aspirations of their children.

*Data and Methods*

This paper draws on data collected in Ghana as part of a large multi-country research project: *Children, Transport and Mobility in Sub-Saharan Africa* ([www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility)), designed and led by Durham University (UK), in collaboration with the University of Cape Coast (Ghana), the University of Malawi and CSIR (South Africa). Details of the project study design, methodology and analysis (where this relates to Ghana) can be found in Porter et al (this volume); see also Porter et al (2010a, 2010b, 2010c, 2010d, 2011 in press); Robson et al, (2009) Briefly, the Child Mobility project was conducted in 24 field-sites across three countries: Ghana, Malawi and South Africa. In each country, the study was carried out in two main agro-ecological zones with each zone comprising four study sites, namely urban, peri-urban, rural with services and remote rural without services. In line with definitions used by the Ghana Statistical Service (2002), a rural area is defined as a settlement with a total population of less than 5000 people, while an urban settlement has a population of 5000 or more inhabitants. In each field-site, qualitative and quantitative research methods were used to gather data on children's mobility in relation to education, health, livelihoods, transport and migration. In this paper, we draw on material collected in the Ghana field-sites.

A total of 125 children and young people<sup>1</sup> aged between 8 and 18 years were interviewed at each site using a survey questionnaire. The questionnaire covered themes such as household background characteristics, activities that children engage in which involved walking or the use of transport services and problems that they encounter in carrying these different activities. The survey was preceded by interviews, conducted among in and out-of-school youth, parents and key informants using various qualitative techniques of data collection such as in-depth interviews, focus group discussions, life history interviews, accompanied walks (see Porter et al, 2010a) and key informant interviews. Interview schedules for children and other participants included questions on the use of various modes of transport, migration experiences, occupational aspirations and decision-making at the household level. At each of the sites, the research team first visited and sought permission from the Assembly man or woman (District Assembly representative at the community level) and traditional leaders before starting to conduct the research in that community. The participants in both the surveys and interviews/group discussions were selected based on availability and willingness to participate. A further component on the work (not discussed further here) involved training 'child researchers' to conduct

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<sup>1</sup> The terms 'children' and 'young people' are used interchangeably to refer to study participants aged 8-18 years.

peer research on mobility in their communities (Porter et al, 2010c; Robson et al, 2009; Hampshire et al, 2012, forthcoming). The instruments and approaches used, including questionnaires and qualitative checklists, were developed as a collaborative endeavour by Durham University and the participating institutions in Ghana, Malawi and South Africa, and reviewed by the university of Durham Ethical Review Board.

The questionnaires were edited and coded using a coding manual prepared for all open-ended questions in order to ensure consistency in data entry. SPSS was used to input and analyse the survey data, while the qualitative information/data was transcribed, edited, and the relevant sections teased out and analysed contextually

### *Study areas*

The study was carried out at four sites in each of two zones: the forest (Brong Ahafo Region) and coastal (Central Region) agro-ecological zones of Ghana. The study sites in each zone comprised urban, peri-urban, rural and remote rural settlements.

The 2000 Population and Housing Census report shows that the total populations of the four sites in the forest zone in 2000 were 203,267, 1,919, 938 and 415 respectively (Ghana Statistical Service, 2002). The Bonos are the main ethnic group and the indigenes of the area while the others are mainly migrants of various ethnic backgrounds. Agriculture is one of the main economic activities in the rural forest sites; in the urban and peri-urban areas petty trade is particularly widespread, in part based on agricultural produce from the surrounding rural areas. In the four study sites, the number and quality of key social services such as schools, health, communication and transport vary according to the status of the site; whether urban, peri-urban, rural with services and rural without services. For instance, transport services in the rural and remote rural areas are very irregular except on market days where vehicular flow is somehow better but still less frequent compared with the peri-urban area.

In the coastal zone, the total populations of the four sites in 2000 were 15,326, 1,301, 414 and 61 respectively (Ghana Statistical Service, 2002). Besides the Fantes, who are the dominant ethnic group, the population is a mix of people of different ethnic backgrounds. With the exception of the urban site which has varied economic activities ranging from services through trading to small-scale manufacturing activities, farming and, to a lesser extent, livestock rearing constitute the major livelihood activities in the other three sites. The pattern of distribution of social services in the coastal zone is similar to that of the forest

zone. The physical and socio-economic characteristics of the study sites are livelihood resources that can be expected to influence the main livelihood activities of the population.

### *Results*

The results presented in this section are based on the data collected in Ghana, particularly from the qualitative information which has themes on migration experiences, children's occupational aspirations and decision-making at the household level.

#### *Determinants of household migration*

This section focuses on permanent relocation of households and assesses the factors that determine such relocations. In-depth interviews were used to assess the causes of permanent migration among households. In general, socio-economic reasons such as the search for better livelihoods, transfers, death of a family member and the desire for quality education for children were mostly the main determinants of household internal migration in the qualitative data.

The death of a member of a household was one important cause of internal migration of households as observed in these two narrations:

We were first staying at \*\*\*\* with my mother and grandmother. After the death of my grandmother, we moved to stay at quarter guard with my uncle.

[15 year old girl, in school, peri-urban]

I was born at \*\*\*\*. I was staying with my parents. My grandfather died at the \*\*\*\* Barracks where he worked as a civilian. After the funeral the whole family moved to \*\*\*\*.

[12 year old boy, in school, peri-urban]

It must be noted that the family members who died are not the sole breadwinners of the family to warrant migration but, for reasons best known to them, these households decided to relocate after the death of a member.

Another major factor that leads to internal migration of households is parents' search for better sources of livelihood. Generally, people tend to move from less endowed to more endowed areas in order to improve upon their livelihood status. In Ghana, for example, differences in the physical characteristics and socio-economic development have created differences in socio-economic

opportunities between the northern and southern parts of the country and also between rural and urban areas in general. The southern parts of the country are more developed in terms of economic activity, which makes them centres of development and growth while the northern parts remain underdeveloped (Addo, 1980; Kwankye, 1997; Tsegai, 2005; Abane, 2008). These differences stimulate internal migration and the search for better livelihoods as stated by this respondent:

I was born at \*\*\*\* in the Upper West Region of Ghana. When I was two years old my parents migrated from \*\*\*\* to \*\*\*\* to engage in farming. Since then I have stayed at \*\*\*\* up to date.  
[17 year old boy, in school, rural ]

Others move from one locality to another within southern Ghana in order to engage in some livelihood activities at their new destination as reported by these two boys in rural areas.

I was born at \*\*\*\* in the Ashanti Region. My parents migrated from \*\*\*\* to \*\*\*\* in search for better means of livelihood.  
[18 year old boy, in school, rural]

I was living in Accra with my biological parents. My parents came to make a farm at \*\*\*\*, a village near Sunyani and now we have moved from Accra to settle here permanently. My father is a driver and a farmer as well while my mother sells kenkey.  
[15 year old girl, in school, rural]

One main feature common to all these three narrations is the fact that parents took the decision to relocate without any evidence of children being involved in the decision-making, underscoring differential intra-household power relations. Farming appears to be a very common livelihood activity for migrating households at destination. This is consistent with the fact that Ghana is predominantly an agricultural country with over 50 % of the active labour force engaged in agriculture, and also it serves as a major source of income for most households in Ghana (ISSER, 2010).

One other reason for household migration is to have access to formal education for their children. In Ghana, schools are often classified as 'better' or 'worse' based on a number of factors which include infrastructure, availability and quality of teachers and, to a large extent, academic performance. Generally, most of the less endowed Basic Schools

with poor academic performance are found in remote rural and rural areas. For instance, Etsey (2007) noted that several rural Junior High schools often record between zero and five percent passes in the final Basic Education Certificate Examination (BECE) compared with much higher pass rates in their counterparts in urban areas. Thus, access to quality education informed the decision of some households to relocate as explained below:

I was born in a \*\*\*\* (remote rural) in the Western Region of Ghana. When I was 11 years old my parents migrated to \*\*\*\* (Rural) to enable me have access to better education. The school at \*\*\*\* is up to Junior High School but my former school was only a Primary School.  
[13 year old boy, in school, rural]

Human capital or capabilities comprise knowledge, skills and good health. Formal education provides the opportunity for children to develop their human capital. Thus, migration for the purpose of having access to quality education is an attempt to obtain quality human capital which will enable some children to attain their future occupational aspirations.

For parents who are formal sector employees, transfers could lead to occasional migration with their household members. This can have implications for their children's education as some of the transfers could be from urban areas, where academic performance is generally better, to rural areas, where standards are typically lower (Etsey, 2007). An illustrative example is the quotation given below where the boy's parents moved from one urban area to another and finally to a rural area.

I was born in [urban location] in the Eastern Region. When I was five years old my father was transferred to a village near [another urban location] in the Western Region so the entire family moved to that place. My father was transferred again from that village to [rural settlement], and we have been here since the past five years.  
[18 year old boy, out-of-school, rural]

In a few cases, parents could be compelled to relocate with their children in order to end regular hostilities between them and their neighbours. For instance, a 15 year old student provided the information below as the reason why his parents migrated:

I was born at [A]. I started schooling there. At [A] there was a female tenant who always quarrels with my mother, so my grandmother

advised my father to move out of [A]. Finally, we came to live in [B].  
[15 year old boy, in school, peri-urban]

The pattern of household migration as observed from the study is mostly to rural areas, with families moving from both urban and rural settlements. This is consistent with the general internal migration patterns in Ghana as shown by the 1970, 1984 and 2000 censuses (Table 1). On the average, two-thirds of all internal movements from 1970 to 2000 ended up in rural areas as the final destination.

**Table 1: Patterns of internal migration in Ghana from 1970-2000  
(as percentage of total population)**

| <b>Pattern</b> | <b>1970</b>       | <b>1984</b>         | <b>2000</b>         |
|----------------|-------------------|---------------------|---------------------|
| Rural-rural    | 60.0              | 35.3                | 32.0                |
| Rural-urban    | 17.6              | 16.6                | 10.0                |
| Urban-rural    | 11.4              | 25.3                | 35.0                |
| Urban-urban    | 11.0              | 22.8                | 23.0                |
| <b>N</b>       | <b>8,559, 313</b> | <b>12, 296, 081</b> | <b>18, 912, 079</b> |

Source: Ghana Statistical Service, 1970, 1984 and 2000.

#### *Main livelihood activities of parents by location*

In theory, a parent could engage in any livelihood activity depending on his/her choice, capabilities and assets which include knowledge, skills, health status and financial resources. In addition, access to natural resources (land, climate, water, etc) and physical resources (basically physical infrastructure) are the other elements necessary for a livelihood activity to thrive but this to a greater extent depends on one's location, whether rural or urban. In the study, children at all the four site types were asked to state the main livelihood activities of their parents: Tables 2 and 3. Farming was the main livelihood activity of both parents in both coastal and forest zones, particularly in remote rural, rural and peri-urban areas. In the urban areas, more than half (55%) of fathers in the coastal zone were engaged in civil service or artisan work while their counterparts in the forest zone were involved in transport services or artisan work (27%). Although mothers in urban areas were mostly engaged in trading, the proportion was higher in the coastal zone (70%) than in the forest zone (48%). In general, the results show that the main livelihood activities of the parents were farming, civil service, artisan work and trading.

**Table 2: Main livelihood activities of fathers by location (in percentages)**

| <b>Main activity at coastal zone</b> | <b>Remote rural</b> | <b>Rural</b> | <b>Peri-urban</b> | <b>Urban</b> | <b>Total</b> |
|--------------------------------------|---------------------|--------------|-------------------|--------------|--------------|
| Unemployed                           | 0.0                 | 1.1          | 1.0               | 4.0          | 1.5          |
| Retired                              | 0.0                 | 0.0          | 2.0               | 0.0          | 0.5          |
| Farming                              | 69.8                | 79.8         | 46.5              | 10.0         | 50.5         |
| Trading                              | 4.2                 | 2.1          | 0.0               | 13.0         | 4.8          |
| Civil service                        | 4.1                 | 5.4          | 16.9              | 30.0         | 14.4         |
| Artisan                              | 5.2                 | 2.1          | 13.9              | 25.0         | 11.8         |
| Transport services                   | 5.2                 | 2.1          | 7.9               | 11.0         | 6.6          |
| Security services                    | 0.0                 | 1.1          | 4.0               | 4.0          | 4.3          |
| Other                                | 11.5                | 9.4          | 7.8               | 4.0          | 5.8          |
| <b>N</b>                             | <b>96</b>           | <b>95</b>    | <b>101</b>        | <b>100</b>   | <b>392</b>   |
| <b>Main activity at forest zone</b>  |                     |              |                   |              |              |
| Unemployed                           | 0.0                 | 0.9          | 5.0               | 7.3          | 3.5          |
| Retired                              | 0.0                 | 0.0          | 4.3               | 3.1          | 2.1          |
| Farming                              | 98.7                | 91.8         | 37.9              | 24.0         | 59.8         |
| Trading                              | 0.0                 | 1.8          | 2.1               | 9.4          | 3.3          |
| Civil service                        | 1.3                 | 2.7          | 16.3              | 10.4         | 8.7          |
| Artisan                              | 0.0                 | 0.0          | 10.7              | 12.5         | 5.9          |
| Transport services                   | 0.0                 | 0.0          | 5.7               | 14.6         | 5.2          |
| Security services                    | 0.0                 | 0.2          | 3.5               | 1.9          | 3.5          |
| Other                                | 0.0                 | 2.6          | 14.5              | 16.8         | 8.0          |
| <b>N</b>                             | <b>77</b>           | <b>110</b>   | <b>140</b>        | <b>96</b>    | <b>423</b>   |

**Source:** Data from the project

*Occupational aspirations of children in relation to those of their parents*

Through in-depth interviews, the children were asked about their future occupational aspirations; whether it was their own decision or they were influenced by anybody and how they could achieve these aspirations. The verbatim responses of some of them are presented here. Although farming and trading were found to be the main livelihood activities of most parents, none of the children interviewed aspired to pursue these occupations. They rather mentioned wide a range of professions ranging from police service through healthcare services to football. For instance, an 18-year-old young man in a rural area gave the following information about his future aspirations:



**Table 3: Main livelihood activities of mothers by location (in percentages)**

| <b>Main activity at coastal zone</b> | <b>Remote rural</b> | <b>Rural</b> | <b>Peri-urban</b> | <b>Urban</b> | <b>Total</b> |
|--------------------------------------|---------------------|--------------|-------------------|--------------|--------------|
| House wife                           | 1.0                 | 0.0          | 0.0               | 4.6          | 1.4          |
| Farming                              | 79.6                | 71.8         | 60.9              | 1.9          | 53.7         |
| Trading                              | 15.5                | 20.5         | 36.4              | 70.4         | 35.6         |
| Civil servant                        | 0.0                 | 0.9          | 0.0               | 8.4          | 2.3          |
| Catering/baking                      | 1.0                 | 1.7          | 0.9               | 4.6          | 2.1          |
| Security                             | 0.0                 | 0.0          | 0.0               | 0.9          | 0.2          |
| Artisan                              | 2.9                 | 4.4          | 0.9               | 6.5          | 3.8          |
| Other                                | 0.0                 | 0.7          | 0.9               | 0.7          | 0.9          |
| <b>N</b>                             | <b>103</b>          | <b>117</b>   | <b>110</b>        | <b>108</b>   | <b>438</b>   |
| <b>Main activity at forest zone</b>  |                     |              |                   |              |              |
| House wife                           | 0.0                 | 1.8          | 8.3               | 5.7          | 4.6          |
| Farming                              | 98.8                | 92.0         | 43.4              | 29.5         | 62.6         |
| Trading                              | 1.2                 | 1.8          | 39.3              | 47.7         | 24.7         |
| Civil servant                        | 0.0                 | 0.0          | 3.4               | 3.9          | 2.1          |
| Artisan                              | 0.0                 | 0.9          | 0.0               | 8.6          | 2.3          |
| Catering/baking                      | 0.0                 | 1.8          | 4.1               | 3.8          | 2.7          |
| Other                                | 0.0                 | 3.5          | 1.5               | 0.8          | 1.0          |
| <b>N</b>                             | <b>81</b>           | <b>113</b>   | <b>145</b>        | <b>105</b>   | <b>444</b>   |

**Source:** Data from the project

I want to become a policeman in future because my physical stature shows that I can be taken as a policeman. I like that profession because they are able to control criminals. To become a policeman in future means that I have to take my studies seriously and pass all my examinations.

[18-year-old boy, in school, rural]

The respondent was self-motivated and convinced by his physical stature, which is an aspect of human capital, that he could be suitable for the police service. However, his parents were farmers residing in a rural area where there is no police station or services within the village.

Another respondent, whose parents were also both farmers, indicated that she wanted to become a professional nurse in future because of the perceived financial advantages, while another said he wanted to become an electrician although his parents were farmers. In both cases, the parents of these children

were not in either of these jobs. Moreover, these children reside in rural areas where these professions are not readily available:

I want to become a professional nurse in future. I am interested in that profession because they are better paid than other workers, especially teachers. The challenges are my ability to pass all my examinations and also my parents being able to pay my school fee.

[18-year-old girl, in school, rural]

I want to be an electrician in future. I personally developed the interest of becoming an electrician in future. Nobody gave me that idea. I have been watching the electricians whenever they are at work and that is where I developed the interest for that profession.

[13-year-old boy, in school, rural]

Others' aspirations are influenced by particular talents that they consider themselves to have, or by the encouragement of influential adults, particularly teachers. Although their parents were farmers or civil servants or traders or artisans:

I want to be a footballer in future. I have the talent and desire for playing football. Through football, I can earn some money. The likely obstacles to my aspiration as a footballer are injuries during matches, low level of education since I did not further my education after the Junior High School level and lastly, if a fellow footballer decides to 'work on me' through 'juju' (Africa metaphysics).

[17 year old boy, out-of- school, urban]

I want to be an artist so that I can earn more money. I have the interest and flare for it. I can draw and design gadgets like electric fan. One of my teachers has been encouraging me to learn art. I want to further my education to a Technical Institute. I have to move to a bigger town before I can become an artist

[14 year old boy, in school, peri-urban]

In future, I want to be a business woman dealing in already made dresses and local fabrics or materials (Tye and dye). People who are in business, like my senior sister, always have some money to enjoy themselves

[18 year old girl, out-of-school, urban]

From the above information, it is obvious that children aspire to engage in professions that are completely different from those of their parents. This is

consistent with Herting's (2005) studies which found little relationship between parents' main occupation and the occupations their children aspired to engage in. Instead, the choice of their future occupations is based on their own interests, capabilities and perceptions about monetary reward associated with such professions. Although the background characteristics of parents and the socio-economic and political environment in the study which Hotchkiss and Borow (1990) tested the status attainment model might be different from that of the present study, it can be said that the findings in this study are contrary to the perspectives of the status attainment model (Hotchkiss and Borow, 1990), which indicates that parents' occupations or professions influence the occupational aspirations of their children.

Since the respondents were all above the age (5 years or less) where aspirations are influenced by fantasies (Gottfredson, 1996; Ginsberg, 1951), it means that they are at the stage where they have come to terms with realities and therefore the choice of their aspirations are now based on their own interests, capabilities and perceptions about the most rewarding or socially prestigious occupations. On the challenges that they are likely to encounter in their bid to achieve their aspirations, some children reported that their success depended on their ability to pass the requisite examinations and also their parents' ability to pay their school fees. The challenge anticipated by the children about their ability to pass their examinations depends to some extent on the quality of education at their new destinations. As noted above, quality of education in rural areas in terms of academic performance has been found to be lower than that of urban centres (Etsey, 2007).

#### *Place of usual residence and children's occupational aspirations*

This section examines whether or not there are some differences in the choice of occupational aspirations between children in rural and urban areas. Generally, some of the occupations mentioned by children in rural areas (including rural remote) include police service, nursing and electrical works while those of their counterparts in urban areas (including peri-urban) include football, art and business (trading in dresses and local fabrics). These occupations (both rural and urban) can be described as middle-level vocational jobs which have more or less similar status. Children and young people in both rural and urban areas thus have fairly similar occupational aspirations. This might be due to the fact that both groups have access similar information on various vocations from the media, even though some of the occupations mentioned by those in rural areas did not exist in their localities.

*Discussion and conclusion*

The main objective of the paper was to assess the influence of household internal migration (entailing a change in usual place of residence and often of parents' livelihood activities) on the occupational aspirations of children. The main determinants of household migration were economic and social: the search for better livelihoods, transfers, death of a family member and the desire for quality education for children. Due to differences in natural, economic and social resources in the country, people are often attracted to places which are perceived to have better economic opportunities. For instance, the main migration pattern in Ghana is north-south owing to the socio-economic attractions in the south compared to the northern parts. However, there are other minor migration patterns within the southern or northern zones for economic, social and other reasons. The main pattern of household migration was from either urban to rural areas or from one rural settlement to another. In effect, rural areas constitute a major destination of household migration, and farming was found to be the main livelihood activity of most households in both ecological zones. Although this could enhance food production in the country, it may increase pressure on the natural resource base.

The study also revealed that children aspired to pursue livelihood activities that were completely different from those of their parents. This is contrary to the basic tenet of the Status Attainment Model which assumes that parents' status (occupation and education level) affects the occupational aspiration of their children. Also, the finding is at variance with the concept of inter-generational transfer of knowledge and skills from parents to children, since the occupational aspirations of the children were completely different from their parents' occupations. Children appeared to choose their future occupations based on their human capital and perceived financial reward. This implies that occupations that are associated with lower financial gains are likely not to attract people in future although not all children will be able to attain their aspirations.

The study showed that children in both rural and urban areas have fairly similar occupational aspirations. Although more than half of child respondents lived in rural and small towns where farming was the predominant occupation, almost all the children interviewed aspired to engage in professions other than farming. This means that children's occupational aspirations are not confined to their local areas. This may be partly due to the influences of globalization, education and advancement in information technology which exposes children to other occupations. For example, there are radio stations in all the districts and sub-districts in the country which provide information on varied social, economic and political issues including career opportunities. It could also be explained in

the context of Gottfredson's (1996) theory that children's occupational aspirations at later ages are shaped by exogenous influences other than endogenous developmental processes. For instance, the 13-year-old boy who wants to become an electrician developed this interest by watching electricians whenever they are working, while the young woman who wished to be a professional nurse did so because of the perceived high remuneration associated with that profession compared to teaching.

According to the children, achievement of their occupational aspirations depends on their ability to pass all requisite examinations and also the ability of their parents to pay their school fees. But the study revealed that households mostly migrated to rural areas where the quality of education is generally low compared to the urban centres. Consequently, children in some schools in rural areas are not likely to attain their career aspirations owing to low academic performance associated with such schools (Estey, 2007). However, even urban-dwelling children will not necessarily be able to achieve their occupational aspirations, since many do not have the financial means to pursue the necessary further education or training.

One of the Government of Ghana's poverty reduction strategies as stated in the GPRS II is the payment of fees for all pupils in public basic schools through the capitation grants, which means that parents are relieved of the burden of paying school fees at the JHS level (for children aged up to 15 years). However, parents still have to meet various other schooling expenses for children of this age (costs of uniform, books, food, etc.). And at the Senior High School (SHS) level (15-18 years) and beyond, parents are expected to pay schools fees. Children whose parents are unable to pay their fees at the SHS level are not likely to achieve their desired occupational aspirations, particularly if the profession in question demands further academic and professional training beyond the JHS level or appropriate social connections. In other words, the ability of children to achieve their occupational aspirations depends on household financial situation, as well as the children's own academic performance.

### *Policy implications*

Since some teachers assist pupils to decide on their future occupation, there is the need to provide in-service training to teachers without professional career counseling so that all teachers could be in a better position to assist pupils in their career aspirations. This is particularly important since, for most children, whose parents are engaged in subsistence farming, parents are unlikely to have the appropriate knowledge and expertise to advise their children about the range of occupations they might pursue. It has been noted that children's career

aspirations transcend their locality of residence, which means that programmes designed to provide career counseling to children should not be limited to only few careers that are available and accessible to them locally.

Children's aspiration may be unattainable due to migration of households from urban to rural areas where quality of education is generally low coupled with other unfavourable social and environmental factors. There is therefore the need to provide the less-endowed schools in rural areas with basic infrastructure, logistics and professional teachers to enable them improve upon their academic performance.

It is incumbent for parents to guide their children to choose their own future careers but not to impose their own career on their children since children are not likely to pursue similar careers as that of their parents. However, it is important to note that children may initially aspire to pursue a particular career but may end up in another as they grow and come to terms with realities as indicated by Ginzberg's (1951) theory on occupational choice.

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## Mobility and economic constraints as key barriers to children's health-seeking in Ghana

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### *Abstract*

Goal 4 of the UN Millennium Development Goals seeks to “reduce child mortality” and targets a reduction of child mortality rate among children under five years. Although some significant achievements have been made by some countries in this direction, it is estimated that more than 9 million children under the age of five die every year worldwide, with 41% of these deaths occurring in sub-Saharan Africa. Most of these deaths have been attributed to varied factors including household environment, poor hygiene and barriers to accessing health care. This paper discusses mobility and economic constraints as key barriers to children's health-seeking in Ghana. Qualitative data were derived from the health interviews and focus-group discussions with children aged 8–18 years while the quantitative data was sourced from 1005 children aged 8-18 years drawn from eight sites (urban, peri-urban, rural and remote rural) in two ecological zones (coastal and forest) in Ghana. It was identified that distance to health facilities as well as the high cost associated with accessing health facilities debar children from considering hospital or clinical care as a first choice health care outlet. It also emerged that some children, especially rural residents, walk or travel for more than 20 kilometres to access healthcare. Improved telecommunication (mobile telephony) and transport services offer a ray of hope to residents in rural Ghana. The sector ministries responsible for road transport and communication are being entreated to hasten attempts at improving Ghana's road networks and telecommunication infrastructure to enable children easily access health care.

*Key words: Mobility, Barriers to health-seeking, Access to health, children, Ghana, Health-seeking*

## *Introduction*

The World Health Organisation (WHO) defines health as a state of complete physical, emotional and social wellbeing of a person and not merely the absence of diseases or infirmities (WHO, 1946). A healthy population will contribute significantly to increased productivity and national development. Governments the world over, therefore, make significant investments in the health sector. However, despite the pledge in the 1970s to attain health for all by the dawn of the 21<sup>st</sup> century, available statistics reveal that good health has still eluded billions of people in developing countries (Murphy, 2005; United Nations [UN], 2010).

Goal 4 of the UN Millennium Development Goals seeks to “reduce child mortality” and targets a reduction by two thirds the mortality rate among children under five years. Although some significant achievements have been made in this direction, it is estimated that more than 9 million children under the age of five die every year worldwide, with 41% of these deaths occurring in sub-Saharan Africa (Rutherford, Mulholland and Hill, 2010).

The WHO observed in 2005 that the decline in under-five deaths in Africa has been insignificant despite the various governmental and non-governmental interventions in improving child health (WHO, 2005; Fayehun, 2010). Ghana’s under-five mortality was approximately 80 deaths per 1,000 live births (GSS et al, 2009). Indeed most of these deaths have been attributed to varied factors including household environment (poor water supply, sanitation, personal hygiene of the carer) and household hygiene (Fayehun, 2010) as well as barriers to seeking healthcare for sick infants and children (Rutherford, Mulholland and Hill, 2010; WHO, n.d). Such barriers may include mobility constraints (Porter, Abane et al. 2011), economic barriers, socio-cultural and language related barriers. Less attention has been focused on older children (aged over 5 years) who have been relatively ignored in recent MDG-driven moves to improve child health (but see Hampshire et al. forthcoming).

Ghana has adopted a range of health policies and programmes at both national and local levels with the intent of increasing the number of health facilities and improving health service delivery to both urban and rural dwellers. Some of the existing policies that directly address the health needs of the people are the National Population Policy, National Reproductive Health Service Policy and Standards, National HIV/AIDS and STI Policy and the Adolescent Reproductive Health Policy (Odoi-Agyarko, 2003; National Population Council [NPC], 1994; National Population Council [NPC], 2000). The introduction of the National Health Insurance Scheme (NHIS) in 2003 also sought to provide

accessible healthcare to Ghanaians without making any payment at the point of delivery (Republic of Ghana, 2003). .

It is expected that these and other health interventions would significantly increase hospital/clinical attendance and reduce the incidence of self-medication/drug abuse. However, various barriers to accessing healthcare remain, in particular physical access and economic barriers (Melnyk, 1988). This paper discusses mobility and economic constraints as key barriers to children's health-seeking in two ecological zones in Ghana.

### *Research sites and methods*

This paper draws on data collected in Ghana as part of a large multi-country research project: *Children, Transport and Mobility in Sub-Saharan Africa* ([www.dur.ac.uk/child.mobility](http://www.dur.ac.uk/child.mobility)), designed and led by Durham University (UK), in collaboration with the University of Cape Coast (Ghana), the University of Malawi and CSIR (South Africa). Details of the project study design, methodology and analysis (where this relates to Ghana) can be found in Porter et al (this volume); see also Porter et al (2010a, 2010b, 2010c, 2010d, 2011 in press); Robson et al, (2009); Hampshire et al (2012, forthcoming). Briefly, the Child Mobility project was conducted in 24 field-sites across three countries: Ghana, Malawi and South Africa. In each field-site, qualitative and quantitative research methods were used to gather data on children's mobility in relation to education, health, livelihoods, transport and migration. In this paper, we draw on the material collected in the Ghana field-sites.

There were eight field sites in Ghana: four sites (one urban, one peri-urban, one rural with basic services and one remote rural, classifications based on those of the Ghana Statistical Service, 2000) in each of two agro-ecological zones: coastal savannah (Central Region, around Cape Coast) and forest (Brong Ahafo Region, around Sunyani).

In the forest belt of Ghana the vegetation is mainly moist semi-deciduous forest while grasses with short and small trees dominate the coastal zone. In both zones, the vegetation is fast degrading as population expands. At the household level, inhabitants of both zones practise a mix of nuclear and extended family systems which are mainly male-headed households; however, isolated child-headed households exist in these settlements. The major ethnic groups are Bonos (forest zone) and Fantes (coastal zone), but with substantial numbers of migrants from other ethnic backgrounds (GSS, 2003).

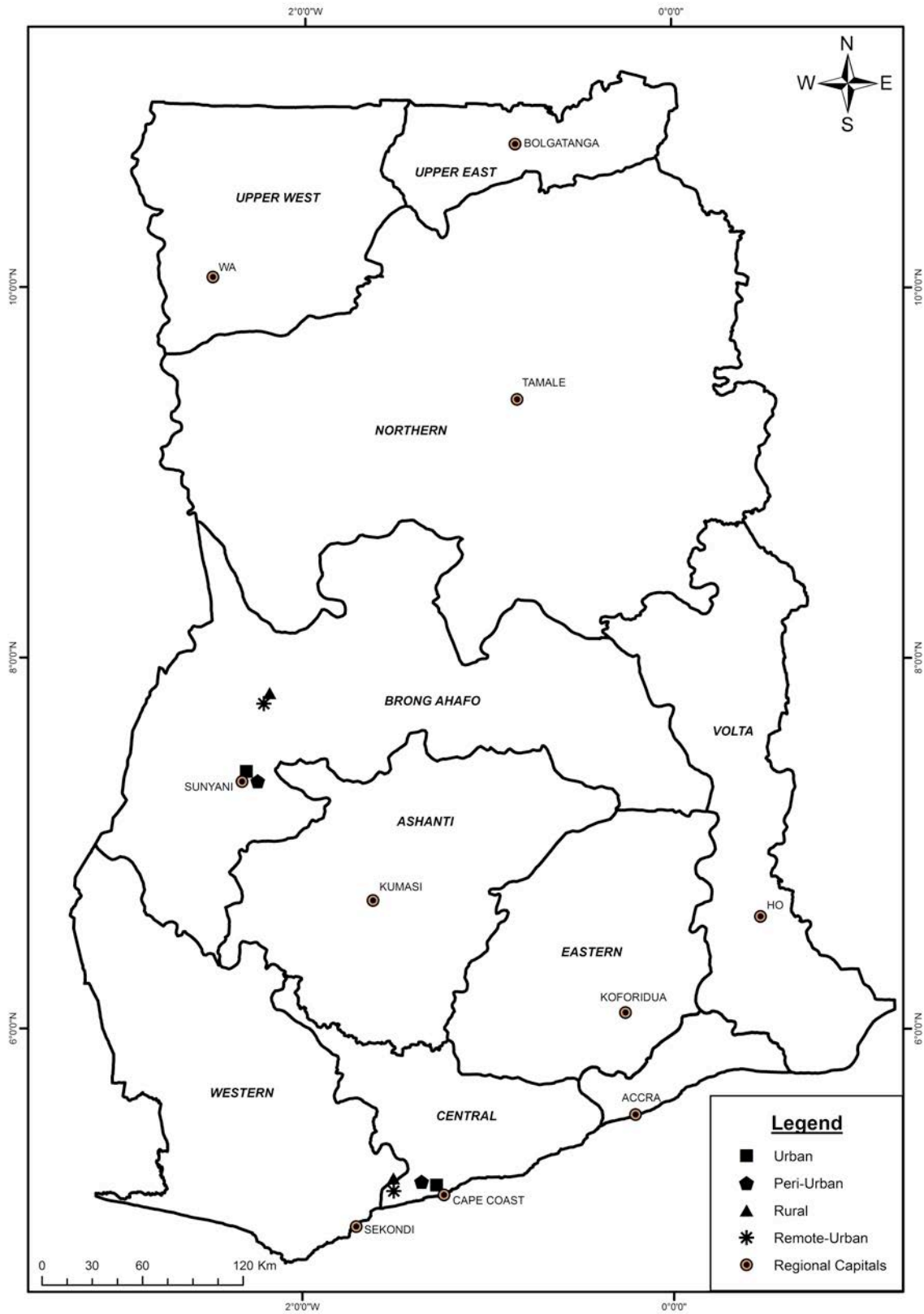


Figure 1. Map of Ghana showing study areas.

According to the 2000 Ghana Population and Housing Census, the total population in our rural-with-services and remote rural sites was estimated at not exceeding 1,000 and 500 respectively. The major economic activities in all the sites are farming (cultivation of cash and food crops) and trading (generally retail business) with some formal-sector employment in the urban areas. The roads in the urban sites were predominantly tarred and motorable all year round.

Additionally, telecommunication networks are widely available in all urban sites and also (but with relatively poor reception) in the rural areas. Marked urban/rural disparities also exist in the availability of some social services such as schools, potable water and health facilities. Those living in rural areas rarely have access to government and private healthcare facilities, potable pipe borne water and an electricity supply.

#### *Data collection methods*

The Children, Transport and Mobility study started in 2006 and ended in 2009. Qualitative data on young people's mobility in relation to health, education, livelihoods and transport were collected in all the eight study sites. The first phase of fieldwork in Ghana involved 18 'child researchers' who received training to conduct peer research on mobility in their home communities, under supervision from adult academics (Porter et al, 2010a; 2010c; Robson et al, 2009; Hampshire et al, 2012, forthcoming). Subsequently, adult academic researchers conducted three hundred and twenty three (323) individual in-depth interviews with children (8–18years), parents and key informants, together with 31 child focus-group discussions. The qualitative data analysed in this paper was derived from the health interviews of children aged 8–18 years (N=160) and the health component of the focus-group discussions. Additionally, a questionnaire survey was administered to 1005 young people aged 8-18 years across all the eight study sites. A sample of approximately 125 respondents per settlement was obtained by randomly selecting one child per household for interview (households were selected at random along transects within each settlement). The quantitative analysis in this paper is based on the responses to the health issues captured in the questionnaire.

The interviews and questionnaires were conducted in local languages (usually Twi or Fante), to ensure good comprehension. Survey data were cross-checked for consistency and then analysed using SPSS. Mobility and economic constraints as barrier to children's health-seeking emerged as one of the important themes in Ghana.

Most of the 1005 survey respondents were under 18 years, the age of legal majority in Ghana, and defined under 'The UN Convention on the Rights of the Child (UNCRC) as 'children' (OHCHR, 1989). In contrast, the WHO distinguishes between 'children' (0-9 years) and 'adolescents' (10-19 years) (WHO, 2003). In this paper, we use the terms 'children' and 'young people' interchangeably to refer to study participants aged from 8-18 years. While we acknowledge that our samples are not necessarily fully representative of the two ecological zones surveyed in Ghana, they do cover a range of age, gender and schooling status (as well as religious and ethnic affiliation and socio-economic status) within each study settlement: Table 1.

**Table 1: Background data of respondents**

| Background data |              | Frequency   | %            |
|-----------------|--------------|-------------|--------------|
| Sex             | Male         | 475         | 47.3         |
|                 | Female       | 530         | 52.7         |
| <b>Total</b>    |              | <b>1005</b> | <b>100.0</b> |
| Age             | 8-11         | 244         | 24.3         |
|                 | 12-15        | 548         | 54.53        |
|                 | 16-18        | 213         | 21.17        |
| <b>Total</b>    |              | <b>1005</b> | <b>100.0</b> |
| Settlement type | Urban        | 254         | 25.3         |
|                 | Peri-urban   | 293         | 29.2         |
|                 | Rural        | 256         | 25.5         |
|                 | Remote rural | 202         | 20.1         |
| <b>Total</b>    |              | <b>1005</b> | <b>100.0</b> |

Source: Child Mobility Survey

#### *Common illness and health facilities in study sites*

Common illnesses widely cited by children and parents as affecting children in the study sites were malaria, headaches, common cold, cholera, tuberculosis, fever, convulsions, skin rashes and body pains.

A range of health facilities (formal and informal sector) are available in Ghana; however, depending on varied factors, many people use more than one health service, either at the same time or sequentially. Urban dwellers have access to a wide range of health facilities such as government and private hospitals, clinics, pharmacies, drug stores, traditional and faith healers. For instance, according to a 15 year old boy urban dweller in the forest zone:

The health facilities in this environment are many, ranging from the hospitals, clinics, pharmacies and the numerous drug stores. There are also some drug peddlers who come to our markets and sell herbal drugs. Urban dwellers indeed have a wide range of options to choose from when it comes to accessing health facilities.

Relative to the various health facilities available in urban centres, rural dwellers are typically much more limited in their choice of health services. In both peri-urban and rural settlements, the dominant health facilities are drug stores, drugs from peddlers, traditional and faith healers. In the rural and remote rural areas, inhabitants often resort to herbal self medication, faith healers or unlicensed drug sellers/peddlers. An 18-year-old young woman residing in a rural area remarked:

It is when people are seriously sick that their relatives take them to the regional hospital which is located far away from here. Vehicular flow is also irregular due to the bad nature of the road. In such instances the family members have to arrange for a car in the city to come and pick the patient or wait till a car comes here which is not predictable. There is no drug store in this village but there is a kiosk here which more or less serves as a shop where one can buy foodstuffs, vegetables, provisions and pharmaceuticals. Honestly, people go to the kiosk because they do not have money to go to hospitals. Added to these are issues of transport delays and transport fares.

#### *Usage of health services*

People generally seek various forms of health care depending on factors such as religious beliefs, cost as well as the perceived serious consequences of the illness. Besides, there are other people who usually do not patronise health services when they fall ill. The survey respondents were asked to indicate their most recent use of any of the health facilities available in their communities. It emerged from their responses that only a quarter (24.8%) of respondents had used a health facility within the preceding 12 months: Table 2.

#### *Mode of transport to health services*

Of the 249 children who indicated their mode of transport to health services, it emerged that the most common mode of transport for children to reach health facilities was (in order): taxis, walking, and public bus (trotros/minibus): Table 3. Taxis were the dominant mode of transport to health facilities for children in urban, peri-urban and remote rural settlements, while significant numbers from



all settlements types also walked to health facilities. The use of taxis to reach a health facility by rural dwellers is associated with undue delay and exorbitant fares.

**Table 2: Recent usage of health services: children aged 7-18 years**

| Most recent use of health services      | Frequency   | Percentage   |
|---|-------------|--------------|
| In last month                           | 116         | 11.5         |
| In last 12 months but not in last month | 134         | 13.3         |
| Over a year ago                         | 548         | 54.5         |
| Never                                   | 145         | 14.4         |
| Don't know/ Cannot recall               | 62          | 6.2          |
| <b>Total</b>                            | <b>1005</b> | <b>100.0</b> |

Source: Child Mobility Survey

**Table 3: Mode of transport to health facilities by settlement type: most recent visit by children aged 7-18y**

| Settlement   | Mode of transport N (%) |                 |                   |                | Total (N)         |
|--------------|-------------------------|-----------------|-------------------|----------------|-------------------|
|              | Walking                 | Public bus      | Taxi              | Motor bike     |                   |
| Urban        | 42(42.0%)               | 1(1.0%)         | 57(57.0%)         | 0(0.0%)        | 100               |
| Peri-urban   | 23(27.1%)               | 4(4.7%)         | 57(67.0%)         | 1(1.2%)        | 85                |
| Rural        | 14(36.8%)               | 13(32.4%)       | 10(26.4%)         | 1(2.6%)        | 38                |
| Remote rural | 5(19.2%)                | 5(19.2%)        | 16(61.5%)         | 0(0.0%)        | 26                |
| <b>ALL</b>   | <b>84(33.7%)</b>        | <b>23(9.2%)</b> | <b>140(56.2%)</b> | <b>2(0.8%)</b> | <b>249(100.0)</b> |

Source: Child Mobility Survey

### *Constraints children face in accessing health facilities*

The availability of a health facility does not automatically lead to patronage. People's decision to patronise a health facility is influenced by a number of factors such as distance, economic constraints, cultural beliefs and the severity of the illness. Over half (56.6%) of respondents overall indicated that they faced difficulties or constraints in getting to a health facility. There was a marked urban-rural disparity in perceived constraints, with nearly three-quarters (72.2%) of children from remote rural settlements reporting difficulties in reaching or using health services, compared with just over a third (34.8%) or urban-dwelling children: Table 4,

The most commonly identified constraints are also indicated in Table 4. The major ones identified were mobility related factors such as too difficult (13.0%)

or too expensive (2.7%) to travel there, as well as high cost in accessing health care (29.9%). Additionally, 4.3% of the respondents preferred an alternative treatment for their ailments.

**Table 4: Reported constraints children face in accessing health facilities (children aged 7-18y)**

| Settlement                  | Constraints reported by children in accessing health facilities (%) |                               |                           |                    |                              |
|-----------------------------|---|-------------------------------|---------------------------|--------------------|------------------------------|
|                             | None  | Too difficult to travel there | Expensive to travel there | Fees too expensive | Prefer alternative treatment |
| Urban (N=224)               | 65.2  | 3.9                           | 0.9                       | 26.8               | 1.8                          |
| Peri-urban (N=273)          | 43.2  | 8.0                           | 2.9                       | 33.7               | 2.6                          |
| Rural with services (N=218) | 33.5  | 19.3                          | 5.5                       | 28.4               | 6.4                          |
| Remote rural (N=164)        | 27.8  | 24.9                          | 1.2                       | 29.6               | 7.7                          |
| <b>ALL (N=884)</b>          | <b>43.4</b>   | <b>13.0</b>                   | <b>2.7</b>                | <b>29.9</b>        | <b>4.3</b>                   |

Source: Child Mobility Survey

#### *Mobility constraints to accessing health facilities*

It can be seen from Table 5 that while most urban children who participated in the study (97.0%) live within 5 kilometres of a healthcare facility; this is the case for only a third (36.8%) of those living in rural settlements with basic services and just 3.8% of those in remote rural settlements. Indeed, nearly two-fifths (38.2%) of remote rural children live more than 20km from the nearest healthcare facility. Even though hospital or clinical treatments were often their preferred choices, rural dwellers were, in most instances, compelled to wait for some days or weeks to access these services due to distance and mobility constraints.

The difficulties in accessing health services due to distance are more pronounced in rural settlements than in urban areas. Due to irregular flow of transport and high transport cost, rural dwellers are often compelled to self medicate or seek health care from informal-sector healers, such as herbalist or faith healers. The story of this 15-year-old girl residing in a rural settlement in the coastal zone of Ghana illustrates this:

When people are sick, they are either taken to a health centre which is more than 20 minutes drive from here for treatment. In most instances, depending on the regularity of vehicle flow, one can easily get there or find it difficult doing so. Due to this only serious cases are reported to the clinic. In some emergency circumstances, people may not go there at all and resort to self medication.

**Table 5: Settlement type and distance to health facility (Km)**

| Settlement          | Distance to health facility (Km) |                  |                  |                |                 | Total      |
|---------------------|----------------------------------|------------------|------------------|----------------|-----------------|------------|
|                     | 0-5                              | 6-10             | 11-15            | 16-20          | 21 and above    |            |
| Urban               | 94(97.0%)                        | 1(1.0%)          | 0(0.0%)          | 1(1.0%)        | 1(1.0%)         | 97         |
| Peri-Urban          | 41(48.3%)                        | 29(38.8%)        | 11(12.9%)        | 0(0.0%)        | 0(0.0%)         | 85         |
| Rural with services | 14(36.8%)                        | 4(10.5%)         | 8(21.1%)         | 2(5.2%)        | 10(13.1%)       | 38         |
| Remote rural        | 1(3.8%)                          | 3(11.4%)         | 9(30.7%)         | 4(15.4%)       | 10(38.2%)       | 26         |
| <b>Total</b>        | <b>150(60.9%)</b>                | <b>41(16.7%)</b> | <b>27(11.0%)</b> | <b>7(2.8%)</b> | <b>21(9.0%)</b> | <b>246</b> |

Source: Child Mobility Survey

This situation is further highlighted by this account from a 10-year-old old boy in a rural settlement:

I fell sick about one year ago. I informed my mother who rushed me to a herbalist in this community for treatment. He gave me a bitter concoction to drink and I felt better after few hours. My mother did not pay anything as cost of treatment. The other health facility is a health centre located in a town which is about seven kilometres away. Access is somewhat difficult due to transport. We have to walk for about 40 minutes to another village and sometimes have to wait for a vehicle in that village to take us to the health centre. I am pretty sure my parents will sent me to the herbalist again for treatment should I fall sick again because my parents will not have the money to pay for hospital treatment.

A 14 year old male rural dweller in the forest zone had this personal experience to share:

I carried a heavy load of maize from the farm to our house for sale about three weeks ago. The distance from the farm to the house was about one hour walk. I felt some severe pains all over my body the following day so I reported it to my father for him to take action. He gave me some pain

killers he had bought some time ago because there is no health facility available in our community. The pains became unbearable the following morning so my father was compelled to take me to a clinic which is more than one hour drive from this community. In spite of the pain, we had to wait for more than one hour for a car.

### *Economic constraints*

Although Ghana is classified as a middle-income country (GSS, 2010), poverty was a major issue in all the study sites. In almost all settlements, the cost of seeking health care played a significant role in the choice of health facility. As clearly depicted in Table 4, almost a third (29.9%) of child respondents cited high cost of hospital or clinical care as a major deterrent to health-seeking. According to an 18-year-old urban dweller, people prefer to seek health care from local drug stores due to the cost involved in seeking health care from a medical doctor. In one of the FGD sessions, a 16 year old boy urban resident shared his experience in this regard. According to him:

My mother sends me to a herbalist who usually does not charge for the services rendered. Seeking health care from the herbalist is cheaper than going to a hospital or buying drug from the drug store.

A 16-year-old boy in one of the urban centres was of the view that the rich–poor differential has a role to play in the choice of health facility. He asserted that:

The rich in this community report their illness to the hospital but the poor depend on home remedies. Only few people resort to the drug store for common illness. It is not difficult to access home remedies but more difficult to use the hospital due to the high cost involved. The hospital bills scare people from using the facility.

These experiences clearly signal that economic constraints have a substantial influence on children’s ability to access health care. Transport owners, in general, prefer plying roads that yield the highest return on their investment. Because rural areas are not heavily populated, have poor road infrastructure and are located distant from urban areas, very few and usually old cars ply such roads. Transport services are therefore irregular, associated with high or exorbitant fares and overloaded with passengers and load. With the precarious transport situation in rural Ghana, ailing children in our rural study sites were compelled to self medicate, delay in reaching a health facility or pay high transport fares to access health care. The seemingly “expensive” consultation and hospital bill,

especially for those who have not registered for the National Health Insurance Scheme (NHIS) also deter some children from patronising health services.

### *Beliefs*

In Ghana, as in other countries, cultural/religious beliefs play a significant role in the choice of accessing health facilities. Some of our respondents were of the view that some illness are purely caused by spiritual forces and will require spiritual interventions. Other interviewees were of the opinion that clinical care is not complete unlike local herbal preparations which cures illnesses permanently. A 14-year-old pupil explained:

Herbs cure illnesses completely. It usually takes longer time to fall sick again if current illness was treated with herbal preparations. Conversely, one is likely to return to the hospital after few months for treatment with either the same or different illness.

### *Severity of the illness*

Apart from the cost and beliefs, the severity of the illness also influences the choice of health facility to be used. It emerged from this study that hospitals are usually the first point of call with serious complications and accidents that will require surgical operations. A 15-year-old female peri-urban respondent made this observation:

Hospitals have all the facilities for the treatment of most illness. Health officers in the hospitals also attend to serious or emergency cases. Hospitals are staffed with qualified personnel to treat and prescribe the appropriate drugs. People normally hire taxis to transport patients to the hospital on emergency or referral cases. Those who seek treatment from hospitals are of the view that the hospital provides quality medical services than the other health service providers.

### *Role of improved telecommunication in enhancing access to health services*

Respondents identified improved telecommunication networks (mobile telephony) and transport systems as two most important interventions in improving their access to health facilities. Many rural settlements in Ghana are classified as “out of coverage areas” because they do not receive mobile telephony networks; however, even in our remote rural study sites, the respondents had identified “special spots” (often on hills or trees) where they make or receive phone calls. They use these spots to contact transport drivers

(mainly taxi drivers) in urban centres and telephone them for assistance in emergency situations such as birth deliveries and domestic accidents involving children. Their worry was the poor road networks in rural areas which in most instances delay the arrival of the taxis.

### *Discussion and conclusion*

The wealth of a country is positively related to the health of its citizens (Republic of Ghana, 2007). It is generally agreed that the human resources of every country determines the rate, pace and quality of development in the country. The Government of Ghana, in collaboration with its development partners and Non-Governmental Organisations are constantly investing in the health sector of the country. The expansion of health training institutions, immunisations and increased public education on basic health issues attest to the significant efforts Ghana is making in improving the general health status of her citizens as well as the achievement of the Millennium Development Goals by 2015.

This study has brought to the fore that children patronised (or not) various health facilities for varied reasons, the most influential of which were economic and distance constraints. Even though hospital or clinical treatments were their preferred choices, children were often denied access to these facilities because of a lack of adequate transport or financial resources. As a coping strategy, some of them resort to readily available herbs, medicines purchased from general stores or peddlers who occasionally visit their communities for self medication.

Improved telecommunication (mobile telephony) and transport services offer a ray of hope to residents in rural Ghana. The sector ministries responsible for roads, transport and communication are being entreated to hasten attempts at modernising Ghana's road networks and telecommunication to save the lives of rural dwellers from illness and also put the country in a firm footing in its quest to achieve the Millennium Development Goals.

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## Moving on two wheels: A comprehensive study on bicycle behaviour among Ghanaian children.

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### Abstract

*Background:* Children in most Sub-Saharan African countries are faced with severe mobility constraints in their quest to access schools, health care and other places important to their well-being. Although bicycles apparently offer possible solutions to these problems as a relatively low-cost, Non-Motorised Transport (NMT), the potential of bicycles to address some of the transport needs is largely unexplored in most parts of Africa with South Africa being a notable exception. . The study investigated the effects that the attitudes of parents, teachers, and peers may have on this.

*Methods:* The study was conducted by fieldworkers in eight communities within two ecological zones (forest and coastal) in Ghana. Both qualitative and quantitative data collection were employed within the context of a cross-sectional study design. Questionnaires, focus group discussions and in-depth interviews were conducted in all the study communities. A total of 1005 questionnaires were administered and approximately 400 qualitative interviews conducted.

*Results:* The study revealed that 30% of households across both ecological zones owned bicycles. However a much higher proportion of children - 68.6% - used bicycles ranging from everyday use to once per week. . Bicycle use was mainly for recreation and running errands. Gender was important in shaping bicycle use among children: while 84.1 per cent of boys used bicycles, only 55.2 % of girls did.

*Conclusions:* Children's use of bicycles is higher than levels of household ownership might suggest. Over two-thirds of children surveyed used bicycles, mainly for recreation and running errands. Attitudes of motorised vehicle drivers, parents, teachers, and peers influence bicycle usage among children with parents' attitude mainly influenced by dangers within the physical environment.

*Key words:* Children, bicycles use, ownership, behaviour, Ghana.

## *Introduction*

Bicycles are a commonly-used form of transport globally. In Western societies, bicycles are still used to address some transport needs; the bicycle remains a principal means of transport to work and for shopping in some countries (Simon, 1996). In the Netherlands for instance, bicycles make up about 27% of all trips, 18% for Germany, Finland and Sweden and 18 % for Denmark (Pucher and Buehler, 2007). In the United State of America, cycling accounts for 1% of all trips and is mostly for recreational purposes and not necessarily transportation (Xing et al, 2010). Bicycle use among children is relatively higher than the national aggregates. An estimated 35% of Dutch (the Netherlands) children use bicycles whilst 20% and 18% of Danish and German respectively use bicycles (Pucher and Buehler, 2007). In the USA, more than 70 % of children between the ages of 5 and 14 use bicycles (NSKC, 2004). Like most non-motorised transport (NMT) equipment, cycling has several advantages over motorised transport (MT) in terms of cost, environmental friendliness and physical activity of users. Thus, calls to develop NMT as an appropriate and sustainable strategy for developing countries has often focused on cycling and walking (Kipke, 1988; Replogle, 1988).

Various studies have shown that investing in low-cost NMT in developing countries could enhance access to economic opportunities and social amenities in both rural and urban settings (Heyen-Pherson, 2005). However, apart from some Asian countries, bicycles are very under-used in many developing countries, particularly in Sub Saharan Africa. Whereas ownership of bicycles in China is well over 50%, a World Bank estimate suggests that only about 3.5% of sub Saharan Africans own bicycles (Grieco *et al.*, 1994; World Bank, Sub-Saharan African Transport Program, 1990). Literature on bicycle use in Africa is sketchy, and the few existing studies suggest substantial intra- and inter-country variation in bicycle usage (Howe and Barwell, 1987; Howe and Dennis, 1993). Data from Ghana suggest that bicycle usage is predominantly confined to the three northern regions. The Millennium Cities Initiative (MCI) and Vale Columbia Centre (VCC) reports that the social acceptance of bicycle use appears to be spreading to the southern parts as well (VCC and MCI, 2008). Figures from the 1980s show that out of the national stock of 200,000 bicycles, 34.2% were in the Northern Region, 43.8% in the Upper East and West Regions and 0.7% in the Greater Accra Region (Howe and Dennis, 1993). Several distinct factors may influence different bicycle cultures in different societies (Lorenc *et al.*, 2007). Besides South Africa, factors influencing bicycle cultures are yet to be comprehensively studied in most sub Saharan countries including Ghana.

In Africa, many children face severe mobility constraints in accessing education, health and recreation (Porter 2010; Porter et al, 2010a; 2010b; 2011). Children in some Ghanaian communities walk long distances to school, with important implications for school going age, absenteeism and early drop-out (Porter et al, 2010a). To what extent can bicycles help to address this important transport gap? In South Africa 23% of school children, the majority of whom attend rural and farm schools, walk more than 6 kilometres on a single trip to and from school. The Shova Kalula bicycle project was introduced in 2001 by the Department of Transport and aimed at distributing 1 million bicycles by 2010 to improve rural accessibility to education resource centres (Department of Transport, 2007). As part of the Shova Kalula Project, over a thousand bicycles were distributed in October 2008 to children living in Inkangala who had to walk great distances to school (Makapela, 2008).

A qualitative study conducted in Ghana over 15 years ago suggested that bicycle usage among children in two urban slum communities was influenced by different socialization patterns (Grieco *et al.*, 1994). However, few systematic quantitative studies to describe bicycle behaviour and also test the association of various socio-demographic variables and bicycle have been undertaken. Future interventions by governments and/or Non-governmental organisations will greatly benefit from an in-depth understanding of bicycle use within unique social and cultural contexts.

### *Methods*

#### *Study population and sample size*

This paper draws on data from a large research project on child mobility designed and led by the University of Durham, in collaboration with the universities of Cape Coast, Ghana, Malawi and CSIR, South Africa [see [www.dur.ac.uk/child.mobility/](http://www.dur.ac.uk/child.mobility/)]: Details of study design, data collection and data analysis (where this relates to Ghana) are provided elsewhere (Porter, 2010 ; Porter et al 2010a, b, c, d; Porter et al, 2011 in press; Robson et al, 2009).

Briefly, the study in Ghana involved 1005 children aged between the ages of 8 and 18 drawn from eight communities within two ecological zones. The children were either classified as in-school or out- -of-school. The eight communities used were representative of urban, peri-urban rural and remote-rural communities. Some of the study settlements were nucleated, some partly nucleated, some partly or fully dispersed and some linear.

### *Study design*

Both qualitative and quantitative data collection was employed within the context of the mixed-method study design. Questionnaires, focus group discussions and in-depth interviews were conducted in all the study communities. A total of 1005 questionnaires were administered while 323 in-depth interviews (IDIs) and 31 focus group discussions (FGDs) were held to supplement the quantitative data collected. The IDIs conducted included interviews with 12 key informants (mainly settlement leaders, teachers, drivers and health personnel.), 12 out-of-school children, 12 in-school children, 12 parents and 6 life histories of study participants in each of the 8 study sites. FGDs with in-school and out-of-school study participants were held separately with each group and consisted of up to 10 children. Individuals and households formed the unit of analysis for statistical analysis as appropriate. The quantitative data were analysed using SPSS.

### *Results*

#### *General characteristics of study participants*

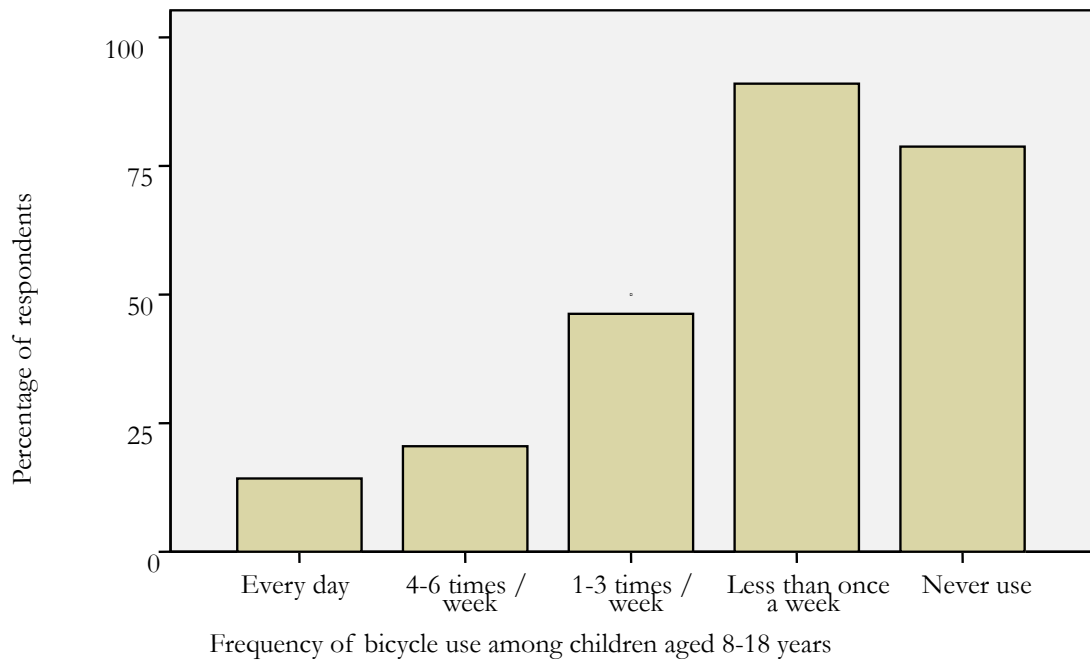
A total of 1005 children participated in the quantitative survey. This number may vary for different elements of the analysis due to missing values. Of these 1005, 528 (52.8%) were females whilst 472 (47.2%) were males. Participants for the quantitative study were all children and young people<sup>1</sup> aged between 8 and 18 years with a median age of 13 years. 870 of the study participants (87.1%) were enrolled in schools whilst 129 (12.8%) were out of school. Study participants were drawn from the coastal and forest ecological zones of Ghana. Distribution of the survey population across the four settlement types was as follows: urban (25.2% of total survey population), peri-urban (29.2%), rural with services (25.5) and remote-rural (20.1)

#### *Bicycle use*

Results from this study showed that 31.5% of the children had never used a bicycle. Of the 68.5% who do ride bicycles, more than half (52.8%) use them less than once a week, while only 8.3% rode bicycles on a daily basis. Frequency of bicycle use among study participants is shown in Fig 1.

Although household ownership of bicycles was generally low(29.8%), the survey data suggest that individual usage among children was considerably higher and in some cases more than 5 times higher (see table 1) than the

<sup>1</sup> The terms 'children' and 'young people' are used interchangeably to refer to study participants.



**Figure 1: Bicycle use among children**

ownership rate, due to loans of cycles from friends or through hiring [locally referred to as kobo-kobo. This is illustrated in some responses from a focus group discussion among the children.

I have no bicycle on my own but I know how to ride a bicycle. I learnt how to ride through hiring bicycles anytime I had money. My grandparents encouraged me to learn how to ride a bicycle. At times they give me money to go and hire a bicycle. They (grandparent) wanted me to know how to ride a bicycle so that they could occasionally ask me to run some errands for them. The furthest distance I ever travelled by a bicycle was about 4km to [nearby] town. I went there to deliver a message on behalf of my grandparents.

[8-year-old in-school boy, coastal peri-urban]

### *Bicycle ownership*

Data from this study revealed bicycle ownership of 29.8% among study participants. However, 21.9% of bicycle owners had non-functional bicycles. Only 16.4% of female headed households owned bicycles while among their male counterparts there was a 36.0 % ownership rate. Rates of bicycle ownership among the two ecological zones are shown in figure 2.

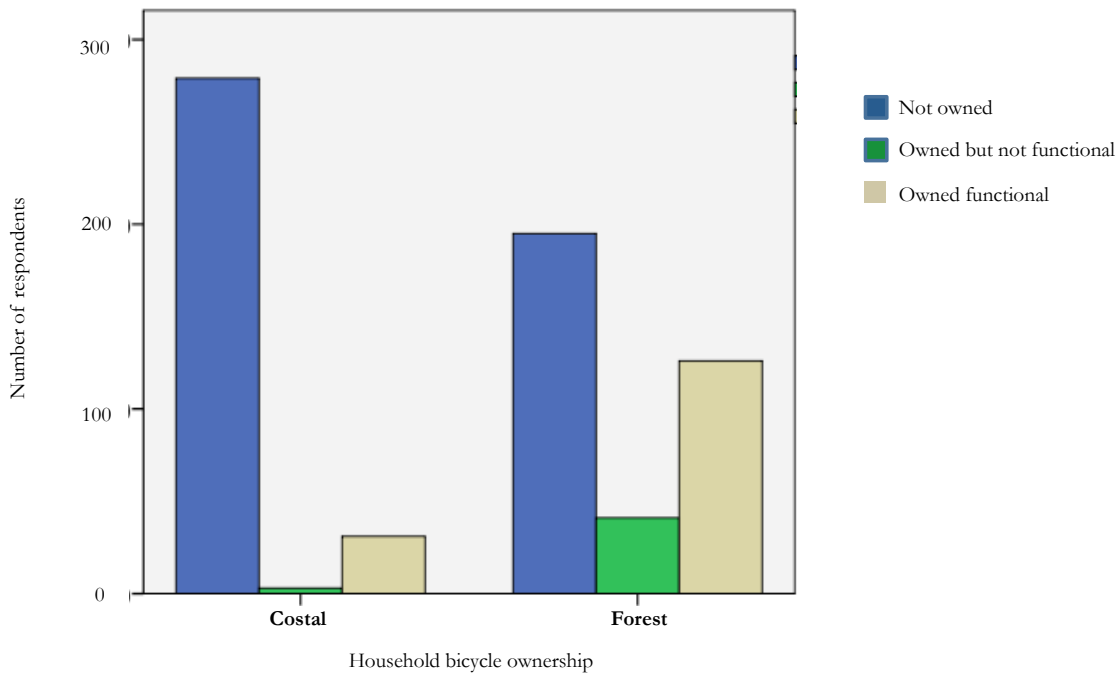


Figure 2: Household bicycle ownership in the two ecological zones

#### *Determinants of bicycle usage and ownership*

Chi square tests were used to analyse the relationship among bicycle ownership/usage settlement type, age and sex. The results are summarised in Table 1.

#### *Bicycle use and gender*

Bicycle use among males and females is shown in table 1. Our data showed that bicycle usage is significantly associated with gender i.e. bicycle use was much higher among boys than girls ( $p < 0.0005$ ).

Qualitative analysis of our results suggests that several factors may explain the significantly higher usage of bicycles among boys. The first is parents' attitudes towards their girl-children riding bicycles. The following is a quotation from a 41 year old father of two who also fosters 3 nephews and a niece:

My three nephews know how to ride a bicycle. They learnt it through hiring of bicycles from this community. My niece also can ride a bicycle. She also learnt it through hiring of bicycles in the community..... I am more worried about girls who ride bicycles than boys because they are not always as courageous as boys and therefore there is the tendency for girls to be involved in accidents when riding bicycles.  
[urban forest zone]

**Table 1: Determinants of bicycle ownership and usage by children aged 8- 18 years**

|                        | <b>Bicycle ownership</b><br>(bicycle owned within the household) | <b>Bicycle use</b><br>(whether the child ever uses a bicycle) |
|------------------------|--|---|
| <b>Sex</b>             |  |   |
| Male                   | 29.7 %*  | 84.1 %***   |
| Female                 | 29.6 %*  | 52.2 %***   |
| <b>Settlement type</b> |  |   |
| Urban                  | 13.7% ***  | 70.0% **  |
| Peri-urban             | 33.8% ***  | 74.7%**   |
| Rural with Services    | 38.3% ***  | 63.5%**   |
| Remote rural           | 34.4% ***  | 64.4%**   |
| <b>Age group</b>       |  |   |
| 8-11                   | 30.5%  | 53.5 % ***  |
| 12-15                  | 29.8%  | 70.6%***  |
| 16-18                  | 36.5%  | 80.8%***  |

*P(Chi<sup>2</sup>) values: \* <0.05, \*\*<0.01; \*\*\*<0.005*

Similarly, the children also gave responses to suggest that their riding behaviour is influenced by the attitudes and perceptions of their parents.

I ride it around this area and to places where there are no busy roads. I learnt to ride at school from my friends. I got hurt once when I was learning and my father asked me not to ride it again because bicycle riding is for boys and not girls. I still learnt it anyway. I don't own one personally; I hire one when I want to ride.  
[18-year-old out-of-school girl coastal urban]

My parents always warned me against riding a bicycle because according to them a female is not supposed to ride a bicycle. As a female, I prefer the type of bicycle without a crossbar because it is easy to get on the seat or come down from the seat.  
[17-year-old in-school girl coastal urban]

The perceived physical vulnerability of girls, particularly in relation to reproductive health, often underpinned disapproval of girls riding bicycles.



I think bicycles are good means of transport for boys because it keeps them busy and also make them available in the community at anytime. Bicycles are not good means of transport for girls because according to one of my friends if a girl rides a bicycle very often she may not be able to give birth in future and I believe her story.

[17-year-old girl, coastal urban]

It is not good for girls to learn how to ride bicycles because girls are delicate and when they ride it they can become all muscular like the boys or they might fall down and hurt themselves. With the boys it is good for them to learn how to ride since they are hardier. Also they can use it to run errands.

[16 year old out of school girl, coastal rural]

Societal definition of roles for boys and girls also played a vital role in relegating girls to the background when bicycle usage is involved. The perception that boys should be outgoing, with girls tagged as home-makers with limited strength and resources, is suggested by a respondent as the reason why it is not too important for girls to learn to ride bicycles:

It is good for boys to know how to ride it helps to shorten distances. If he knows how to ride he can send it to the school, farm and everywhere. For the girls it is also good but it is not a must that they know to ride, because if let say the maize mill here breaks down she can ride the bicycle and send her maize to the next village for grinding if her husband has one otherwise she has to walk. It is important for girls to learn to ride but for boys it is a must because as for the females even if they learn to ride, they will not get the money to buy a bicycle, even if they have the money they will not buy it since they usually do not like riding it as the males do and even if they ride they just ride it around they do not send it on long distances. They do not have the strength to ride long distances. Even if they have the strength, theirs is not like the men they therefore cannot have the strength to ride to places like [town 20km away]

[18-year-old out-of-school boy, forest rural]

### *Age and bicycle use*

As noted earlier, this study involved children aged between 8 and 18 years with a median age 13.5 years. Study participants were categorized into three age categories (see table 1). Bicycle usage was significantly different among the various age categories ( $p < 0.0005$ ) with older children using bicycles more often than younger children. However, as might be expected, age of children is not

associated with ownership of bicycles within households ( $p < 0.155$ ) since about 90 per cent of cycles are owned by adults within the household, and not children. However in almost all households with functional bicycles, they were available for use by the children.

#### *Settlement type, bicycle ownership and usage*

The study investigated the association between settlement type (i.e. urban, peri-urban, rural with services and remote rural) and bicycle usage. A significant association was found between settlement type and bicycle usage ( $p = 0.018$ ). The highest and least bicycle usage was found among peri-urban and rural with services respectively: Table 1.

The overall bicycle ownership among the study population was 29.8%. Ownership among urban, peri urban, rural with services and remote rural settlements was found to be 13.7%, 33.8%, 38.3% and 34.4% respectively. However, figures of bicycle usage in the various settlements did not concur with ownership. For instance, regardless of the low ownership of bicycles in urban settlements (13.7%), usage was relatively high (70.0%) (Table 1). The data also showed that families that owned cars were more likely to own bicycles ( $p < 0.048$ , data not shown)

#### *Use of bicycles for different purposes and individuals' motivations*

Choice of mode of transport varied among study participants depending on the activity/transport needs of the respondent. For instance the study revealed that the main mode of transport used by children in the study area to access education is walking (98 %) while walking accounts for only 32 % in accessing healthcare, coming second after the use of taxi cabs (56.2 %). Only 1% of the respondents used bicycle to access school whilst none of the respondents used a bicycle as the main means of transport to assess health care. Bicycles were however indirectly used to assess healthcare since they are sometimes used in emergency situations to commute to the nearest taxi terminal to hire a taxi.

Bicycles are a very good means of transport [for boys] to use. For example in cases of emergency in the absence of cars the bicycle can be used to go and get help. Last year one of my cousins got sick and needed to be rushed to the hospital if it had not been for the fact that there was a bicycle at home and someone who knew how to ride something bad could have happened. Because of the bike when it happened one of my relatives rushed and rode the bike to the station and got a car that came to pick the sick person

to the hospital I believe if he was to walk to the station he would have taken a longer time to reach and the person could have died.  
[17-year-old out-of-school girl, coastal peri-urban]

The study revealed that 98 % of all bicycle usage is for running errands over distances ranging between some few metres to 8km and for recreational purposes.

In terms of motivations, 30.6 % of child bicycle-users said that they like riding bicycles because it aids them in getting to places faster than walking. This was closely followed by 21.1 % who simply said they were thrilled by the speed of bicycles and so they took to riding it. 14.1 % said they simply enjoyed riding it whilst 11.2% indicated that they rode bicycles because it helped exercise their bodies. Other reasons children gave for choosing to ride bicycles included: it being a cheap form of transport (1.5%) and being useful for carrying loads and shopping generally (5.1%).

If I knew how to ride I could have used it for errands and it would have made my journey easier. I could have even ridden it to my hometown which is just here and it would have helped me in saving money.  
[14-year-old out-of school girl, coastal urban]

Bikes are good means of transport for both boys and girls. It can enable a child to move faster to other places to deliver important messages. It is also convenient to use bicycles to all kinds of places.  
[15-year-old in-school girl, coastal, peri-urban]

Usually if my mother want to send me and it was urgent, she could borrow one for me..... My mother borrows from my sister's husband who owns one.  
[16-year-old out-of-school girl, forest urban]

I learnt to ride because I could use it if I am sent [on an errand]. My brother taught me by pushing me on a hill down slope.  
[13-year-old in-school girl, forest rural with services]

As noted above, among school-going child respondents, fewer than 1% used bicycles to travel to school. Some school authorities, notably in the urban centres, had placed a total ban on the use of bicycles to school for fear of their

premises being used as hiring centres for these bicycles as these teachers indicate:

None of the students come to school on bicycles. We won't even allow that. If we do allow students to bring bicycles to school we will be soon faced with the problem of these students hiring out the bicycles to their colleagues on campus and instead of staying in the classrooms to learn, the students will prefer riding the bicycles. We will definitely not allow it.

[24-year-old male teacher in a coastal urban school]

Bicycle riding is not allowed on campus and children strictly adhere to this law.

[26-year-old male teacher from coastal urban school]

However, some other schools, while restricting the use of bicycles on campus, allow for children to travel to school by bicycle.

When they come to school on bicycle, we have a designate place where they are supposed to park their bicycle and are not allowed to ride their bicycle around on campus.

[35-year-old male SHS teacher Forest urban school.]

A few teachers had a more liberal attitude towards bicycle riding and encouraged the use of bicycles especially by students who had to travel long distances to get to school, with some noting that it is the least intervention that can be done in assisting children in accessing education, even if there may be some drawbacks of cycling for children:

...But generally provision of bicycles to those who travel from outside the settlement will improve their schooling tremendously. There is one girl who rides a bicycle from one of the surrounding villages so I think provision of bicycles will benefit both males and females equally.

[30-year-old male teacher, coastal peri-urban]

The students who use the bicycles complain of tiredness. They pass through the rains and the sun as well and there are all inconveniences. The dust especially between the community and the junction is also an enemy to them. A teacher who uses a bicycle for his distance education in UCC once boarded a vehicle with the bicycle because he was tired. So if an adult is tired, then the

students will not have it easy. The children are not late to school. They set off early on their bicycles so they get to school early. But you always see them sweating and tired. They sweat at times make the books even wet.

[49-year-old male Headmaster, coastal peri-urban]

### *Attitude of drivers*

The general attitude of drivers towards bicycle riding among children is negative, since they perceive child cyclists as dangerous road-users, though most agree that cycling should be encouraged among children (and most allowed their own children to cycle). This attitude has been informed largely by their experiences of child riders with whom they unwillingly share the same road network because of the general absence of bicycle lanes in all the study areas. To the majority of drivers, the children were a nuisance to their work and had no legitimate right to be sharing the road space with them:

...the cyclist also disturb us on the way. They do not check whether there is a vehicle approaching and by the time you (the driver) realise they are right in front of you. Just last week a young boy held iced water in one hand and rode a bicycle at the same time. He quickly dashed across the road without checking if there was a vehicle close by. Fortunately I had already spotted him and was able to stop just in time to avoid hitting him. I just moved on quietly away without commenting on the incident even though on lookers at the scene started to chastise the boy.

[25-year-old driver, forest peri-urban]

In Ghana, as in many other countries (such as the USA, Kenya among others), there seems to be a high perception of danger associated with cycling on the road. Rissel et al. (2002) contend that, due to safety concerns, many potential cyclists do not cycle on the road. Others also attribute this to the lack of safety accessories such as reflectors and lights to warn other road users especially motorised drivers of their presence on the road.

I do not like children cycling and this is because some of these children ride in the night and their bicycles do not have any light. If you are not careful you can kill someone. The other time, I nearly knocked one of them down.

[33-year-old taxi driver, coastal urban]

Cycling on the road is in fact dangerous no matter the age of the user. In Ghana, bicycles accounted for 5% road traffic fatalities in urban environment between 2001 and 2005 and 4% in non-urban environment (Afukaar, 2007). In the USA, The National Safe Kids Campaign (NSKC, 2004) reports that the 5-14 year group accounts for approximately 21 % of all bicycle related deaths and nearly half of all bicycle related injury whilst in the Netherlands in the cycling age group of 10-14 face the greatest safety risk because of children often start participating in traffic as solo cyclist at that age (SWOV, 2009).

### *Discussion*

Data on bicycle ownership in Ghana is sketchy. The Institute for Transport and Development Policy's (ITDP) provided an estimate of bicycle ownership in Ghana as 2.9% about half a decade ago (Gauthier and Hook, 2005). However, this estimate actually represents bicycle sales, a variable that may not exactly compare with bicycle ownership. This current study revealed an overall bicycle ownership of 29.8% among study participants' households. However, 21.9% of bicycle owning households owned non-functional bicycles. Taken together, an increase in bicycle ownership over the decade is not inconceivable considering that bicycle ownership is positively correlated with Gross Domestic Growth (GDP) - Per Capita Income (Gauthier and Hook, 2005). Ghana's GDP-per capita has increased from less than \$500 in 2005 to \$1,500 in 2009 (CIA, 2011; UN, 2011). However, GDP-per capita alone may not be enough in explaining the increase in bicycle ownership. In spite of its relatively low GDP-per capita, bicycle sales in Ghana in 2009 were 29 per thousand people, which was higher than bicycle consumption in China that same year (Gauthier and Hook, 2005). Other factors such as promotion of a cycling culture by NGOs and reduction in bicycle import tariffs may have contributed to the observed increase. For instance, a reduction in bicycle import tariffs in Kenya increased bicycle sales from 9.5 in 2001 to 16.4 in 2002 (Gauthier and Hook, 2005).

It is well known that the cycling culture varies among different countries and societies (Simion, 1996 and Grieco *et al.*, 1994). This study found a low bicycle ownership in urban settlements as compared with other types of settlements (peri-urban, rural with services and remote rural). Factors that affect bicycle ownership and/or usage could be socio-economic, cultural or environmental. Unlike most Western countries, cyclists in urban areas of Sub Saharan African countries face several obstacles. Many people feel cycling is unsafe because of the aggression and carelessness exhibited by drivers of trucks, buses and private cars in urban areas (Heyen-Perschon, 2004). In fact, potential cyclists in urban areas of Kenya and Senegal have cited danger as the main reason for choosing other modes of transport (World Bank/UNECA, 1997). Additionally the built

environment in most urban areas lacks adequate space and infrastructure to support cycling thereby creating spatial competition between cyclist and other road users (GODARD, 2000). For instance, most streets in Accra and Kumasi (the biggest cities in Ghana) lack bicycle lanes and hawkers often congest roads making even walking difficult. Culturally, the higher-income groups who are often found in urban areas have a negative image of cycling and view it as a transport tool for poor rural dwellers (Heyen-Perschon, 2004). Thus, one could speculate that although urban dwellers may have the economic means to own bicycles, bicycle ownership remains low in urban areas in Sub Saharan African as seen in this study. It is necessary however to reiterate that bicycles sales do not equate with ownership, and bicycle ownership does not equate with bicycle use.

Although our study found a significant difference in bicycle usage among the four settlements within the two ecological areas, the highest and lowest bicycle usage was not necessarily recorded in settlements with lowest and highest bicycle ownership respectively. Urban settlements which had the lowest bicycle ownership in children's households (13.7%) had a bicycle usage of 70%, which is higher than that of rural with services (63.5%) which had the highest bicycle ownership (38.3%). Thus other factors in addition to bicycle ownership influenced bicycle usage. Evidently, bicycle usage was higher than bicycle ownership in all the settlements studied. This observation brings in to sharp focus the importance of bicycle hiring services and sharing of bicycles in our study population. The actual role of bicycle hiring and sharing warrants further investigation.

Bicycle usage was apparently high (68.5%) in our study population. However a closer look at frequency of usage gave a clearer and more accurate picture of bicycle usage. This study revealed that only 8.3% percent of our study population used bicycles on a daily basis. Thus, although the majority of our study population might have had an occasional experience with bicycles, use is still limited.

This study corroborates others that have found an association between bicycle use and gender (Grieco et al, 1994; Heyen-Perschon,2004; Porter 2003; 2008; Cunha-Jacana, 2006). Culturally defined gender roles in Ghana (and in some other African countries) can limit the social acceptability of bicycle riding for women and girls. Such restrictive gender roles and relations represent an extension of the wider problem of female disempowerment and under-representation in the public sphere, and can contribute to undermining development initiatives such as the introduction of bicycle trailer technology in Northern Ghana (Salifu, 1997).

Consistent with other studies (Xing et al, 2008; Pucher and Buehler, 2007) bicycle use was associated with age in our study. The observation that bicycle use was higher among older children than in younger ones could be attributed to the risk of accident associated with its usage. Regardless of this, it unveils the potential of children using bicycles to access opportunities and social amenities, particularly education. Through the Shova Kalula project in South Africa, a growing number of children who commuted long distances to school now have bicycles to make their journeys shorter and less tiresome (Department of Transport, 2007; Makapela, 2008). However, this study has shown that only 1% use bicycles to commute to school whilst 98% walk to school, regardless of the long distances that may be involved. The use of bicycles to access health care is yet to be harnessed as has been done in some other African communities with mobility constrains (Heven-Perchon, 2004). In our study we found bicycle use for health-seeking was restricted to the use of bicycles to commute to the nearest taxi terminal, to hire a taxi to transport sick individuals to access healthcare. As evidenced by this study, the majority of bicycle use (98%) was for running errands and recreation. A conscious promotion of cycling for a wider range of purposes may be required to influence young cyclists to diversify their bicycle usage.

### *Conclusion*

This study has examined bicycle behaviour among children from two different agro-ecological zones in Ghana. Although a majority of children have had occasional experiences with cycling, routine cycling is still very low in the study regions. This study found the majority of young cyclists ride for fun, with less than 1% of children using bicycles to access education. Apart from an observed increase in bicycle ownership over the last five years, the study also identified a discrepancy between bicycle ownership and usage which seems to be filled by hiring or sharing. Attitudes of parents, friends, teachers and auto drivers have to a large extent shaped the cycling culture among children in the study sites. Bicycle use is more recreational than utilitarian in these sites and efforts to increase cycling culture would be valuable.

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- Brief communications – comprising short reports of interesting or novel findings of a focused nature. They should not exceed 2,500, inclusive of abstract, and include no more than 2 figures or tables and no more than 15 references.
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- Title page
- Abstract and keywords
- Text
- Literature cited
- Footnotes, if any
- Figure legends
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- Figures (sent as separate files)

The spelling of nontechnical terms should be as recommended in the current Webster's International Dictionary. Always spell out numbers when they stand as the first word in a sentence; do not follow such numbers with abbreviations. Numbers indicating time, weight, and measurements are to be in Arabic numerals when followed by abbreviations (e.g., 2 mm; 1 sec; 3 ml).

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appropriate font sizes, line thicknesses, etc. are used to ensure that the Tables and Figures will be legible when published in the Journal's A4 (297 x 210 mm) format. Text within Tables and Figures should use font (Garamond 14), same as in the main text.

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All tables must be cited in the text. Tabular material should be simple and uncomplicated, with as few vertical and horizontal rules as possible. Table titles should be complete but brief. Information other than that defining the data should be presented in footnotes. Footnotes to a table should be typed directly beneath the table and numbered with superscripts (1, 2, 3, etc.). They should not be numbered in sequence with the footnotes in the text. Also, if superscript numbers could be mistaken for exponents, substitute superscript a, b, c, etc.

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All figures must be cited in the text. Figure legends are to be numbered consecutively as follows: Figure 1. . . . , Figure 2. . . . , and should follow the sequence of reference in the text.

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Boys in a project focus group discussion. Photograph © Gina Porter

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