

Cross-Cultural Expressions of Health Indices as Sports Values among Adolescents in Two Anglophone West African Countries: Ghana and Nigeria

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This study investigated adolescents' expressions of health indices as sports values in two Anglophone West African countries (Ghana and Nigeria). Three research hypotheses were tested. The population consisted of all the male and female secondary school adolescents in Ghana and Nigeria. The study used the descriptive survey research design, multi-stage sampling technique, structured questionnaire and a sample size of 2,000 participants (One thousand each from both countries) Parametric statistics of t-test was used to test the hypotheses at an alpha level of 0.05. For pre-test, Cronbach alpha coefficient was used, which gave a value of 0.87 and 0.86 and Sports Participation Scale gave $(r=0.69$ for Ghana) and $(r=0.71$ for Nigeria). The study revealed that there was no significant difference in expressions of all the indices tested; therapeutic, physical fitness and health security and safety maintenance. It was therefore, recommended that government at all levels should make sporting facilities available and accessible to adolescents by constructing new ones and rehabilitating old ones, parents should encourage their children and wards to participate in sports by providing assistance in form of monetary, equipment among others that will sustain their interest and facilitate their participation, sports administrators should be interested in the development of sports by finding means to promote it rather than working towards its downfall and should make sure that funds meant for sports programmes are not diverted to another programme or misappropriated and sporting environments should be made to appear friendly and attractive.

Keywords: sports values; cross-cultural expressions; adolescents; West African countries

Introduction

Culture is a strong binding force in human lives. It exists everywhere and varies from place to place. According to Wilbert (1984), culture is the changing patterns and products of learned behaviour, which consists of attitude, values, knowledge, motor skills, and material objects that are shared and transmitted among members of the society. Its concept is as fundamental as understanding human social behaviour. The term adolescence comes from the Latin verb "adolescere", which means "to grow into adulthood" It begins with the onset of puberty and ends with the assumption of adult responsibilities. Adolescence according to Kreil (1987) begins in biology and ends in culture.

This period begins from about the ages of 12-13 and ends at about 18-19 years. This period coincides with the teenage years. It is a period when remarkable deviations are noticed in the human life cycle. It is also a period of transition in the life cycle of man from childhood to adulthood and it is characterized by storms and stress (Ezoem, 1999).

Sport and human existence cannot be separated because movement and competition have always been part and parcel of human existence. Wilbert (1988) submitted that life is a struggle that only the fittest survives. According to him, sport participation prepares one for the competitive nature of living. Uduk (1993) opined that, man moves, walks, runs, throws, sings, dances and climbs, right from the beginning of the age, and that human beings wherever they exist exercise the body, probably this started with Adam when he ran from the call of God on the account of original sin. It has been observed that sport has gone beyond mere running, jumping and throwing or going after objects just for the fun of scoring goals or making points.

The fact that individuals spend precious hours and hard earned money on sports, while various governments spend millions or even billions of dollars on it are indicators that sports have some values. But does sport have health values? If yes, would these values be the same in the two countries, as both countries were former British colonies and also have similar cultural characteristics? Or would these values differ, as they are two different countries, and due to the fact that culture varies from place to place, regardless of the fact that sport is a

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household phenomenon that cuts across all barriers, be it ethnic, religious, racial, political, gender, age, weight or size? Or would adolescents in Ghana and Nigeria express these values the same way? Consequently, these were some of the questions that prompted the researchers to carry out this study.

Methodology

Nigeria, a West Africa country, came into existence on January 1, 1914, with the coming into effect of the amalgamation of two British-ruled colonies; the northern protectorate and southern protectorates. The purpose of the amalgamation was for the administrative convenience of the British Crown (Crowder 1973). Nigeria has her neighbours as Niger and Chad on the north, the Republic of Benin shares her western border. On the eastern border, Nigeria has the Republic of Cameroon; while on her southern border is the Atlantic Ocean (BBC Focus on Africa, 2000). Nigeria is entirely within the tropical zone. The major rivers in Nigeria are the Niger and Benue. However, Nigeria takes its name from the River Niger, its most prominent physical feature (Times Press Limited 2001).

Nigeria, often called the “Giant of Africa” is richly endowed with ecological and natural resources. The rich and diversity of Nigerian culture are manifestation of socio-cultural differences of the 250 ethnic groups that inhabit the land for ages. Nigeria has a population of over 140 million people, which makes it the most populous Black Country in the world. In short, Nigeria is 2/3 of the black population of the universe. English is the official language (8th All African Games participant’s Guide 2003). Ghana, officially known as the Republic of Ghana, was formerly known as the Gold Coast because of its gold resources. It took its present name from a famous West African Empire called Ghana, which flourished between the 4th and 11th centuries. It became the first black African country to achieve independence in 1957. Accra is the capital (Ghana, 2002). It is located in West Africa and situated on the Gulf of Guinea, bordered to the west by la Cote d’Ivoire, to the north by Burkina Faso, and to the east by Togo. It is the closest country to the Equator (about 500km) and the Greenwich Meridian passes right through it at Tema, close to the capital Accra. For administrative purposes, the country is divided into 10 regions, which are further subdivided into 110 district assemblies. It has a total land area of 238,537sq.km, and stretches from North to South for 672km and 550Km., from east to west (Ghana, 2002). Ghana, the heart of West African history has a population of about 20 million, and is made up of 60 different

ethnic groups. Each group has a distinct language and tradition, as yet with similar cultural beliefs and a contemporary history that unites them as a people. English is the official language. Then the pidgin or street English, which is a mixture of local idioms and haphazard English are spoken mainly by people who have neither mastered English nor any local language in Ghana. The majority of Ghanaians live in small rural communities of less than 5,000 people, where people are more in touch with tradition; Religion plays an active role in the daily lives of Ghanaians. Over 62% of the people are Christians; Muslims make up 12%, while others are 26% (Ghana 2002). The objective of the study was to find out if therapeutic, physical fitness and health security and safety maintenance indices were expressed as sports values among adolescents in Ghana and Nigeria. While the research hypotheses were that adolescents in Ghana and Nigeria would not significantly express therapeutic, physical fitness and health security and safety maintenance indices as sports participation values The result of the study may help to provide a better understanding to various individuals on the values attached to sports by adolescents in Ghana and Nigeria, that is Ghana and Nigeria. The findings may also enable various individuals to discover the values and benefits inherent in sports. The descriptive survey research design was used.

The population comprised of all senior secondary school students (between 13-18 years of age). The study participants were two thousand; one thousand in Lagos, Nigeria, and one thousand in Accra, Ghana respectively, and they were drawn using the multi-stage sampling technique as follows: Stage 1: The judgmental sampling technique was used to select the two Anglophone West African Countries

Stage 2: The judgmental sampling technique was also used to select the state of Lagos, Nigeria, and the province of Accra, Ghana.

Stage 3: The quota sampling technique was used to determine the number of participants according to gender.

Stage 4: The accidental sampling technique was used to select the most easily and readily available participants from each of the selected senior secondary schools.

Stage 5: The fish bowl sampling technique was used to select the ten Local Government Areas in Lagos, Nigeria, and ten district assemblies in Accra, Ghana.

Stage 6: The fish bowl sampling technique was also used to select one senior secondary school from each of the selected ten Local Government Areas in Lagos State and each of the selected ten Districts Assemblies in Accra Province.

The research instruments were the structured questionnaires and the school sports diaries. For pre-testing, the questionnaires were administered to 20 senior secondary school adolescent students in Mokola and Oremeji, Ibadan, Oyo State, Nigeria, and 20 senior secondary school students of Mawuli, and Ho, both in Volta Region of Ghana respectively. The collected data from the pre-test were collated and subjected to Cronbach alpha coefficient to determine the internal consistency of the questionnaire instrument, which gave a value of 0.87 and 0.86 and Sports Participation Scale ($r=0.69$ for Ghana) and ($r=0.71$) for Nigeria respectively, which were deemed high and reliable.

Table 1. T-test result: The difference in the expression of therapeutic index as sports value

Variable	N	Df	x	Sd	t	sig.	Mean Difference
Therapeutic Index							
Nigeria	1000	1998	250.08	240.47	0.083	0.934	-5.15
Ghana	1000		255.24	277.84			

Therapy has to do with the treatment of ailment without the use of drug; it is the use of physical exercises as opposed to use of drugs. Some individuals are faced with one health problem or another, which can be treated through the use of well-designed regular exercises, instead of being drug dependent. This finding is in line with that of Lindstrom (1987), which stated that sport has proved to be one of the most successful means of rehabilitation and habitation. Well-organized sports programmes cater for as many physical components as possible, especially cardio-respiratory endurance, muscular-endurance and efficiency, strength and flexibility.

McCann (1987) also asserted that the resistive exercises provided by weights is a common method used by therapists in all phases of rehabilitation of the spinal injured. He stated that the shift of emphasis from "medical/clinical to sport"/recreational" is simple. The roles played by physical exercises as therapy cannot be over-emphasized. These roles include recuperation of heart from heart disorders, good posture, and good flexibility and others to list a few. Supporting the place of sport as therapeutic measure, McCann (1987), revealed that the use of sports as a therapy and experience during rehabilitation assists the paraplegic enormously in meeting the challenges of the world, physically, psychologically and socially. He stated further that it is one of the vital elements of living, and will do the paraplegic an injustice if sport is not incorporated in the rehabilitation process. Ogundele (1995) postulated that regular and sufficient exercise leads to decrease in total body weight. However, it is

Results and Discussions

T-test analysis: Adolescents in Ghana and Nigeria would not significantly express health security index as sports value. The result from table 1 shows that there is no significant difference in the expression of therapeutic index as sports value. The mean score of the Nigeria adolescents is 250.08 while that of the Ghana adolescents is 255.24. The difference in the therapeutic index as sport value is 5.15. This indicates that Ghana adolescents attached more therapeutic value to sports. Therefore; the null hypothesis is confirmed.

pertinent to state that there is need for sport participants through exercises to present fitness certificates before participation in therapeutic exercises to avoid untimely death. The effects of physical exercise and sports on mentally retarded were recognized and emphasized many years ago. For example, Descoedres (1998) stated that physical exercise is very important for mental defectiveness, because such individuals are not only mentally retarded but also physically defective. She believes that physical exercise directs the harmonious development of the body. According to her, movement of the body is an important factor in the development of the mind. It also develops endurance and the ability to communicate with others as well as its part in sociability and the development of self-confidence.

Heinmark and Mckinney (1994) observed that during the period of growth, mentally retarded children have frequent opportunities for bodily activities. For these individuals free and active movement is as necessary for health and development as are fresh air, sunshine, suitable food and ample sleep. Adima (1981) found that all functions of the body are influenced by physical exercise. Proger (1984) concluded that physical activities seem to have sharpening effect on fine-motor, cognitive and academic performance of the mentally retarded. Gearheart and Litton (1989) emphasized that physical activities do not only develop physical strength and co-ordination, but also aid intellectual ability, social skills and emotional stability. Neale and Campbell (1993) stressed the potential contribution which physical activities can make

towards the development of adjustment and fulfillment of the mentally retarded. They concluded that physical activities provide special opportunities for the mentally retarded to come to terms with himself in his own way and at his own rate and for the achievement of fuller self-realization. Hughes (1995) suggested that the poor progress made by the mentally retarded in his study was largely the result of limited free play activities. He noted that the reasons for the poor progress must lie in a combination of factors but the lack of facilities for physical activities and less time devoted to manipulatory skills and muscular coordination.

Uguru-Okorie (1988) stated that the relevance of sporting activities to mental health is well illustrated by the fact that clinical psychologists have successfully used recreational activities as specific therapy for specific patients. He pointed out that, sporting activities have been used for instances to provide experiences that afford mental patients means to express their aggressive and libidinal drives. Activities that are suitable for partially and indirectly releasing aggressive tensions according to him include swimming, hiking, and jogging. While more direct and fuller release of tensions may be obtained through such activities as dart throwing, wrestling, boxing and punching a heavy bag. He further claimed that sporting activities have also been found to deal with psychiatric problems reflecting deficiency in cooperativeness or competitiveness. Tennis singles, boxing and wrestling are listed as examples of activities that are high in competitiveness. Tennis doubles, volleyball soccer, hockey and other games are highly co-operative activities. According to Amusa and Onyewadume

(1988), constant physical exercise is necessary for the improvement of individuals whose duties are sedentary in nature. This is so because optimal fitness is never achieved overnight. Individuals who are predisposed to obesity, diabetes, and hypertension would have their conditions controlled through participation in regular physical exercise. This is also the case if the conditions were as a result of the individuals' sedentary lifestyle, both at home and at the place of works.

Another usefulness of regular exercise is that it improves the physical working capacity of individuals. With age and sedentariness, individuals' cardio-respiratory systems are known to be weak. The consequence of this condition is that heart finds it difficult to pump blood all over the body efficiently. This leads to numerous debilitating conditions ranging from general weakness of the body to joint ache, since various systems of the body have not been worked upon. But with active exercise or participation in physical activities, these conditions are avoided, and the individual is radiant, filled with vigour, energy and strength.

The second hypothesis states that adolescents in Ghana and Nigeria would not significantly express physical fitness index as sports value. The result from table 2 shows that there is no significant difference in the expression of physical fitness index as sport value among adolescents in the two Anglophone West-African countries. The mean scores of the expression of physical fitness index are 263.08 and 229.45 respectively. The difference in the mean is 33.63. This shows that Nigeria adolescents expressed physical fitness index as sports value more than the Ghana adolescents.

Table 2. T-test result: The expression of physical fitness index as sport value

Physical Fitness	N	Df	X	Sd	t	sig.	Mean Difference
Nigeria	1000	1998	263.08	168.47	0.604	0.549	33.63
Ghana	1000		229.45	213.09			

This finding is in line with that of Amusa (1980) which stated that participation in exercises is vital for the optimum functions of the brain and for retardation of onset of serious heart disease, such as arteriosclerosis. Shehu (1992), observed that physical fitness entails the development of strong and durable body composition, strength, endurance, flexibility, agility, good posture and relaxation through exercise behaviour. In the light of this, it is important to observe that physical fitness can be achieved and maintained through participation in regular exercises. Adeniji (1995) opined that there is need to be

physically fit, and to be physically fit, one needs to get involved in physical activities and exercise regularly which is the best investment in health. Pleward (1991) observed that inactivity and increased sedentary nature of man's daily living habits pose a serious threat to the body, causing major deterioration in normal body functions, making people to be physically unfit.

The third hypothesis states that adolescents in Ghana and Nigeria would not significantly express health security and safety maintenance index as sports values. The mean score of the health security

and safety maintenance index expression as sport value are 245.69 and 250.00 respectively. Therefore, there is no significant difference in the expression of health security and safety maintenance index as sports value by Nigeria and Ghana Adolescents.

However, the mean difference of is -4.31 , meaning that Ghana adolescents expressed more sports value to health security and safety maintenance than Nigeria adolescents.

Table 3. T-test result: The expression of health security and safety maintenance index as sport value

Health Security and Safety	N	df	x	Sd	t	sig.	Mean difference
Nigeria	1000	1998	245.69	222.13	0.096	0.924	-4.31
Ghana	1000		250.00	219.96			

Corbett (1998) identifies the value of sport as an adjunct to the practice of preventive medicine and health/promotion. In addition to the physical and physiological values or sports, Fox (1991) opined that sports avail individuals of health promoting benefits and fun simultaneously.

Participation in sports and physical activities is often viewed as a means of promoting health during successive phases of the life cycle (Eboh 1994). Nepranic (1984) opined that physical exercise is a vital factor for the preservation, strengthening and improvement of health. He stated further that health and social security budgets could bring about substantial safety, if people take up, or participate in sports. He posited that intensive physical activities play preventive roles in the incidence of disease. Exercise is often used in clinical medicine for diagnostic, preventive and therapeutic purposes; and that participation in exercise/sport helps to reduce the risk factors that are associated with coronary heart diseases. Ademuwagun (1988) stated that, body or physical exercise (sport) in a form of recreation, which is undertaken for fun, relaxation, and enjoyment or self-expression and it is the oldest single approach to physical health.

Conclusion

The findings showed that there is no significant difference in the expression of therapeutic index as sports value. The mean score of the Nigeria adolescents is 250.08 while that of the Ghana adolescents is 255.24. The difference in the therapeutic index as sport value is 5.15. This indicates that Ghana adolescents attached more therapeutic value to sports. Based on the result of this finding, it is appropriate to conclude that adolescents in Nigeria and Ghana believe that sport and exercise can be used by to treat certain ailments without the use of drugs. According to the findings there is no significant difference in the expression of physical

fitness index as sport value among adolescents in the two Anglophone West-African countries. The mean scores of the expression of physical fitness index are 263.08 and 229.45 respectively. The difference in the mean is 33.63. This shows that Nigeria adolescents expressed physical fitness index as sports more than the Ghana adolescents. This finding shows that sports can be used by to stretch stiff joints, to improve speed, strength flexibility, agility, endurance, muscular power, physique and co-ordination, to maintain and achieve good health, to make one to be active and less easily and quickly fatigued and to improve physical activities skills.

The results of the study also indicated that there is no significant difference in the expression of health security and safety maintenance index as sports value by Nigeria and Ghana Adolescents. The mean score of the health security and safety maintenance index expression as sport value are 245.69 and 250.00 respectively. However, the mean difference of is -4.31 , meaning that Ghana adolescents expressed health security and safety maintenance benefits as sports value more than Nigeria adolescents. Based on this finding, conclusion is drawn that sports can help to make some vital organs of the body like the heart, circulatory, respiratory, and digestive systems to function well and that lack of exercise may make bring about weakness and unexplainable pains all over the body.

Recommendations

- Consequent upon the findings of this study, the researchers hereby make the following recommendations:
- Government either at federal, state or local level should make sporting facilities available and accessible to adolescents by constructing new ones and rehabilitating old ones.
- Parents should encourage their children and wards to participate in sports by providing assistance in

form of money, equipment among others that will sustain their interest and facilitate their participation in sports.

- Sports Administrators should be interested in the development of sports by finding means to promote it rather than working towards its downfall and should make sure that funds meant for sports programmes are not diverted to another programme or misappropriated.
- Sporting environments should be made to appear friendly and attractive, so that adolescents will not be scared to participate in sports.

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