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# Farmers' Perceptions of Climate Change and Adaptation to Poverty Diseases along River Niger in Edo and Kogi States, Nigeria

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### Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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# ABSTRACT

Climate variability has the potential to worsen existing vulnerabilities such as Malaria, HIV/AIDS and Tuberculosis. This study examined the farmers' perception of climate change and adaptation to poverty diseases along river Niger. Primary data were collected through questionnaires from 358 respondents in Edo and Kogi States, who were selected using multistage sampling techniques. Descriptive statistics and the threshold concept for discrete variables, were used as analytical tools. Results of the analyses revealed that the use of mosquito nets had the highest adaptation measure to poverty diseases, with a Likert scale mean score of 4.53, while land preparation pattern was the most used adaptive strategy to climate change. The study recommends that to reduce the effect of poverty disease, there is a need for policy makers to engage communities when making decisions relating to their health.

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# **1. INTRODUCTION**

Poverty is a major cause of diseases and a barrier to accessing health care when needed according to the World Health Organisation (WHO, 2020). Poverty and diseases are closely tied, with each factor aiding the other [1]. This relationship is financial, i.e.the poor cannot afford to purchase those things that are needed for good health, including sufficient quantities of good quality food and health care. Disease, in most cases, can also cause poverty. This is partly due to the costs of seeking health care, which includes not only out-of-pocket spending on care (such as consultations, tests and medicine), but also transportation costs and any informal payments to health care providers which can reduce farmers' scarce resources [2]. Poverty disease is a term sometimes used to collectively describe diseases, disabilities and health conditions that are more prevalent among the poor than among wealthier people. In many cases, poverty is considered the leading risk factor or determinant for such diseases and in some cases, the diseases themselves are identified as barriers to economic development that would end poverty [3].

At the global level, there are three primary poverty-related diseases (PRDs) acquired immune deficiency syndrome (AIDS), malaria and tuberculosis (TB). Developing countries account for 95% of the global AIDS prevalence, 98% of active tuberculosis infections and 90% of malaria deaths occur in sub-Saharan Africa 2020). Diseases of povertv kill (WHO. approximately 14 million people annually [1]. For example, malaria attacks an individual on average of four times in a year with an average of 10 to 14 days of incapacitation in Africa (Ekemhonye, et al. 2020). On a global perspective, between 400 and 900 Million of children under the age of five experience acute malaria annually in this malaria endemic region and this number may double by year 2020 if effective control measures are not implemented (Multilateral Initiative on Malaria, 2018). In 2017, an estimated US\$ 3.1 billion was invested in malaria control and elimination efforts globally by governments of malaria endemic countries and international partners (WHO, 2020).

The most serious threats facing human health today are deeply complex. The issue of poverty

is also at the roots of the diseases in Africa (Ekemhonye, et al. 2020). Poverty impacts on self-treatment, health seeking behaviour and capacity for disease prevention at home and community level. In the public sector, poverty generates underdeveloped health services, with poor quality of care and low coverage of the population, which in some countries may be as low as 30-40 percent. Poverty diseases, therefore, have a direct impact on farmers' incomes, wealth, labour productivity and labour market participation of both the sick and the caregivers [4]. In Nigeria, poverty diseases, such as malaria, constitute serious economic burdens to households through incapacitation and diversion of vital households' productive resources to treatment of the sick [5].

Global warming is likely to increase disease, death and injury from heat waves, floods, storms, drought, and fire, which expand the geographic range of malaria, HIV/AIDs and TB in the poor countries of the world [6]. Gaps in knowledge of climate and health research is still in a rather primitive stage and many of the direct and indirect health effects of climate change in the region have not been fully identified or understood. Hence, although a lot is known about the science of climate change, there remain many uncertainties of its potential impact on health [7]. Yet, this message has failed to penetrate public discussions on climate change and health policies. At the moment, few studies that have considered diseases and climate change were at global perspective or regional aggregates. This research has focused on two States along River Niger in Nigeria for easy use by policy makers. Thus, the study is expected to add to the scanty knowledge in this area of research. There is the need to investigate farmers' perception of climate change in the areas and the various adaptation studv measures taken to mitigate the effect of poverty diseases

# 2. MATERIALS AND METHODS

# 2.1 Area of Study

The study was conducted in two of the States along the River Niger in Nigeria. The selected States were Edo and Kogi. Edo State has a total land area of 19,794 km<sup>2</sup> and a population of 3,745,253 (National Population Commission (NPC) projection, 2018). It lies approximately between Latitudes 05°44'N and 07°34'N and Longitudes 05°04'E and 06°43'E. Average rainfall in the State ranges between 1,500 mm at the extreme north of the State and 3,500 mm in the south. Temperature averages are 25°C in the rainy season and 28°C in the dry season (Edo State Agricultural Development Programme, 2010).

Kogi State is located in the north-central zone of Nigeria; it has a total land area of 29,833 km<sup>2</sup>. with a Population size of 3,777,825 (National Population Commission (NPC) projection, 2018). It lies on latitude 7° 49'N and longitude 6° 45'E with sedimentary rocks and alluvium along the river beds which promote agricultural activities. The State has an average maximum temperature of 33.2°C and average minimum temperature of 22.8°C. Kogi State has two distinct seasons, dry season lasts from November to February and rain season lasts from March to October. Annual rainfall ranges from 1016 mm to 1524 mm. (Kogi State Agricultural Development Programme, 2012).

#### 2.2 Sampling Procedure and Sample Size

The multi-stage sampling technique was used for the study. Edo and Kogi States are locations along river Niger. The first stage was the purposive selection of three farming Local Government Areas from each of the State. The Local Government Areas that were selected in Edo State are Etsako East, Etsako central and Esan south while Kogi, Lokoja, and Bassa Local Government Areas were selected from Kogi State. The L.G.As were purposely selected because they constitute centres of intensive agricultural activities along river Niger. The second stage was the random selection of 2 villages per Local Government Area using a balloting method, giving a total of 12 villages. The third stage was the random selection of 358 farmers based on the sampling frame of farm households obtained from the States ADPs. The sample selection was based on the Yamane sample selection model at 5% precision level and 95% confidence limit (equation 1) (Yamane, 2013). The model (equation 1) was employed to select respondents across villages determined on the basis of population of each village.

$$n = N/1 + N (e)^2$$
 (1)

Where

n = the sample size, N = the population size, e = the level of precision.

#### 2.3 Methods of Data Collection

Data for this study were collected from primary sources. The data were obtained through administration of questionnaires to elicit information from the respondents. The researcher was assisted by trained enumerators from the State's Agricultural Development Programme (ADP) to carry out data collection.

#### 2.4 Methods of Data Analysis

Likert scale rating and descriptive statistics were employed in this study. To establish farmers' perceptions of climate change, 18 perception statements were developed, farmers interviewed, and responses were received based on the respondents' levels of agreement or disagreement.

#### 3. RESULTS AND DISCUSSION

# 3.1 Respondents' Perceptions of Climate Change for Over the Past Years

The effect of climate change as perceived by the respondents are presented in Table 1. The result revealed that 4 out of twenty-one farmers' climate change indicators were responded as slightly aware of change with increase in flooding having the highest weighted mean 4.11, followed by high rainfall, increase in temperature, and increased sunshine with weighted mean of 4.07. 3.84 and 3.57, respectively. Furthermore, for the remaining 14 respondents were observed to be moderately aware of climate change with a decrease in temperature recorded the highest with 3.84 which implies that the majority of the respondents were moderately aware of climate change. This finding agrees with Ayanwuyi et al. [8] who explained that the more the perceived impacts of climate change the more the adoption of adaptation strategies to mitigate climate change impact by the farmers.

The results from Edo State affirmed that respondents were slightly aware about 6 out of the 18 climate change indicators with high rainfall having the highest means 4.32, followed by increase in temperature, decreases in temperature, increase in flooding, soil erosion and increase in sunshine with their weighted mean of 4.09, 4.01, 3.93, 3.66 and 3.51, respectively. It was also revealed that moderate awareness has the highest number of 11 recorded indicators with increase in draught having the highest weighted mean 3.47 score. While the response of not sure was noted only for disappearance of wildlife with a mean of 2.41. This also implies that most of the respondents were moderately aware of climate change in the study area. The result is in line with that of Stevens and Philip [1] who reported that local farmers are experiencing climate change even though they have not considered its deeper implications.

Furthermore, responses from Kogi State shows that for the majority, i.e., 15 out of the 18 climate change indicators, a moderately aware response of climate change was observed, with increase in sunshine having the highest weighted mean 3.31, followed by increase in draught, longer raining season, decrease drought and soil erosion with mean of 3.29, 3.23, 3.23 and 3.21, respectively. While indicators for which slightly aware response was obtained were, increases in flooding, high rainfall and increases in temperature with means of 4.28, 3.80 and 3.58. respectively. This implies that the respondents in Kogi State were moderately aware of climate change. The result is in agreement with the Nigerian Environmental Study Team (2012) who

reported that flooding is a recurrent problem in Nigeria, particularly in the southern states where the Benue and Niger Rivers converge. For example, in 2012 unprecedented levels of flooding affected 30 of the country's 36 States causing damage estimated by the government at N4.8 trillion.

# 3.2 Frequently Used Adaptation Strategies for Poverty Diseases

The frequently used adaptation strategies and measures to tackle poverty diseases by the respondents are presented in Table 2. The result reveals that the use of mosquito nets was the most common adaptation measure to reduce poverty diseases with a mean score of 4.53, followed by sanitation of environment and use of insecticides, with mean scores of 4.51 and 4.35, respectively. This implies that the majority of the respondents use mosquito nets as means of preventing vector-borne diseases such as malaria and dengue in their areas. This finding is in line with the study of Gething [9], who reported that the use of mosquito nets is one of recommended measures to prevent malaria.

Table 1. Respondents	' perception	of climate change	over the past years
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Indicators of climate	Po	ooled	Edo	State	Kog	i State
change	Mear	nRemark	Mean	Remark	Mean	Remark
Increase in temperature	4.11	Slightly Aware	4.09	Slightly Aware	3.58	Slightly Aware
Decrease in temperature	3.16	Moderately Aware	4.01	Slightly Aware	3.11	Moderately Aware
Increased sunshine	3.84	Slightly Aware	3.66	Slightly Aware	3.31	Moderately Aware
Decreased sunshine	3.49	Moderately Aware	3.43	Moderately Aware	2.89	Moderately Aware
High rainfall	3.57	Slightly Aware	4.32	Slightly Aware	3.80	Slightly Aware
Low rainfall	3.20	Moderately Aware	3.32	Moderately Aware	2.92	Moderately Aware
Longer rainfall season	4.07	Slightly Aware	3.32	Moderately Aware	3.23	Moderately Aware
Shorter raining season	3.13	Moderately Aware	3.39	Moderately Aware	3.16	Moderately Aware
Soil erosion increased	3.27	Moderately Aware	3.51	Slightly Aware	3.21	Moderately Aware
Soil infertility	3.28	Moderately Aware	2.84	Moderately Aware	2.80	Moderately Aware
Disappearance of wildlife	3.38	Moderately Aware	2.41	Not Sure	2.66	Moderately Aware
Disappearance of vegetation	2.82	Moderately Aware	2.46	Moderately Aware	2.86	Moderately Aware
Decrease in pest and disease	2.53	Moderately Aware	3.02	Moderately Aware	3.18	Moderately Aware
Increase in pest and disease	2.65	Moderately Aware	3.12	Moderately Aware	3.19	Moderately Aware
Increase in drought	3.13	Moderately Aware	3.47	Moderately Aware	3.29	Moderately Aware
Decrease in drought	3.18	Moderately Aware	3.34	Moderately Aware		Moderately Aware
Increase in flooding	3.36	Moderately Aware	3.93	Slightly Aware	4.28	Slightly Aware
Decrease in flooding	3.29	Moderately Aware		Moderately Aware		Moderately Aware

VA= Very Aware, S. A= Slightly Aware, M. A= Moderately Aware, N.S =Not Sure and N.A.= Not Aware Source: Computation from field survey, 2019

Strategies	Pooled	Edo State	Kogi State
Use of mosquito nets	4.53	4.66	4.43
Use of insecticides	4.51	4.47	4.36
Sanitation of environment	4.35	3.53	3.47
Preventive drugs	3.57	3.69	3.43
Use of herbs	3.50	3.22	3.23
Visit healthcare	3.20	2.02	2.19
Relocation	2.42	2.05	2.19
Spiritual head	2.11	2.35	2.51
Change source of water	2.10	1.72	1.49

Table 2. Frequently	v used adaptation	on strategies m	easure to po	overty diseases
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Source: Computation from field survey, 2019

Furthermore, results from respondents in Edo State revealed that the use of mosquito nets, use of insecticides, sanitation of environment, preventive drugs, use of herbs, visit to healthcare centres, relocation, spiritual head and change source of water were identified as the most frequently used adaptation measures to reduce poverty diseases by the respondents in study area. Use of mosquito nets has the highest mean of 4.66, which was followed by use of insecticides with mean 4.47, while the lowest score was for change in source of water with a mean 1.75. This implies that respondents used the available adaptation strategies frequently as measures against poverty diseases in the area.

The results for Kogi State also revealed that among adaptation strategies used, mosquito nets had the highest with a mean of 4.43, followed by use of insecticides and sanitation of environment weighted mean and preventive drugs with their weighted mean values of 4.36, 3.47, 3.43, respectively. The implication is that diseases spread by mosquitoes was the primary challenge to the health of respondents, causing malaria diseases in the areas and use of mosquito nets was most frequently sought adaptation strategy to reduce the spread of this disease. This finding also agrees with the study of Gething [9], who reported that the use of mosquito nets is one of recommended measures to prevent malaria.

# 4. CONCLUSIONS AND RECOMMENDA-TIONS

Based on the empirical evidence obtained from this study, it can be concluded that the respondents' perceptions to climate suggested that most of the residents in the study areas were moderately aware of climate change and practices of irrigation farming was the most used adaptive strategy to tackle climate change impacts such as prolonged water shortages or droughts. The study recommends that the Nigerian Meteorological Agency and other climate change organisations should create climate change awareness centres in each local governments' jurisdictions to improve upon the moderate awareness level of residents and enable farmers access to information on climate change in their areas. To reduce the effect of poverty diseases, there is a need for policy makers to engage communities when making decisions relating to their health. This will improve transparency and ease of obtaining information from respondents relating to their health for appropriate solutions.

# **COMPETING INTERESTS**

Authors have declared that no competing interests exist.

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