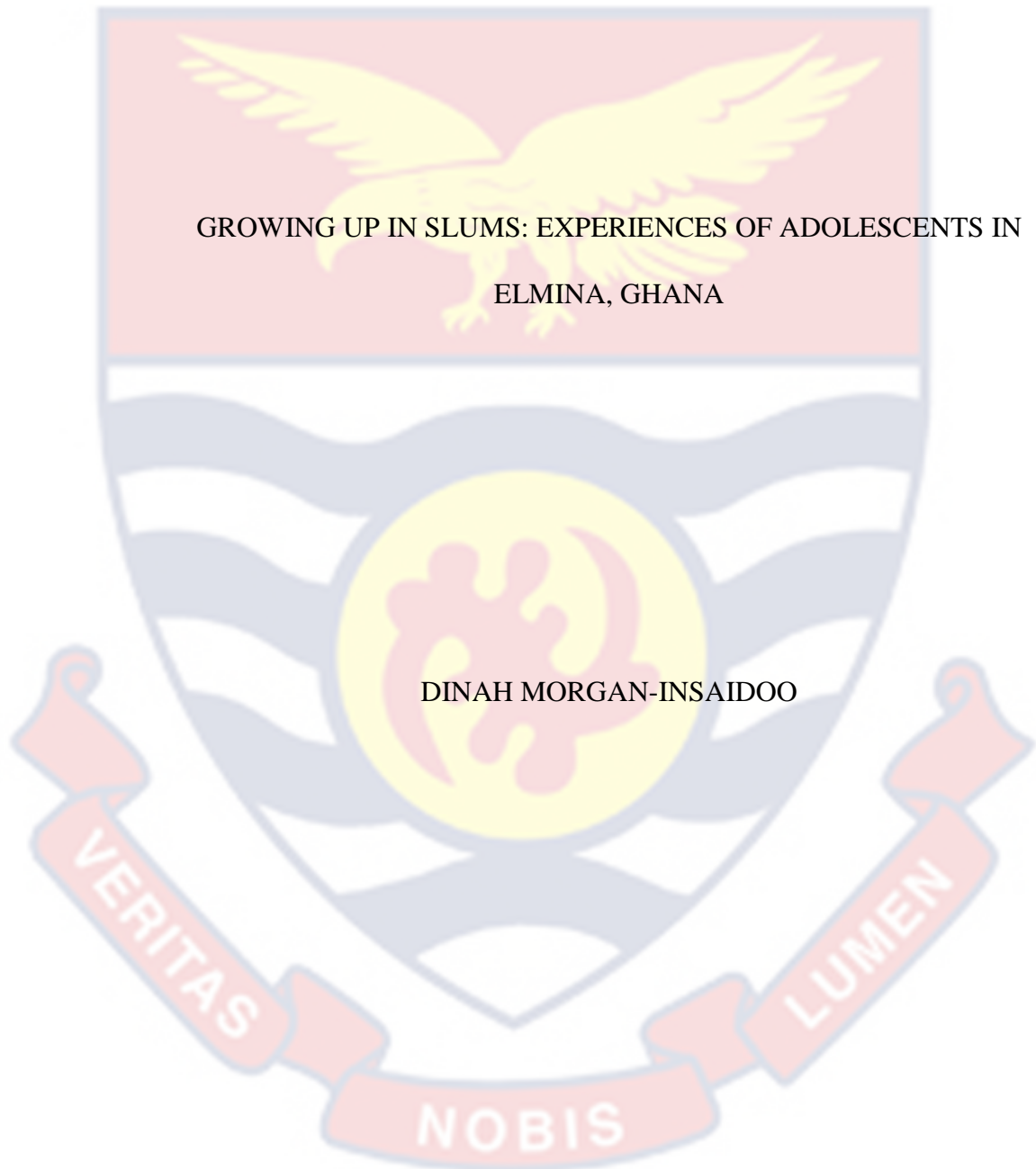


UNIVERSITY OF CAPE COAST



GROWING UP IN SLUMS: EXPERIENCES OF ADOLESCENTS IN
ELMINA, GHANA

DINAH MORGAN-INSAIDOO

2023



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GROWING UP IN SLUMS: EXPERIENCES OF ADOLESCENTS IN
ELMINA, GHANA

BY

DINAH MORGAN-INSAIDOO

A thesis submitted to the Department of Geography and Regional Planning of
the Faculty of Social Sciences, College of Humanities and Legal Studies,
University of Cape Coast, in partial fulfilment of the requirements for the
award of Master of Philosophy degree in Geography and Regional Planning

MARCH 2023

DECLARATION

Candidate's Declaration

I hereby declare this thesis is the result of my original research and that no part of it has been presented for another degree in this university or elsewhere.

Candidate's Signature: Date:

Name:

Supervisor's Declaration

I declare that the preparation and presentation of the thesis were supervised in accordance with the guidelines on supervision of thesis laid down by the University of Cape Coast.

Supervisor's Signature: Date:

Name:

ABSTRACT

Adolescence is a transitional phase from childhood to adulthood, and it is often observed as a phase with heightened risk for future positive development. Adolescents' behaviours and socio-economic status are influenced by their social environment. This study assessed the experiences of adolescents growing up in slums in Elmina, Ghana. Bronfenbrenner's Bioecological System Theory (Bronfenbrenner, 2005) was adopted and modified to help understand the experiences of adolescents in slums. The conceptual framework suggested how the adolescents developed some coping strategies to cope with their environment which it helped in developmental outcomes. The study adopted exploratory sequential mixed method research design approach. Questionnaire and focus group discussion guides were used to collect data from adolescents through the simple random and purposive samplings respectively. Interview guides were used to collect data from the key informants through purposive sampling. A total of 313 questionnaires were retrieved from the respondents representing a response rate of 100%. The findings of the study revealed that adolescents were influenced by their socio-economic environment and so they developed some coping strategies to cope with their environment. Though there were a few helps given by the district assembly and non-governmental agencies, the adolescents requested for more interventions from the government and social supports systems. The study recommended the establishment of community-based youth facilities to alleviate some of the issues adolescents go through and constant monitoring by NGO's and Komenda Edina Eguafo Abrem Assembly on the entrepreneurial training given to adolescents and their parents.

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I also appreciate the efforts of my darling husband, Mr. Richard Ashitey for his words of encouragement and providing financial support towards my education. I am also thankful to my sweet mother, Elizabeth Ampah for her unfailing support throughout my education life. I am also grateful to Samuel and Emelia Brew-Butler GRASAG-UCC Research Fund for their financial support for my field work. I cannot forget the efforts of Miss Phyllistina Mensah of Elmina Catholic Girls JHS (Headmistress).

Finally, I extend my deepest appreciation to all adolescents who spent their time to ensure that this project becomes a reality. God bless them all, Amen.

DEDICATION

In honour of my husband; Richard Ashitey and children; Nii Odametey Ashitey and Damien Ashitey.



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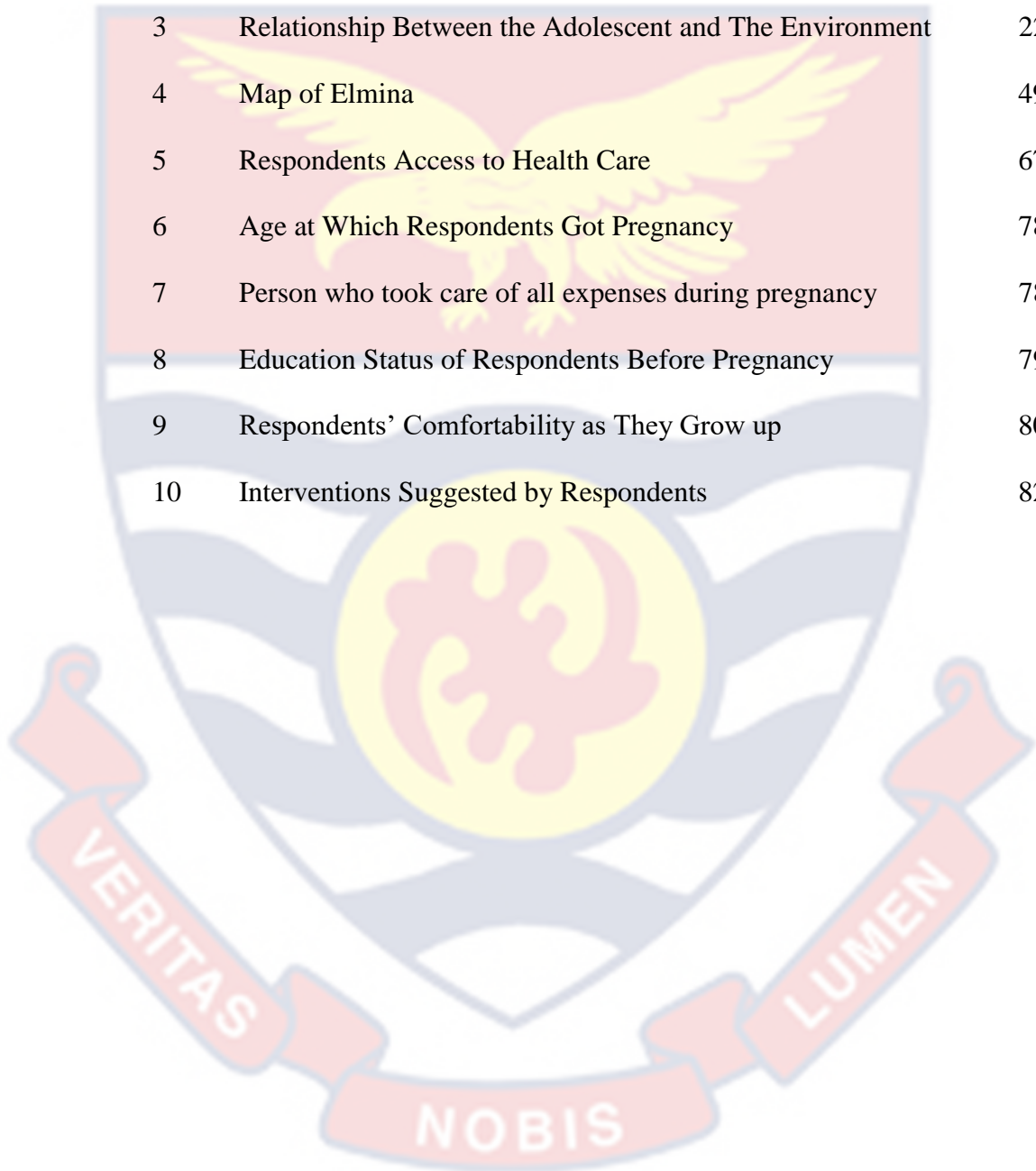


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CHAPTER ONE

INTRODUCTION

Background to the Study

Universally, slums have been in existence since time immemorial and there has been a lot of literature on them, about one billion people live in slum conditions and among these 71.8% are slum dwellers (UN-Habitat, 2016). Some scholars like Gips (2017), describe slums as informal settlements in urban areas that are densely populated. Others describe slums as substandard housing which is often characterized by over crowdedness and filth (Amao, 2012). The UN-Habitat Report (2005), describes a slum as ‘a variety of low-income settlements with subpar human living conditions and that, it is densely populated urban area characterized by substandard housing and squalor’. These slum conditions however have several impacts on the people living in them. It is therefore perceived that slums are associated with subcultural conditions which are evidence of physical structures such as overcrowding, high population densities, inadequate social amenities such as portable water, toilet facilities, sewerage and clearance of garbage (Nuisl & Heinrichs, 2013).

Urban centres are currently the home to virtually half of the population worldwide and remain the focal point for economic growth, innovation and employment (Cohen, 2006). From 751 million in 1950 to 4.46 billion in 2021, the global urban population has increased rapidly. By 2050, it will reach 6.68 billion, with an additional 2.22 billion people living in urban areas. Asia and Africa are expected to account for 90% of the increase in the global urban population between 2021 and 2050. In 2021, Africa was projected to have the fastest population growth, at 3.56% (World Urbanisation Prospect, 2018). The

rapid world urbanization will never end and it will keep increasing with time as the majority of the population is likely to live in the cities and towns (Organização, 2018). Population Growth and Rural-Urban drift have placed significant pressure on cities with inadequate housing, employment and available social amenities. A report from the UN-Habitat in 2014 indicated that, pace of urbanization across Africa is expected to hit 59% by 2050, raising the number of urban dwellers from 400 million in 2021 to 1.26 billion by 2050 (UN-Habitat, 2014). This situation puts tremendous pressure on cities to prepare and handle the rise in urbanites and their demand for accommodation, jobs and access to basic infrastructure and services; a situation that is becoming increasingly unsustainable for many cities, particularly those in the developing world.

Most African countries are unable to meet basic needs. As a result of population growth pressures, economic development and many other factors such as town planning, housing conditions, (Roy et al., 2014). Africa has experienced significant growth in Gross Domestic Product (GDP), and increase in the number of households which have caused them to migrate from “lower class” category into the category of “middle-class” nevertheless, Africa's economic transformation is now unable to keep up with the rise in housing and job needs, forcing the majority of urban people to rely on the informal economy (UN-Habitat, 2014). Rapid population growth creates urban sprawl with its disadvantages to the economy, society and the environment (UN-Habitat, 2014).

The Sustainable Development Goal Report in 2021 estimated over one billion people living in slums worldwide with majority in Asia and Sub

Saharan Africa. In developing countries such as Ghana, most people live in cities and the growth of the urban population causes problems. Ghana's urban population has roughly reached 19 million in 2021 (Amponsah et al., 2022). These growths are a result of the natural rise in population and rural-urban drift. Even though individuals move to cities for good reasons, the impacts are overwhelming. These disadvantages become a burden on the government as it is to provide for the needs of its citizens through the provision of social amenities such as good drinking water, proper waste disposal, sewerage disposal and affordable housing which most times result in slum creation, in which about one-third of the world's population reside in impoverished slums (UN-Habitat, 2013). To solve the housing deficit caused due to urbanization taking place at a rapid rate in Ghana, more housing units will have to be built annually to save the situation (Daily Graphic Online, 2014). There are a few challenges in health-seeking behaviour and poor housing units and work conditions associated with slum areas. Due to monetary issues in taking care of one's health, slum dwellers are forced to use countless surviving strategies to address their health problems which include acute respiratory diseases, diarrhoea, skin rashes, sexually transmitted diseases and others (Ransford, 2018). The presence of slum areas is particularly pronounced in major cities such as Accra (Ashaiman, Jamestown, Nima, Fadama), Kumasi (Suame Magazine) and Sekondi-Takoradi (Kojokrom and New Takoradi), Komenda Edina Eguafo Abrem is no exception in the Central region, specifically Elmina (UN-Habitat Report (2007).

According to UN-Habitat (2013), slum residents have limited access to basic services such as good water supplies and proper waste disposal means

contributing to poor sanitation which may lead to increase in disease outbreaks in the slum areas. In addition, there is difficulty in accessing health care probably due to financial restraints and inadequate health facilities. According to Aboulnaga (2021), one of the dangerous issues facing the slum settlements and destroying their physical and social environments is poverty. This makes it a critical issue as it makes it difficult for people to escape poverty and therefore become victims of the vicious circle of poverty (Aboulnaga, 2021). The environment in which we live has a significant influence on our development. The first contact of a child is the family and his immediate environment and so, this is where socialization begins. Every person's behaviour in the larger society is primarily attributed to the kind of environment and training he or she receives at home (Komro et al., 2011).

Adolescents living in slums are most times not able to do their homework due to leakages in their buildings and inaccessible electricity. In addition, some parents are unable to supervise these adolescents. As such, these adolescents perform poorly academically, and some eventually drop out of school. These drop-outs are one of the factors contributing to an increase in irresponsible adolescent behaviours such as streets, robbery and teen teenage pregnancies (Satish et al., 2020).

Ghana's population is known to be fast and young growing, in other words, the percentage of children and youth (60%) is greater than the aged (Edmond, 2019). According to Centres for Disease Control and Prevention (2015), adolescents endure a lot, there is a need to make sure they have a safe place to express themselves. Adolescents are often shushed down, denied of their feelings, kept from speaking up or voicing out and their experiences are

diminished simply because they are "children," yet they are human beings with brains and feelings. Their emotions influence their actions, and their thoughts influence their emotions. They experience problems, such as abuse of various kinds and the struggle to even cope with their circumstances and environments (US Department of Education, 2005). The economic development of any country depends on our current reality and future possibilities. Therefore, investing in adolescents today will provide a healthy, assertive and responsible labour force and strengthen the economy for years (Sarkova, 2013). Thus, in the early years, the consistency and continuity of an adolescent's human relationship will lay the foundation for a wide range of later developmental results.

Adolescence is a process through which an individual makes a "gradual transitional stage of physical and psychological development that generally occurs from puberty to adulthood" which is a critical stage in every person's life (Kills & Girls, 2013). World Health Organization and Ghana Statistical Service (2013), explains that the adolescence period lasts between the ages of 10-19. It is at this stage in the life of the adolescent where he/she not only develops first physically, but also develops the desire to think abstractly and more easily reason. A detailed understanding of adolescents in society relies on knowledge from multiple points of view, such as education, genetics, psychology and history to better prepare them for adults' roles. This period is also characterized by career choices and target setting in life, which to a large extent are dependent on the environment of the adolescent, and their socio-economic status. As the adolescent grows up in a slum environment, he/she is exposed to these conditions and it becomes part of him/her especially

their behaviours, communication and interactions with others, in places outside their residence such as schools (Centres for Disease Control and Prevention, 2015).

Statement of the Problem

The development of slum settlements continues to be a major developmental and urban planning issue experienced in major urban areas in Ghana. This situation seems to be on the rise due to several factors such as urbanization, population growth and migration. The population of Ghana is 30.8 people with over 78% of the population living in poverty as at 2021 (Ghana Statistical Service, 2021). Poor people turn to take shelter in substandard or informal settlements. As observed by Gips (2017), residents of slum settlements face several risks including, inadequate education, unemployment, informal economy, absence of skills, violence, diseases, child malnutrition, teenage pregnancy and truancy. The Sustainable Development Goal (SDG) 11, stresses the need for all countries to ensure that cities and human settlements are made safe, resilient and sustainable to ensure that the environment, social and economic situations of cities and individuals who reside in such areas are improved. To achieve such desires for the current and future populations in the cities, there is a need to address issues such as environmental and health conditions as well as the socio-economic conditions in slums and their implications on the adolescents living in them.

The environment in which adolescents live may influence their behaviour and socio-economic status (Markham et al., 2022). For instance, an adolescent living in a well-planned and clean environment with access to parental presence and almost all basic services as compared to an adolescent

living in a slum, who is exposed to all kinds of deviant behaviours and social vices and experiences poverty and hunger, may not exhibit the same behaviour. One of the most researched areas in the field of behavioural genetics is cognitive ability (McGue & Bouchard, 1998). For humans to adapt and survive, cognitive ability, often known as general intelligence, is crucial. The ability to "reason, analyse, resolve issues, process information, absorb complicated ideas, learn quickly, and learn from experience" are all included in this skill (Plomin, 1999). Beyond memory or imitation, intelligence supports the capacity to understand circumstances, determine what is required, and formulate a strategy. However, adolescents with cognitive abilities for instance will be able to develop special problem-solving skills that enable them to cope with their environment (Agnew, 2012). The importance to invest in adolescence experiences and development and how they cope with their environment is essential. Some negative developmental outcomes which arise due to their current living conditions may be difficult or almost impossible to eliminate in future even if such living conditions improve or change (Fitch, 1985)

Experience is seen as event or occurrence that leaves an impression both positive or negative on someone. The term "human experience" refers to the realities of our existence, such as our mental, emotional, spiritual, and physical traits. These experiences touch on a variety of topics, including conception, the family, society, culture, feelings, physical changes, fear, knowledge, and creativity, among others (Spacey, 2019).

Many studies have been undertaken to facilitate the improvement of living conditions in slums for the achievement of the national development

agenda. Research on slums in Ghana has focused on the upgrading of slums as in the case of Danso-Wiredu and Midheme (2017), health as in Aggrey-Korsah and Oppong (2013), and slum improvement as in Asamoah (2010). In Komenda Edina Eguafo Abrem Municipality, for instance, Bryant (2019) focused on biogas production and black water disinfection in Elmina and Bluwey (2012) focused on poverty among fisherfolk and crop-based farmer households. This study, however, identifies the following gaps in the literature.

- There is not much study on how environmental conditions influence adolescent behaviour; and
- There is limited study on coping strategies adopted by adolescents in slum environments.

Though there had been researches on the study area, adolescents, and slums there is limited researches on the adolescent and slum living. This study is undertaken in order to bridge the above identified knowledge gap and explore the experiences of slums on adolescents living in slum areas in Elmina with aim of seeking find answers to the following questions.

Research Question

1. How does the socio-economic environment influence the growth of adolescents in slums in Elmina?
2. What are the coping strategies adopted by an adolescent in slum areas in Elmina?
3. What are the roles of stakeholders in planning and managing slum areas in Elmina?

Purpose of the Study

The purpose of the study is to explore the experiences of adolescents living in slum communities in Elmina.

Specific Objectives

The following objectives have been outlined to guide the study:

1. Assess the influence of the socio-economic environment on the growth of adolescents in slums in Elmina.
2. Examine the coping strategies adopted by adolescents in slum areas in Elmina.
3. Explore the role of government agencies in planning and managing slum areas in Elmina.

Significance of the Study

Being inspired by the need for a complete approach to studying slums and adding to existing knowledge on slums, this study presents a novel framework for understanding and studying adolescents and slums. Hence it will not only contribute to the existing knowledge on slums but also be a stepping stone for further research on adolescents and slum living. The findings will help parents in decision making concerning their adolescents and also inform policymakers and stakeholders in policy formulation on policies and interventions needed to enhance adolescents' development in slums.

Delimitation of the Study

Geographically, this study was conducted in the Central Region of Ghana. It focused exclusively on the Elmina, specifically Tetter Kessim, Esarmu and Ayisa communities in the Komenda Edina Eguafo Abrem Municipality.

Limitations

The population of the adolescents for two slum communities (Ayisa and Esarmu) were not available in the statistical department in Komenda Edina Eguafo Abrem Municipality, so the researcher had to go to these two slum communities to conduct a census to carry out the research. This was time-consuming as the structures did not follow a proper layout. Also, some parents felt reluctant to allow their adolescents to participate and so getting the sample became very tedious.

Organization of the Study

This thesis was divided into five chapters. That is, Chapter One, which is the introduction; covered the background to the study, statement of the problem, research questions, research objectives, significance of the study, delimitation of the study and organization. Chapter Two will capture the theoretical and empirical review of literature that relate themselves to the topic under study. Chapter Three focused on the methodology. Specifically, it covered issues such as the introduction, profile of the study area, research design, target population, sampling procedure and size, data collection instrument, fieldwork, data processing and analysis, and ethical issues. Chapter Four focused on the results and discussion of the study findings. Among the topics that were discussed in this chapter are the background characteristics of the respondents, causes of slums settlements, slum living conditions that influences the growth of the adolescents, and the social impacts of slums on adolescents living in slum communities in the Elmina Township. Chapter Five was the concluding chapter of the study and concentrated on the Summary, Conclusion and Recommendations.

CHAPTER TWO

LITERATURE REVIEW

Introduction

The study examined the experiences of adolescents who grow up in slums within the Komenda Edina Eguafo Abrem Municipality of the Central Region – Ghana. The main objective of the study was to explore the effects of slums on adolescents living in slum communities in Elmina. This chapter therefore examines the literature related to the study.

Theoretical Perspectives

Studies on child development have been undertaken worldwide to ascertain the dynamics and difficulties in growing up to facilitate the development of policies and programmes to meet the needs of the growing child. Child development refers to a series of changes in a child from birth to the beginning of adulthood that arise in physical, emotional, language acquisition and critical thinking. Puberty progresses from dependency on its parents/guardians to increased independence during this process. Hereditary influence (genes passed on by their parents) and events during maternal life are highly affected by child growth. Ecological realities and the learning ability of the child also affect the development. Observation and monitoring of the individual at different stages of his life is an effective method to ensure that he/she reaches his/her developmental milestone which the adolescence stage is crucial.

In the work of Engale et al. (2007), intervention policies and initiatives on child development have been shown to place a great deal of emphasis on health care facilities, feeding and nutrition, education and parental care, but

not on human settlement. However, COHRE (2006) concluded that children's physical and social growth is directly related to the world in which they grow up and that the challenges of the living environment are highly influential. The right of children includes a friendly environment that protects them physically, and psychologically and increases their self-respect and self-confidence. This will make them assertive, and responsible and prevent them from being abused and abusing others.

Adolescent Development

In Fitch's (1985) work on child development, he elucidated that the period where the development of a human being is at its peak is from conception to adolescence. This, therefore, makes the adolescence stage a crucial stage where concentration needs to be given to shape their development. Erick Erickson a renowned theorist (1950) in his article introduction to child development said that in the course of growing up the individual encounter developmental complications and in the adolescence stage this is where the individual struggles to find the balance between developing a unique identity and still being accepted and adjusting. He believed that the (adolescents) are stuck at this stage, it affects their psychological development in later years of their lives (Erickson, 1963). In agreement with Erickson, Fitch further explained how development is progressive and accumulative, and social support systems influence the development of an individual. Both Fitch and Erickson agreed that the environment is not perfect and may restrain their development into responsible adulthood one way or other, thus the need to explore the experiences of adolescents living in slums.

Social Environment

The immediate physical and social surroundings in which people live, or in which anything occurs or develops, is referred to as the social environment. It covers the environment in which the person was raised or educated as well as the institutions and people they contact with (Barnett et al.). A complex combination of natural and climatic factors the geographic environment. The complement of direct contact between nature and human society, despite the fact that it emerged independently from individuals. Because man can't live directly in the physical world, he constructs some of his own environmental circumstances to fit it. Our lives are significantly affected by the social environment (Vedantu, 2023). The social environment is important because research shows that, young people's motivation is influenced by how well their psychological desire for connection is met (Rowe, 2022). Though it is true that man lives in certain geographic circumstances and that his society follows a specific pattern of economic activity, social man is just as much a product of his social environment as he is of his physical surrounds and economic circumstances A piece of the physical environment remains uncontrolled by man, while another part he modifies to his advantages.. (Mundra, 2018).

Environmental Determinism

Ancients Greece, Rome and China early theories of environmental determinism proposed that the environmental features completely determine the intellectual and physical qualities as well as developmental outcomes of an individual as well as the society as a whole. In agreement with this theory, Darwin (1859) in his theory of natural selection argues that when a man is

faced with environmental burdens, he may experience physiological variations during his lifetime through the process of acclimatization (Darwin, 2004). In contrast to Darwin theory, Lamarck (1809) in his inheritance theory of acquired characteristics in which he suggested that those physiological changes may be passed directly to the children without the need for the children to develop the attribute in the same manner (Campbell et al., 1983).

As early as 384-322 B.C., Aristotle explained that the environment plays a significant role in the development of any individual. He compared the human mind at birth to a writing table with nothing written on it (Tamanda & Khumalo, (2012) and in 1632, John Lock buttressed this assertion by adding that a child's mind at birth as 'tabular rasa'. Meaning that the individual is born without any innate mental content and that all knowledge comes from experiences and the environment. Rousseau stressed that both physical and social environment plays a vital role in the development of every individual (Gianoutsos, 2006). These philosophers however described the child (adolescent) as a passive recipient of environmental factors but did not involve how these environmental conditions work. Other psychologists like Scarr and Weinberg (1978); Craig (1996); Blades et al. (2003) argue that both the physical and social environment has a significant influence on development outcomes. Further research has also shown that the adolescent self-concept is greatly influenced by the social environment (Bronfenbrenner, 1979).

Environmental Possibilism

The theory of environmental determinism has been criticized in many ways thereby the emergence and acceptance of environmental possibilism theory in the 20th century. The theory suggests that man is not automation or a

robot without any will of his own and so to say that man's activities are dictated by his environment is an insane pseudo geographical averment in contrast to the environmentalists who are of the view that people and their environment are inseparable (Fekadu, 2014). The landscape and places in which we live are important. They are an expression of what we are, whether we shape them or they shape us (Fekadu, 2014). Bremner and Slater (2002) observed that the individual is an active organism with a will of his/ her own and controls his/her thinking and actions and capable of influencing his/her course of development which is in contrast to the philosophies of Rousseau, Locke and Aristotle of the individual being a passive recipient to the environment.

The adolescent is an active agent of his development. Craig (1996) argued that as the individual learns and socializes, both the environment and social support systems affect individual growth. And that learning as a fundamental mechanism in which the social environment induces permanent behavioural changes as the person acquires skills, information and attitudes. Also, socialisation is a mechanism through which the person communicates with the social support system. In the nutshell, she concluded that the living environment should be a key factor in meeting the needs of a person (adolescent) and influencing their growth. Craig (1996) however, refers to the individual's environment to be the home but the whole environment was not considered (Tamanda & Khumalo, 2012). To overcome the difficulties encountered in their environments, adolescents build certain coping strategies because they have minds of their own to reason.

Bronfenbrenner's Bioecological System

Bronfenbrenner (2005) developed the Bioecological Systems Theory to explain how everything in a child and the child's environment affects how a child grows and develops. The Bioecological System Theory (BST) elucidated by Bronfenbrenner make available a structure for an explanation of a scientific study of the progressive, mutual accommodation between an active growing individual and the immediate environment in which the developing person lives as well as how the person relates to the immediate environment in the process and the larger environment (Bronfenbrenner, 2005). The scope of the Bioecological Theory covers all the structures involved in human life by offering a set of concepts to express these issues systematically. The model consisted of a set of ideas interrelated in such a way that some of them were the basis for the others (Bronfenbrenner, 2005). The Bioecological Theory is an updated version of Bronfenbrenner's ecological model in 1979. This theory was in contrast to Locke and Rousseau's philosophies as well as Aristotle's where he considers the growing individual is considered as an active participant in the environment (Tamanda & Khumalo, 2012).

The theory is seen as a two-directional mutually reciprocal process. That is, the environment we live in is very important, whether we shape them or they shape us, they are an indication of what we are (Relph, 1987, as cited in Fekadu, 2014). This means that the growing adolescent is capable of restructuring the multiple levels of the environment at the same time the environment influences the development.

The theory also suggests that the growing adolescent's environment is not just the immediate environment or home but also is influenced by the

larger environment (Bronfenbrenner,1979). He however criticized the ecological model as he saw it as incomplete if it did not include the levels of individual structure and function. Therefore, he infused dynamically human development with biology, ecology, psychology and behaviour and designed a recent version, the Bioecological System Theory (Lerner et al., 2002).

Bronfenbrenner (2005) conceptualizes the bioecological environment in an orderly manner of four concentric systems. They are microsystem, mesosystem, exosystem and macrosystem. According to Bronfenbrenner, to study the development of an individual, the emphasis is not just on the adolescent and his immediate environment, but also on his interaction with the larger environment. The Bioecological System Theory's central claim is that development always takes place in a certain social environment and that this setting can influence development. As a result, humans should be capable of creating those settings to maximize their genetic potential (Bronfenbrenner, 2005). Bronfenbrenner (2005) argued that the most essential setting for young children is their home because that is where they spend the majority of their time. However, their extended family, school settings with their educational programmes, and community with its laws and customs are all equally significant. He again emphasized that for development outcomes to be maximized and successful, interaction must take place regularly over a long period. The BST states that a human is an active agent of his or her environment which is in the agreement with environmental possibilism, the environment forces humans to adapt to its constraint and limitations and lastly the environment is made up of a microsystem, mesosystem, exosystem and macrosystem.

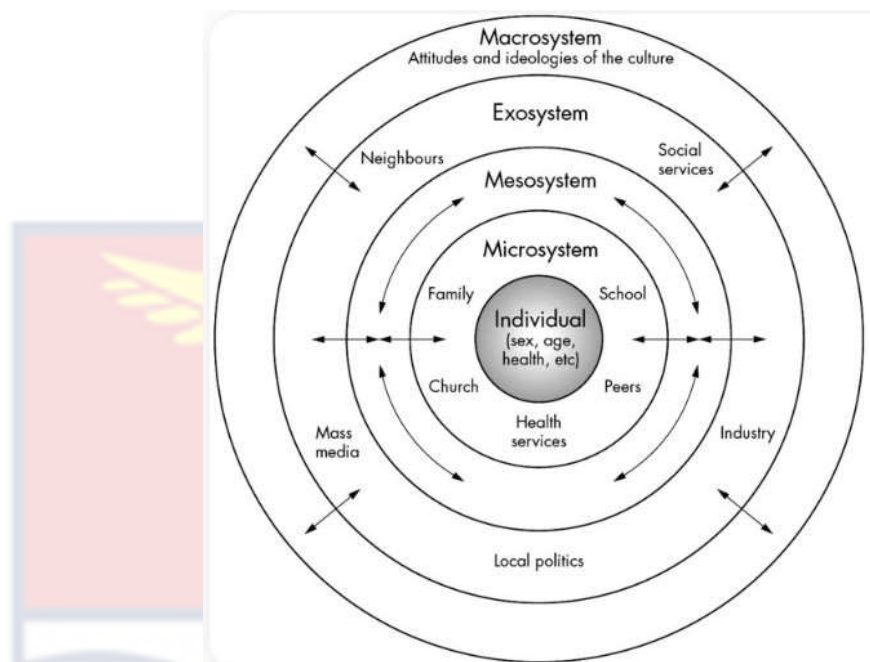


Figure 1: Bronfenbrenner Bioecological System Theory

Source: Bronfenbrenner, 2005

Microsystem

The microsystem is the closest to the growing individual and encompasses the settings with which he or she has direct contact, that is the home or school. It includes the relationships and interactions he/she has with his/her immediate surroundings and the interaction is mutually directional (Berk, 2000). The patterns of activities, roles, and interpersonal relations experienced by the adolescent in a specific face-to-face context are contained within this system. The most direct contact with social agents such as parents (including other household members), teachers, peers, and playmates in school and neighbourhoods take place in the microsystem (Nyatsikor et al. 2020). Thus, the adolescents are not passive agent to experiences in their microsystems as he influences others through their interactions, experiences, feedback and behaviours.

Mesosystems

This aspect provides the link between the settings of the child's microsystem such as his/her home, school or playground (Ryan, 2001). In this instance, development is influenced by both formal and informal links between the home and the new setting. This can be parents' involvement in the child's school life. For instance, the nature and quality of interaction between an adolescent and teachers or classmates in schools or playgrounds may be influenced by the type and quality of interaction in the adolescent's household. Adolescents who have been rejected by their parents may find it difficult to form strong relationships with facilitators and schoolmates, which are essential for successful teaching and learning and improved academic outcomes (Nyatsikor, 2020).

Exosystem

The exosystem includes the other people or settings that the developing individual may not interact with directly but that still get influenced by the events that occur in those settings (Bronfenbrenner, 2005). Examples of such people and settings include the parents' workplace, extended family, community health or parents' friends. The amount and quality of interactions in the home and school microsystems, for example, can be influenced by a parent's busy work schedule. When a parent's work schedule prevents him or her from being involved in the academic life of the adolescent or the type of association or friends the adolescent has, have an impact on the mesosystem's effectiveness. The importance of parents' participation in the lives of their adolescents has an impact on their later developmental outcomes (Bronfenbrenner, 2001).

Macrosystem

This aspect takes into consideration the utmost part of the adolescent's environment. They are the ideology, values and laws that promote or impede human development (Bronfenbrenner, 1979). For example, the law that makes education compulsory for every child in Ghana. Bronfenbrenner in his bioecological model conceptualized the environment to reveal a full picture of the environment in the development of a child. It portrays the importance of the microsystem, mesosystem and exosystem play in the development of the child which is very important for the growing child and implementation of policy for adolescents living in slums.

A Conceptual Framework for the Relationship Between Adolescents and the Environment

This theoretical framework gives the scientific tool for understanding the relationship between the adolescent and the environment (slum) and the developmental processes that aid to shape the adolescent's behaviour and outcome. The framework was adapted from Bronfenbrenner Bioecological System Theory. This framework provides a structure for a comprehensive description of disparities in the processes of adolescents' development and their subsequent outcomes as a result of the interaction between adolescents and the environment.

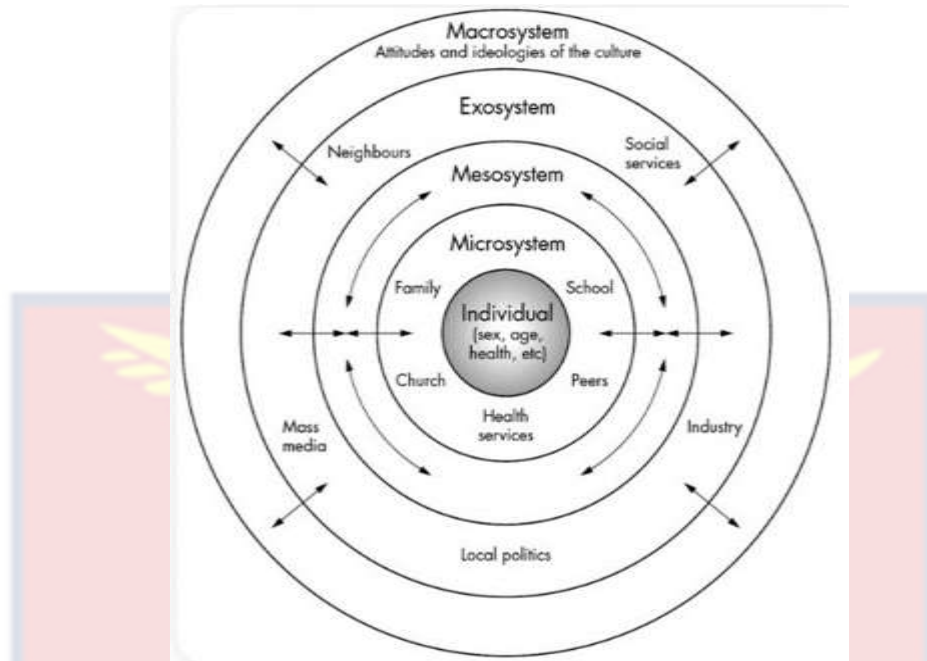


Figure 2: Bronfenbrenner Bioecological System Theory

Source: Bronfenbrenner, 2005

The Bronfenbrenner's Bioecological System Theory was adapted into a conceptual framework showing the relationship between the adolescent and the environment in the figure below.

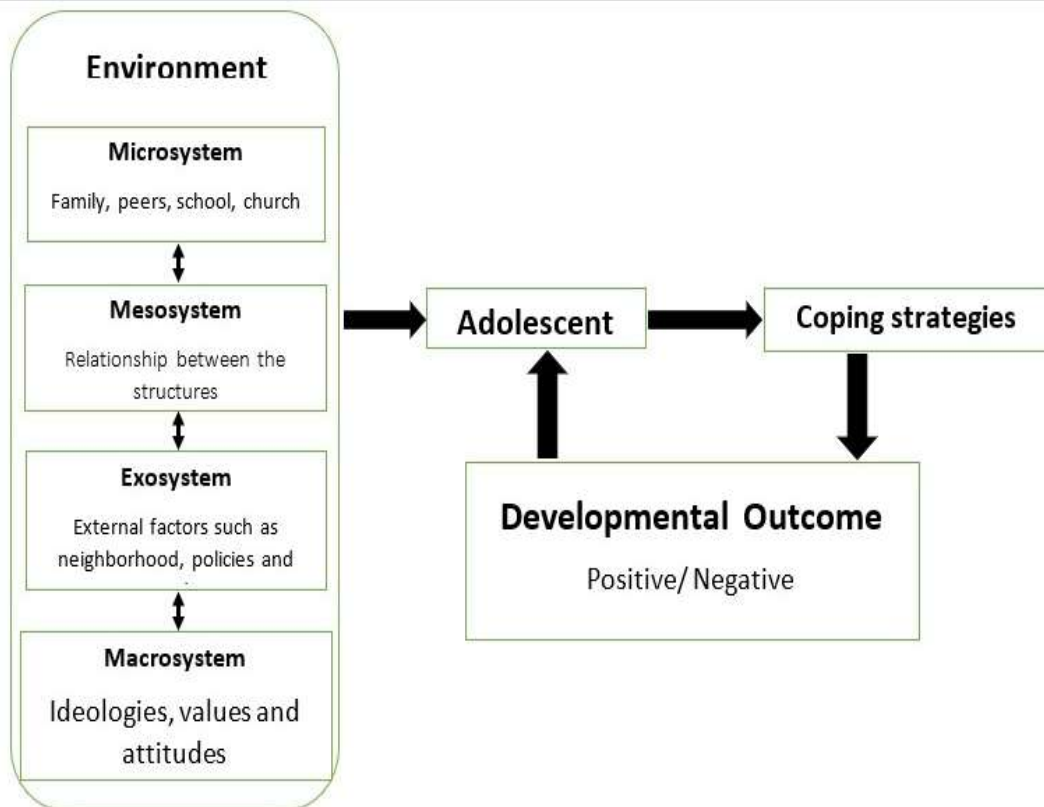


Figure 3: Relationship Between the Adolescent and The Environment

Adolescent

Source: Bronfenbrenner (2005)

This framework starts with the adolescent, that is, the age, sex, and any special needs from the ages of 10 – 19 years (Ghana Statistical Service, 2013)

Microsystem

This is the first level of the environment in which the adolescent has direct contact. This could be the family, school, church or peers, the relationship the adolescent has with these people as well as the interaction between them and also takes social roles (Bronfenbrenner, 1994). Adolescents in the study area can be said to be operating at the microsystem level. This is because they are living with their families, the school, their peers and the church. They receive contact with these immediate surroundings. As indicated

by Bronfenbrenner, the adolescents at this level are under the consideration of their parental presence and parental care if the adolescent is schooling, supportive teachers are also looked at, and issues of domestic violence and abuses are also investigated. Kejerfors (2007) describes the microsystem as a place where the adolescent experiences day to day life.

Mesosystem

This level is the relationship between the settings in the adolescent's microsystem (Bronfenbrenner, 2005). For instance, the relationship between family and school of the adolescent. That is, if the parents get along with the teachers, if the parents feel comfortable going to the school when there is a problem, or the relationship between where the adolescent lives (slum) and the family, whether the living conditions in the slums affects certain roles the parents have set for them. It is expected that a cordial relationship exists between the school and parents of adolescents in the study area.

Exosystem

This is a link between two or more settings, where the adolescents have a direct link or role with one of the settings and the other, they don't but affects him indirectly nonetheless (Bronfenbrenner, 1979). An example is a relationship between the adolescent's parent's job and the adolescent's school, if the parents have fluctuating work hours or have to work long hours, the adolescent is not directly related to the parent's workplace but this affects things like parental involvement in the adolescent's school life. In the same way if parents of adolescents in the slummy communities have a bad day or demotion at work, they may end up taking that anger or frustration to the

adolescent. Again, the media and other governmental policies affect the adolescents (Kejerfors, 2007).

Macrosystem

This is the major social and cultural context. It encompasses all the distant people and places that significantly affect the child. This deals with the expectations, laws, cultural patterns, dominant beliefs and ideas as well as political, educational, legal, traditional, religious, social and economic systems in the adolescent's microsystem, mesosystem, and exosystem that impede or promote the adolescent's development (Kejerfors, 2007). Berk (2000) within a geographical border, this approach also takes into account the dynamics of socioeconomic position, poverty, and ethnicity. For example, a country's economic development and employment prospects are likely to have an impact on parents' socioeconomic standing, which might affect a child's well-being. For instance, an adolescent living in a slum where the environment is dirty, exposed to violence and experiences hunger and poverty, will experience a different kind of development as compared to an adolescent living in a clean, well-ordered environment with access to basic needs.

Coping Strategies

Coping strategies are the specific efforts that people employ to master, accept, eliminate or mitigate traumatic situations, both behavioural and psychological (Taylor, 1998). She categorized the coping strategies into two, which include; problem-solving strategies which attempt to do something active to relieve stressful situations, while emotional-focused coping mechanisms include attempts to control the emotional impact of traumatic or possibly traumatic events.

As adolescents make a physical, psychological and emotional transition into adulthood, they face some developmental changes. Thus, adolescent slum dwellers go through more than a few challenging situations such as developmental stress and as a result of this, these adolescents adopt some strategies whether positive or negative to cope with the challenges they encounter. A quantitative study conducted by Cocorada and Mihalascu (2012) showed that adolescents considered different coping strategies in dealing with their environment. Also, there are different coping strategies adopted in terms of gender and age. Williams and Lisi (1999) associated different age group with different kind of stress and the degree of stress encountered by the adolescent, therefore different type of strategies adolescents adopts to cope with their environment during their early, middle and late adolescence with no major gender gap.

Experiences and Developmental Outcomes

Experiences are occurrences which leaves an impression on someone (Daher et al., 2017). During adolescence, adolescents are vulnerable and experience several changes and issues that can improve or lead to significant problems in later life (Bowey, 2022). These experiences can be physical changes, social, emotional, behavioural, educational, sexual or health issues (Murty et al., 2016). In the context of the study experiences are events or encounters that leaves a lasting imprint on a person. Humans are cursed with a conscious awareness of their own mortality, which makes them different from other creatures. People's awareness and genuine self-consciousness about this existential problem contributes to the tragedy of the human condition (Trentini et al., 2022). This leads to the ultimate irony that humans

are both brilliant and abnormal, sensitive and savage, exquisitely caring and painfully indifferent, remarkably creative and incredibly destructive to oneself and others. The ability to envision and conceptualise has both positive and negative effects since it makes people more prone to anxiety states, which lead to a type of defensive denial (Firestone, 2008). The period of human development is regarded as adolescence is when the sexual organs begin to grow. Rapid physical changes can be exciting, terrifying, or baffling. According to the Centre for Disease Control, some teenagers mature early, while others mature later. Either way, this might increase the stress of standing out as different (Centres for Diseases Control & Prevention, 2021). In adolescence, there is a development of cognitive abilities as a result of developmental changes in the brain. Different part of the brain makes different changes at a different time (Feldman, 2016).

A substantial transition occurs in adolescents from straightforward, tangible, and global self-descriptions to values, emotions, and attitudes (Rudolph, 2009). According to the National Institute of Mental Health (NIMH, 2017), adolescents go through psychosocial development which is characterized by behaviours such as rebellion and abstract reasoning. At this time of their life, they develop complex thinking abilities with regards to their self-esteem, self-identity and becoming future-oriented. Many people begin experimenting with alcohol and or drugs during adolescence and young adulthood. Although experimentation may not always lead to addiction, the majority of persons with substance use disorders began using before the age of 18 and developed the disease by the age of 20 (Bagley, 2019). Behavioural

disorders, adolescent substance addiction issues, and even physical diseases are all common signs of anxiety and stress (NIMH, 2017).

Empirical Review

Conceptual Background of Slums

One of the adverse indicators of development is a slum. It confirms the inadequacy of basic amenities in a place as the population increases in our urban centres (Singh & Law, 2016). Poverty, absence of jobs and migration propel the urban poor to live in slums. The term 'slum' is hard to define depending on many factors such as affordable housing, access to safe drinking water, proper waste disposal or road access. Slums have synonyms such as informal settlements, squatters and ghettos. Slums have been defined by many institutions based on various indicators. This study focuses on accessing the experiences of adolescents in slums.

Definitions of Slum

The term 'Slum' was initially used in London to describe a room of low status or desolate part of a town in the nineteenth century but it has been through so many reiterations and applications thereby being defined differently by various institutions (Nolan, 2019). According to UN-Habitat (2016), a slum is a community of people sharing one roof in an urban area who lack one or more of the following: sufficient living space, which means no more than three people sharing one room, easy access to safe water, access to adequate sanitation shared by a reasonable number of people, and security of tenure. Durable housing of a permanent nature that protects against extreme climate conditions is also a requirement (UN Habitat, 2016). As such, the United Nation incorporated attention to slums in the Millennium Development

Goals, specifically, Goal 7 which is to ensure environmental sustainability which was to be achieved by 2020 contributing to a substantial improvement of the lives of some slum dwellers.

Britannica defines a slum as a “densely populated area of substandard housing which is characterized by unsanitary conditions and social disorganization” (Britannica, 2012). In general, the term slum has been linked to poor housing conditions and the environment (UNCHS, 2002), insufficient access to basic social services (Abrams, 1966), a lack of rights and tenure to land and property and the concentration of low-income groups in cities or urban areas (Rangwala, 2002). A slum is defined as any human settlement that lacks one or more of the following characteristics: access to water and sanitation, enough living space, durable housing, non-hazardous location, and tenure security (Turkstra & Raithelhuber, 2004). According to Amoako and Cobbinah (2011), insecure residential status, overcrowding, and non-compliance with planning and building standards are some of the characteristics of slums. Hutchinson (1997) also defines a slum as a highly inhabited urban environment that is in disarray and lacks basic amenities such as sanitation, power, and water. The failure of the urban governance system to provide enough housing and social services for the city’s fast-rising population has resulted in the growth of slums. Slum creation is based on city officials’ unsustainable planning and administration of the urban environment, which results in the deplorable conditions that characterize slum settlements (Amoako & Cobbinah, 2011). In the context of this study, a slum is defined as an overcrowded and dirty environment characterised by substandard housing,

narrow or no roads, improper layout and pressure on available social amenities.

Adolescence and Adolescent Growth

Adolescence is defined by the World Health Organization (WHO) as the period between the ages of 10 and 19. Adolescence is the term used to describe the period between childhood and maturity (Joseph et al., 2004). It is also used interchangeably with the terms “adolescent years” and “puberty”. Changes in physical, psychological, and social development occur during this period (Ernst et al., 2006). These changes, which occur during this time, make this vulnerable and adaptable (Steinberg, 2005). For the purpose of this study, an adolescent is a boy or girl who is transitioning from childhood to adulthood and is between the ages of 10-19.

While the biological underpinnings of the transition are ubiquitous, the length of time and qualities that define this era might differ across time, cultures, and socioeconomic environments (Steinberg, 2005). In contrast, Western culture defines adolescence as the period between puberty to 18 – 21. Non-western cultures sometimes mark the start of adulthood with rites of passage that occur shortly after puberty. These rites symbolize the end of a person’s childhood and the admittance of that person into adult society (Levy et al., 2004). Depending on the time in history and the context, this transition from childhood to adulthood may be comparatively short. Adolescence can begin as early as nine years old for some girls and as late as thirteen years old for others, depending on physical maturity. Those who mature earlier than their peers most often appear older than their chronological age when they begin “adolescence” (Levy et al., 2004). As a result, early developing people

are frequently regarded as though they are older, prompting them to act their age. The United Nations Children's Fund (UNICEF, 2005), states that such expectations neglect more age-appropriate socio-emotional development and needs. Adolescence is also experienced differently by people of the same biological age because experiences and physical maturity are not the same.

The age at which puberty begins, the rate at which it develops, and the expression of that growth are all subjective, making even the outward signs of adolescence ambiguous and deceptive (Sisk et. al., 2004). The mentioned transitory phase varies by society and culture. The qualitative definition varies over time and space, much as cultures differ qualitatively in recognizing and describing their adolescents. Puberty also includes the changes that occur internally and externally in the body during adolescence. (Sisk et. at., 2004; UNICEF, 2005).

Biological, psychological, and societal definitions are all available. Puberty events such as menarche for girls and night emission for boys, which convert children's bodies into sexually and physically mature adults, are highlighted in the biological definition. The psychological definition of adolescence is based on the developmental tasks that must be completed (such as creating connections and developing a sense of self), each of which is related to the fundamental job of establishing personal identity. Adolescence, according to sociological definition, is a phase of transition between childhood and adulthood. Physical, emotional, and social maturity occur throughout this period, culminating in increased independence, autonomy, and a stronger sense of personal identity (Kaaya et al., 2002; Stevens-Simon et al, 2001). Sexual maturation and the formation of a sexual self-concept are two

important developmental processes that occur during adolescence (Johnson et al., 2009).

Early adolescence (10-14 years) and late adolescence (15-19 years) are the two primary periods of the transition (UNICEF, 2011). Physical changes characterize early adolescence, which normally begins with a growth spurt and progresses to the development of sex organs and secondary sexual features. Major physical changes normally occur during late adolescence, while the brain continues to develop and reorganize itself. In addition, the ability to think analytically and reflectively is improved (UNICEF, 2011; Johnson et al., 2009). These stages are distinguished by some physical and cognitive characteristics as well as social-emotional changes and developments that have an impact on teenage sexual and reproductive health. Adolescence is a phase marked by numerous changes, including the transition to labour, citizenship, health, education, and marriage/parenthood (Rende et al., 2005). Adolescence is a period in which young people are increasingly forced to make difficult decisions that affect their health and well-being). For this age group, healthy development entails learning how to make educated decisions, manage risks, and negotiate options (Flicker & Guta, 2008). Adolescents' socio-cultural environment may have a significant impact on the development of their sexual self-concept. With rising globalization, urbanization, and other social changes, young people's sexual values are shifting (Rende et al., 2005), with a general trend toward initiating sexual activities earlier in adolescence and a greater value placed on pleasure-seeking over safer sex (Stevens-Simon et al., 2001).

Adolescents' social development is heavily influenced by their surroundings. Adolescents' social growth takes them from the constrained roles of childhood to the more expansive responsibilities of maturity. This transition comprises the following for young people: enlarging their social contacts and taking on more social roles. It is a typical element of healthy development to form new connections and construct identities outside of the setting of the family (Kann et al., 2018). Adolescents can learn how to sustain healthy relationships in multiple circumstances and identify responsibilities they can play in the larger community by interacting with people outside of their familial circle. It is crucial to remember, though, that teenagers will want assistance as they adjust to their new duties. Adolescents can practice cooperation, communication, problem-solving, and decision-making abilities, as well as methods to resist peer pressure, by role-playing and rehearsing strategies demonstrated by peer and adult mentors (Spence, 2010).

This definition of adolescence as the period between 10-19 years ignores cultural differences, historical influences, environmental factors and individual expressions of this stage between childhood and adulthood. The term "adolescent" is a difficult one to define. The definition of this notion varies from society to society and is sometimes modified by the reason behind the term. It sometimes comprises simply individuals aged 10 to 19 years; other times, it includes youth up to the age of 24 years (Steinberg & Morris, 2001). Women and children are the worst sufferers, according to a study conducted by Schneider (2013). They are affected physically, intellectually, and emotionally. The fast expansion of slums and squatter communities has exacerbated urban social, economic, and environmental concerns. In response

to the mushroom expansion of slums, the slum clearance board's rehabilitation programme is completely inadequate. Cross-sectional research of teenagers' health-seeking behaviours found that one-third of the girls had reproductive health issues, and the majority of adolescents sought or preferred quack-based care or visiting a pharmacy (Syeda et al., 2018).

Socio-Economic Influence on the Growth of the Adolescent

The social status of residents in slums is usually very poor, this is because most of them live in relegated sections of the community that comprises poorly built structures with inadequate basic amenities (Singh, 2016). Due to the high illiteracy rate in such areas, it makes it difficult to be employed in the formal sector and so unable to earn meaningful income to cater for the basic needs and the family. So, slum residents are involved in low-level economic activities such as fishing, trading, driving, sewing or hairdressing (Singh, 2016). In a study conducted by Joshi et al. (2013) on the living conditions and socio-economic conditions of slum residents of Mankhurd in Mumbai, it was seen that occupation is an integral part of the socioeconomic status of people, it determined their living conditions which was poor considering the sources of water and light, availability of waste disposal systems and ownership of a house. Alamgir et al. (2009) conducted a study on "Assessing the livelihood of slum dwellers in Dhaka city." The researcher discovered that slum occupants do not have access to formal education and that slum people are engaged in rickshaw pulling, day labourer, petty business, and small job services, among other things, using microcredit income, consumption, expenditure, and socioeconomic data. In agreement with this, a study on the impact of slums on socioeconomic conditions in

Bahawalpur city, Sehrish (2013), using indicators such as employment, literacy rate, child labour, water, sanitation facility, gas, employment, waste disposal, internet etc, she found out that the economic status of the slum dwellers indicated low income resulting to poverty, the quality of the environment was low and environmental degradation due to inadequate infrastructure. Socially, crime and illegal activities were on the rise so suggested government interference to facilitate development. Also, a survey conducted by (Guria & Pandey, 2013) on the living conditions and housing environment in slum dwellers suggested that the socioeconomic condition of slum dwellers were not good and this was seen in their income and expenditure pattern, they had the greatest hardship yet their main focus was on celebrations and having fun. However, a study conducted by Ali and Toran (2003) showed that inhabitants of Gandhinagar Slum assessed inter and intra migration as well as socioeconomic strata. The socioeconomic conditions of the individuals were judged to be poor based on income and spending. Houses were solid concrete constructions. Drainage, water supply, and street lighting were all adequate. They do, however, experience a library shortage.

According to research, the bulk of migrants have moved to this area because of the low cost of living. The majority of slum inhabitants enjoy a lively after-work life, frequenting outdoor recreational areas and seeing family regularly. Adedeji (2004) found out in his research and concluded that housing as a unit of the environment has a significant impact on the community's health, efficiency, social behaviour, contentment, and general welfare. It represents a society's cultural, social, and economic ideals since it is the best physical and historical proof of a country's culture. Siding with Adedeji

(2004), a cross-sectional community-based study conducted using convenience sampling in a city in Western India by Jayesh et al (2019) on adolescents' school girls living in slums indicated that some of the adolescent girls were engaged in drug abuse, child abuse and other domestic problems which in the long run, harm their adult lives. It was recommended that education on the use of social media and parental control be essential.

Ahmed et al (2019) studied the socio-economic status of transferred and non-transferred urban slums in Faisalabad, Pakistan using a survey and basic parameters such as education, health status, income, housing status disclosed that the poor slum dwellers face much worse socio-economic conditions due to poor sanitation, improper waste disposal and drainage systems, being unambitious when it comes to higher education level, the mortality and birth rate was high, poor housing status and poverty. Recommendations for government intervention were made to make things better. Correspondingly, similar results were seen when the association between living environment and health status of urban communities in Mumbai was investigated in a study undertaken by (Karn et al., 2003). The researchers discovered that living conditions vary greatly from pavement dwellers to squatters and slums in his survey of 1070 households. Overall, 33% of houses were flimsy, 39% were semi-permanent type and 28% were cemented constructions. Income, literacy, sanitation, and personal cleanliness all had an impact on people's morbidity, according to his research. The study demonstrated the impact of socioeconomic and environmental factors on the health of urban poor people.

Sexual Reproductive Health of Adolescents

Adolescence is a time when people explore and express their sexuality. Sexual relations begin in adolescence for many teenagers, whether they are married or not. Too early and undesired pregnancies, as well as sexually transmitted illnesses, including HIV, are all consequences of unprotected intercourse among teens (Kar et al., 2015). Adolescents who become pregnant, especially those in their early teens, are at risk for difficulties during pregnancy and delivery. Furthermore, children born to adolescent moms have a higher risk of death and morbidity than those born to older women (World Health Organisation, 2015). According to Chandra-Mouli et al. (2014), adolescents are at increased risk of undesired pregnancies and infections due to a lack of information and skills, limited access to contraceptive options such as condoms, and vulnerable to pressured sex. Furthermore, a variety of barriers to their healthcare consumption may make it difficult for them to acquire the advice and treatments they require (UNAIDS, 1998). Unwanted pregnancy is frequently thought to be a problem only for adolescent girls, but new research shows that adolescent fathers face many of the same challenges as young mothers: an early transition from adolescent to parent; social isolation; relationship problems; and social and family resistance to their active participation as fathers. In developing nations, maternal mortality is two to five times greater in females under the age of 18 than in women aged 18 to 25 (Chen et al., 1974; Harrison 1985). According to the World Health Organisation (World Health Organisation, 2002), adolescent abortions are projected to be around 2.5 million each year, accounting for 14% of all unsafe

abortions. A further 4.8 million (26%) unsafe abortions are performed on young women aged 20 to 24 (World Health Organisation, 2002).

Poverty

Adolescents are affected by their parents' behaviour in situations of poverty. Research has shown that the effects of parents' poverty and economical and psychological stress have adverse effects on the development of a child. Issues like unsafe accommodations, financial constraints, broken homes and parental depression undermine the growth of the adolescents (Kejerfors, 2007). As shown in a study conducted by Bello (2002), slum areas are places of poverty where many elements that promote slum development and growth may be seen. He recognized that building and population congestion were powerful elements in the creation of low environmental quality and filthy conditions, which promote communicable diseases and infections in such terrible areas of the city.

Accordingly, Bhandari and Basu (2000) indicate that migrants residing in slum are most negatively affected by the quality of life. This conclusion was made based on the fact that their low-income levels force them to settle in unhealthy and congested places that lack necessities such as drainage and sanitation, housing, and water supply, etc. for a healthy living. Slums are also breeding grounds for crime, pollution, and health hazards. Hari (2006) found out that the growing trend of rural-urban migration is urbanising poverty, increasing the danger of homelessness, particularly among slum residents in emerging nations. In metropolitan places, slum inhabitants are mostly the minority and silent. In urban slums, interactions between poverty and insecure

lane tenure contribute to further degradation of the economic status of the slum residents. This then results in a vicious cycle of poverty (Hari, 2006).

Notwithstanding the problematic nature of slum communities, some authors and development agencies say that slums have intricate social relationships, with a friendly, intimate, and close-knit society similar to that found in small towns and rural areas (Asamoah, 2010). Despite considerable advancements in development over the previous century, absolute and relative poverty in many parts of the world continues to rise. Poverty affects people of all ages, but it is especially harmful to teenagers' health and development. Pressure to earn a living at a young age, for example, may make it difficult for children to stay in school and receive a quality education, as well as subject them to exploitation and abuse by irresponsible adults.

Education

The value of formal education in the development of adolescents cannot be overstated. Schools provide an atmosphere in which students can learn new things and improve their literacy, numeracy, and critical thinking skills. Education is a critical instrument for both socioeconomic growth and health improvement. Schools are an important source of health-related information and counselling, as well as a location where health screening and services can be provided (Hanushek et al., 2008). Adolescents in impoverished nations have fewer educational possibilities than those in rich countries, and girls have fewer educational opportunities than boys. Only 13% of girls and 22% of boys in the least developed nations enrol in secondary school (UNESCO, 1995)

Several variables have already been discovered in Ghana contributing to the academic achievements of pupils (Akyeampong, 2010; Osei Mensah, 2012; MoESPR, 2016; Azigwe, et al., 2016) and other nations as influencing positively or negatively learners' academic progress (Bashir et al., 2018). Nevertheless, there is agreement that these variables can be categorized into the pupil, household, teacher, school, and community aspects (Hattie, 2003). Family traits have been identified as a primary source of inequality in students' educational outcomes in numerous research and reports (Jeynes, 2011). According to Hattie (2009), the family environment can be a "nurturing location for students' accomplishments or a poisonous mix of harm and negligence in terms of improving learning. It could as well be a place of low expectations and lack of motivation to learn". Through the provision of rich educational experiences, the family plays a vital role in promoting a child's educational objectives. Starting at a young age, read to them and provide books and educational vacations (Stainthorp & Hughes, 2000).

According to Nyatsikor et al. (2020), the extent to which home-related factors influence students' academic achievement was necessary for investigation. Nyatsikor et al. (2020) emphasize the importance of family socio-economic status. Significant impacts include the home environment and parental participation. A combined assessment of an individual's or family's economic and social position compared to others based on income, education, and occupation has been termed family socio-economic status (Saifi & Mehmood, 2011). The necessity of parental involvement and environment in a child's education is emphasized. (Goodall, 2013). Chaos in the home, on the other hand, predicts poor academic performance (Hanscobe, et. al., 2011).

Poverty among parents has also been connected to students' academic achievement. Poverty contributes to educational failure, according to Birch and Gussow (1979, as cited in Opoku, 2014). Not only because poor children are "culturally disadvantaged", but also because their health and nutritional state may be poor, preventing them from reaching their full intellectual capacity and preventing them from achieving their academic goals. As a result, poverty affects parents' ability to gather finances to support their children's education, decent housing, medical treatment, and social welfare programmes (James, 2011).

Coping Strategies Adopted by Adolescents

Human beings assess, perceive, learn and deal with stressful circumstances and so for their survival and adaptation, they turn to cope. Coping can safeguard or intensify the effects of stress mentally, psychologically and health-wise. Agnew (2012) claims that adolescents with strong cognitive abilities lessen the significance of stress and can cope when faced with challenges because they can develop special problem-solving skills. Understanding the formation of coping requires an understanding of the developmental processes that lead to it, as well as the environmental contexts in which it takes place. Families, peers, and schools place demands on teenagers, which can be stressful; nevertheless, they also serve as resources in the coping process (Lazarus & Folkman, 2014).

Although a wide range of coping techniques have been observed and with categories used in various research being inconsistent, the commonest categories appear to be; problem-solving, emotion distraction, and avoidance coping strategies (Guo, 2015). They defined problem-solving coping

techniques as an individual's active planning and efforts to alter the psychological stress environment. An individual's attempt to lessen the bad emotion created by stressful events is described as an emotional distraction technique, whereas an individual's desire to remove from the source of stress is described as an avoidance strategy. Specific coping behaviours are included in each coping strategy category. Individuals reappraise their surroundings and make judgments about the success of their responses after deploying coping methods. As a result, assessment affects the deployment of coping mechanisms, which in turn affects the environment's reappraisal. It's also worth noting that these coping techniques are mostly behavioural and represent the personal resources that early adolescents have.

Coping entails attempting to manage stressors; therefore, it can be effective or inefficient by definition. Coping efficacy has been characterized in the general psychology literature as the quality of fit between environmental demands and the person (Lazarus & Folkman, 2014). Effective coping skills help people perform better and manage or changes the stressor. One method to address pressures throughout the transition from childhood to adolescence is to develop effective and good coping behaviours. Identifying distinctions between ineffective and inefficient coping attempts with specific stresses, on this account, would give valuable information regarding coping effectiveness. Individuals living in a collectivistic culture may engage in more passive or avoidant coping as a result of their tendency to appraise stressors as a threat, whereas those with a more individualistic orientation are expected to engage in a more active approach to coping as a result of their tendency to appraise stressors as a source of opportunity (Skinner et al., 2007). Despite having a

larger number of coping responses than children, adolescents can choose the most efficient coping responses for a given stressful demand (Aldwin, 2000). These data suggest that teenagers can employ cognitively based coping methods more frequently and successfully than children from a developmental standpoint.

Esiri (2016) accentuated that as adolescents grow up, they associate with friends more especially when the parental presence and attachment are less and so they are influenced by their peers. This influence could be positive or negative. In slums, adolescents are exposed to a wide range of behaviours such as drug use, violence, prostitution and other forms of social vices which influences their behaviour and may cause them to be delinquents (Tan et al., 2012). A study conducted on adolescents in a metropolitan city in India showed that adolescents in slums adopt some high-risk behaviours, substance abuse, injury and violence, and bad eating habits to cope with their environment (Jayesh et al., 2019).

Another research on coping with unintended pregnancies of adolescents in Nairobi's slums by (Kabiru et al., 2014) showed that adolescents faced different kinds of socio-economic and health problems in their environments and with unintended pregnancies, the main coping strategy to adopt is dropping out of school. It was not just the pregnant girls who drop out of school but sometimes the boys who impregnated the girls also drop out to fend for the girls and babies. Other strategies included abortion or carrying the pregnancy to full term. Adolescents who were not pregnant believed that the best strategy to cope with their difficulties in their communities was a change in behaviour to prevent unintended pregnancies, these changed

behaviours included abstinence, self-control, avoiding bad company, employment and the use of contraceptives. Similarly, research conducted by Mccubbin et al. (2015) to analyse the coping pattern of adolescents' health risks behaviour with the use of drugs, showed that there were two different coping strategies adopted; complimentary and competing coping strategies. He suggested programmes be designed to help address the stress and coping associated with adolescents.

Employment

Many adolescents drop out of high school before graduating. A significant section of the population looks for work in the unorganized sector. There are an estimated 73 million teenagers between the ages of 10 and 14 who work in unhealthy conditions around the world (UNICEF, 2005). Furthermore, millions of adolescents live and work on the streets around the world, placing them in danger of sexual exploitation, substance misuse and injury (WHO, 1997). According to estimates, the urban adolescent population in developing countries would increase by 60% between 1970 and 2025. (World Urbanization Prospects, 2018). Governments and civil society face significant problems since the number of teenagers living in economically depressed metropolitan areas is expected to rise rapidly.

Parental Involvement

Parents and other adults who care for or deal with adolescents should understand adolescent development and keep up to date on current adolescent realities. If parents and loving adults are aware of the obstacles and opportunities that today's adolescents encounter, they may better assist and encourage them in their careers and personal life (Kann et al., 2018). Set

examples of healthy relationships, monitor and get to know adolescents' friends and dating partners, encourage participation in activities adolescents care about, exhibit empathetic behaviour, and teach adolescents how to deal with peer pressure are all ways parents can assist their adolescent social development (Spence, 2003).

Roles of Government Agencies in Planning and Managing of Slum Areas

Urban planning, according to the UN-Habitat, is a type of government practice that may be found in almost every country (UN Habitat, 2009). Urban planning is practised in several ways, and its role varies accordingly (UN Habitat, 2009). The majority of planning theory literature portrays planning as a progressive, reformist, and modernist societal undertaking. Planning, on the other hand, is the application of public policy to issues such as urban and regional development, zoning, and land use. Any entity with a declared or plausible interest or involvement in a policy problem is referred to as a stakeholder.

The number of stakeholders to consider for analysis varies depending on the complexity of the targeted reform area and the type of change proposed, as well as the incentive to involve them if they are not organized. This encompasses intended recipients and intermediates, as well as those who are favourably impacted, those who are involved, and/or those who are normally excluded from the decision-making process (World Bank, 2001). A stakeholder is particularly important in poverty reduction when it comes to urban planning because it captures the numerous groups of the poor who are frequently left out of decision-making on issues that impact them. Participation is vital in institutionalism because of the interaction between

stakeholders and decisions made about programmes, projects, or activities (Ndaguba et al., 2019)

Challenges Faced by Institutions in Urban Planning

The failure of city officials to apply urban development and management norms, according to the literature, has resulted in the rise of slums. Most municipal governments in developing nations are so overwhelmed by the rapid growth of slums and the proliferation of informal settlements that their regulatory responses are either too late or ineffective. As a result of developers, non-compliance with construction codes, development control mechanisms in Africa are frequently unable to direct and manage urban development (Amoako & Cobbinah, 2011).

According to Lucci et al. (2015), usually, slums grow due to factors such as rapid urban population growth, inadequate affordable housing and poor governance, especially when the pace of development exceeds governments' ability to provide the agenda for affordable housing for a growing population. Again, the government are not willing to act as they believe that providing services needed and making conditions there better will create more slums but as these areas remain unserved for a long time makes the slums grow. Statistics on slum settlements are difficult to produce because they are not recognised and recorded (Lucci et al., 2015). Some government definition of slum differs from the UN-Habitat's definition though it is the only source of globally comparable data on slums and this limitation can present contradictory data (Satterthwaite & Mitlin, 2013). As a result, when sustainable and preventive efforts are postponed, decent sections of urban regions undergo slum formation (Hiraskar, 2013).

Carr-Hill (2013) argued that data collected during census for small geographies is mostly scanty and so in many cases, they rely on survey data. Data collected through the survey are sometimes not sufficient to give the information needed on informal settlements. Also, the population in slum areas are underrepresented because of the difficulty in identifying and interviewing them. Furthermore, tenure security which is a prime concern for residents of informal settlements is presently not included in most measurements due to data limitations. Finally, existing data on slums gets out of date quickly, as the population of urban informal settlements can change rapidly due to internal and circular migration (Lucci & Bhatkal, 2014).

Amoako and Cobbinah in (2011) worked on slum improvement in Kumasi Metropolis in Ghana, and it revealed that despite repeated attempts by local governments and development partners to ameliorate slum conditions in Ghana, little progress has been made in terms of long-term urban planning and administration. Slum expansion in the Kumasi metropolis is attributed to rising rural-urban migration, a lack of enforcement of planning standards, and a lack of coordination among slum improvement programmes, according to the study. They identified that because slum dwellers were not active, community acceptance and comprehension of slum intervention initiatives have been a major difficulty in guaranteeing the sustainability of these interventions in Kumasi (Amoako & Cobbinah, (2011). It was recommended that to ensure sustainable urban planning and management in slum communities and to prevent further slum development, national and local governments, in collaboration with private and non-governmental organizations, should initiate and implement policies aimed at providing low-

cost, environmentally friendly housing made of locally sourced materials to slum dwellers and to prevent further slum development. This has the potential to prevent the spread of slums while also enhancing the quality of slum houses, particularly in developing countries' cities (Amoako & Cobbinah, 2011)

Adolescent Rights and Policies

There have been international and national commitments to protect children since the inception of the United Nations. Countries pledge and vow to protect children against the violation of their rights as found in a UNICEF (2005) publication. Yet, a UNICEF (2005) publication indicates that it appears children are still under attack. According to UNICEF (2005), even though the world's perception of children has significantly improved, nations are doing little to assist the healthy development of children around the world. The UN's promises are mostly preserved in the conference files. Poverty, armed conflict, HIV/AIDS, powerlessness, and marginalization are all current threats to children's right to life. Kessen (1965) had previously determined that it was necessary to figure out how society can be reformed to fulfil its promise to the youth by providing "more equal growth-inducing conditions for all children". Almost five decades later, the same conclusion may be drawn about the state of the world's children. This demonstrates the need to go a step further in developing techniques for assessing state parties' performance in implementing children's rights (Riggs 2023).

CHAPTER THREE

RESEARCH METHODS

Introduction

To address the research objectives for this study, this chapter describes the research methodology. It covers the research approach used, the study area, the philosophical viewpoint, the research design, target population, sampling size selection, sampling procedure, data collection method, data source, data management, data analysis and ethical considerations.

Study Area

The focus of the research was in Elmina, popularly known as Edina, which is the capital of Komenda-Edina-Eguafo-Abrem Municipality in the Central Region of Ghana. Elmina has a population of 33,576 (Ghana Statistical Service, 2021). Elmina lies on latitude 5.1053°N and longitude -1.3421°W. It is positioned at the anchorage of the Atlantic Ocean and 12 kilometres west of Cape Coast. Elmina remains the first settlement for the Europeans and has an estimated population of 8,235 adolescents between the ages of 10-19 (K.E.E.A Statistical Department, 2020). Elmina is a mainly fishing community and a fishing port on the south coast of Ghana, there are other economic activities such as small-scale mining and salt mining (GSS, 2010). Elmina can boast of the first castle built on the then Gold Coast (Elmina Castle) which serves as a tourist attraction. It can also boast of the Dutch Cemetery, Elmina Java Museum, Coconut Groove Hotel, Elmina Beach resort and other hospitality facilities that serve the needs of tourists in the area. Despite the town boasting of such resources, the living condition of people in the community is low. Elmina has several communities and among them, there

are slums namely, Tetter Kessim, Ayisa and Esarmu. These slum communities all are characterised with substandard housing, poor sanitation and poor layout. However, Tetter Kessim has the highest population among the threes communities and it has narrow roads. Ayisa has no roads and is the filthiest community and is at the sea shore. Esarmu is surrounded by a lagoon and mainly inhabited by fishermen and their families. Most people in Elmina township find it extremely difficult to build or rent good houses. This has resulted in most of the people resorting to seeking accommodation in substandard houses. As these people marry and reproduce and people migrate there, more of such substandard houses are built and eventually, the area is turned into slums.

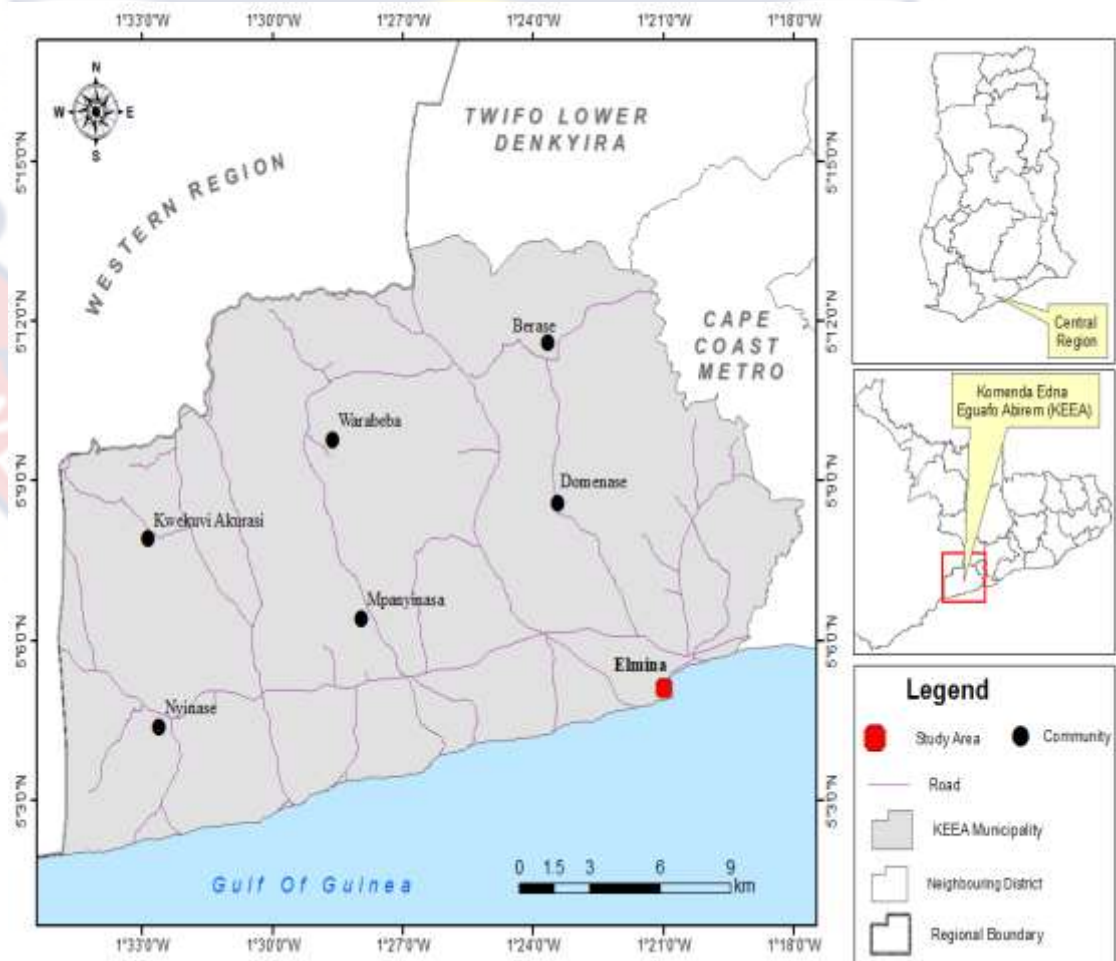


Figure 4: Map of Elmina

Source: Department of Geography and Regional Planning

Figure 3 shows the map of Elmina and its adjoining communities. The area marked red shows the slums where the research work was carried out. As seen in the map, Elmina is located along the Gulf of Guinea.

Philosophical Viewpoint

Every researcher has his or her beliefs and assumptions when carrying out research. As opined by Dainty (2007), there is the need for a philosophical viewpoint toward any inquiry. The researcher associates herself with the pragmatic research philosophy. The pragmatic research paradigm was considered because it does not get involved in contrary abstract concepts such as truth and reality and also it helped generate different perspectives to compare and contrast. Research is carried out in diverse ways, therefore there is more than a single point of view to present a picture of a situation due to multiple realities (Saunders et al., 2012). Creswell (2014) as cited in Morgan (2007) and Patton (1990); this philosophy rises out of circumstances, actions and consequences, the researcher's concentration is on the problem at hand rather than the methods to use and so used all approaches that helped to understand the problem well and then used varied approaches to derive knowledge about the problem at hand. Where positivism deals with quantitative methods and deductive reasoning, interpretivism deals with qualitative methods and inductive reasoning. However, pragmatism infuses both methods to provide a more flexible approach to solving a problem (Creswell and Clark 2007). This philosophy was adopted for this study because it provided a better understanding of the research problem and objectives. The strengths in both the positivist and inter philosophy make the pragmatic philosophy stronger and more advantageous thereby reducing the weakness in

using one philosophy. Thus, a combination of methods was used to find answers to the research questions.

Research Approach

A mixed-method approach was adopted to draw out relevant information for the research. It is an investigative technique involving the use and analysis of both quantitative and qualitative data, therefore, integrates these two data by using different formats which may include theoretical framework and philosophical assumptions (Creswell, 2013). This approach of inquiry provides an additional comprehensive approach to understanding the research problem by not approaching each separately and it helps to compare different perspectives from both qualitative and quantitative data (Creswell, 2014). This study employed both quantitative and qualitative analyses of responses obtained from respondents. Specifically, responses from questionnaire were quantitatively analysed while responses obtained through interview, focused group discussion and observation were qualitatively analysed.

Research Design

The research design is the overall strategy to find answers to the research questions for the study. This is seen in the measures for collecting, analysing, interpreting, and reporting data in scientific studies (Creswell et al., 2007). The design guided the researcher on the type of data collected, methods used and informed the decisions made by the researcher during the study as well as systematic approaches the researcher used to interpret the findings at the end of the study (Creswell et al., 2007).

For this research, the exploratory sequential mixed method design was used, which is a type of mixed-method research described by Creswell (2014). The design was deemed appropriate for the research questions because it helped the researcher to explore the experiences of adolescents living in slum communities in Elmina. The exploratory sequential design included two-phase research where the researcher in the first phase gathered qualitative data, that explored the views collected from the participants and later analysed the data collected then use the results to build the second phase (quantitative data). The second phase was used to construct an important instrument fit for the study (Creswell, 2014).

Target Population

Ransford (2018) described a target population as the total aggregation of participants that meet the selected set of criteria in a study. The emphasis on adolescents in in slum areas in Elmina is important because they have not received adequate research attention over the years, unlike other slum settlements in Ghana. The target population used for this study were adolescents between the ages of 10-19 who lived in slums areas in Elmina and key informants are personnel from the Ministry of Health, personnel from the Ministry of Education and officials from the Planning Department in K.E.E.A. The total number of adolescents in the slum areas in Elmina is 1,694 (K.E.E.A. Statistical Department, 2020). However, only the data for Tetter Kessim was available, that is 688 adolescents. A census was conducted by the researcher on the other two slum areas to get the number of adolescents that lived in Ayisa and Esarmu to conducted the research.

Table 1: Population for the Study

Variables	Population
Tetter Kessim	688
Ayisa	486
Esarmu	528
Total	1702

Source: K.E.E.A. Statistical Department, 2020 and field data 2020.

Sampling Size and Sampling Technique

Sampling refers to the process of selecting a portion of the population to represent the entire population. The sampling technique is significant for every research since the whole population cannot be used (Henry, 2009). Generally, sampling enables the researcher to study a relatively small number of units in place of the target population and to obtain data that are representative of the whole target population while the sample consists of a carefully selected subset of the units that comprise the population. In most cases, researchers opt for an incomplete coverage and study only a small portion of the population called Sample (Amedahe & Asamoah, 2015). Out of the target population, a sample of 313 was used for the study, the decision of the researcher to settle on this figure is informed by the table of determining sample size proposed by Krejci & Morgan (1970). According to the table, it is appropriate to use a sample of 313 for a population of 1702 for a study.

Probability Sampling

There were three slum communities in Elmina and all three were used for this study. They include Esarmu, Ayisa and Tetter Kessim. These three communities were proportioned to know the number of participants to sample

out from each community. This was necessary as the three communities had different populations and fair distribution was essential.

The formula $n/N \times s$ was used where n is the population for each community, N is the population and s are the sample.

Tetter Kessim $688/1702 \times 313 = 127.33$ approximately 127

Ayisa $485/1702 \times 313 = 89.19$ approximately 89

Esarmu $528/1702 \times 313 = 97.09$ approximately 97

For each of these communities, systematic sampling was used to identify structure with adolescents between the ages of 10-19 residing. These buildings were selected from an orderly sampling frame. Using the formula

$$\text{Tetter Kessim: } = \frac{688}{127} = 5$$

$$\text{Ayisa: } = \frac{485}{89} = 5$$

$$\text{Esarmu } = \frac{528}{97} = 5$$

The researcher started the sampling by identifying a landmark in the community like churches, schools, fuel stations and cemetery that served as a benchmark for all three communities, for the house close to the benchmark the sampling started and then every 5th structure was selected. In cases where selected structures had no adolescent living there, the next structure was used then each 5th structure. This sampling frame was used for all the three communities and the for Tetter Kessim and Esarmu, church buildings were used as benchmarks but for Ayisa, a fuel station was used. This procedure ensured that each element in the population has an equal probability of being selected.

Simple Random Sampling was used to select the adolescent from the selected structures. In cases where the structure had just one adolescent living

there, that adolescent was used with the consent of the parent and the assent of the adolescent but in cases where there was more than one adolescent, the researcher used the lottery method, the names of the adolescents were written on sheets of paper and placed in a box and shuffled. One of the sheets was picked randomly from the box. The name picked is used for the study following ethical protocol.

Non-Probability Sampling

Purposive sampling was used to sample key informants with particular expertise and knowledge of slums and adolescents. Their expertise was helpful during the exploratory phase (Palinkas et al., 2015). In this study, the sampled participants who were selected had adequate, important and relevant information on the subject matter of the study. The participants who were purposively selected include:

1. The head of the Planning Department in K.E.EA. Municipality.
2. Personnel from the ministry of health
3. Personnel from the ministry of education
4. Parents from each of the 3 communities

Again, convenient sampling was used to select sampled adolescents for Focus Group Discussion because they were most accessible.

Research Instruments

The study employed an in-depth interview guide to elicit responses from Parents, Personnel from the Ministry of Health, Personnel from the Ministry of Education, officials from the Planning Department in K.E.E.A and other relevant stakeholders to the study. The interview was face-to-face thus

establishing rapport with the participants which made them feel comfortable and also helped to generate more insightful responses.

Questionnaires were given out to adolescents to respond. The questionnaire consisted of a set of questions that aimed to collect information from the participants about their experiences. Questionnaires were analysed using SPSS version 23. The questionnaire and FGD guide focus on key areas such as pupils' background data, socio-economic conditions, coping strategies and government/relevant institutions interventions. Audio recorders were used to record responses from in-depth interviews and focus group discussions.

Data Collection Methods

Questionnaires were used to survey the adolescents living in slums. A questionnaire according to McLeod (2019), consists of a series of questions used to gather information from research participants. It is quick and provides large information from a large sample but sometimes respondents leave questions unanswered. Despite its weakness, the study used a questionnaire to acquire quantitative data from the respondents. The questionnaires gathered information about the demographic data of respondents, the socio-economic environment influence on the growth of the adolescents, coping strategies adopted by adolescents and a section for adolescent pregnant girls and adolescent mothers only. Part 1 obtained the demographic data from the respondents. Part 2 of the questionnaire obtained the socio-economic influence on the growth of adolescents. Part 3 of the questionnaire was made up of four-point Likert Scale statements that required respondents to tick, where appropriate, their responses. Respondents were to indicate where they Strong Agree (SA), Agree (A), Disagree (D) or Strongly Disagree (SD) with a

particular statement. The premises were on the coping strategies adopted by the adolescents. Part 4 was a section for only adolescent pregnant girls or adolescent mothers and it was to obtain their experiences as adolescent mothers or mothers-to-be living in slums.

The aim was to survey 319 adolescents living in slum areas. Adolescents in this study depict a person who falls between the ages of 10-19 years. Participants were given 15 minutes each to fill the questionnaire anonymously, adolescents who couldn't read or/and write, the researcher used the questionnaire as interview schedule in gathering the information on their behalf. The surveys were done at all the three areas; Esarmu, Ayisa and Tetter Kessim normally in the afternoon till 6:00 PM on weekdays whiles on weekends it is done in the morning till 6:00 PM in the evening. In-depth interviews were also used as a form of data collection to gather information from the planning department in Komenda Edina Eguafo Abrem, Ministry of Education and ministry of health using interview guides to find answers to the research questions. These interviews were done face to face.

Field Work

The researcher with her research team first visited the study areas for a reconnaissance survey in September 2020 to acquaint themselves with the area and lifestyle. The next visit was in November and December 2021 to conduct a census of the adolescents in the two communities where population data was not given. In January and February 2022, the third and subsequent visits were made to collect data from the adolescents on their experiences as they grow up. The questionnaires were read out to adolescents who could not read and

write and it was also explained to them in their local dialect for them to be able to give appropriate responses.

Recruitment and Training of Field Assistant

Recruitment of ten field assistants who are graduate students was recruited based on a common set of characteristics or criteria such as experience in data collection exercise and training for a week for this study. The training included understanding of objectives, sampling, methodology, instruments, rules and maintenance of project documentation, interviewing skills, how to ask interview questions, how to document interview feedback, and also how to give feedback on responses and all ethical issues to consider.

Data Collection Procedure

The study relied on multiple data sources to obtain the information required. After approval from the institutional review board for ethical clearance, data was collected on adolescents and slums with their consent and approval given. Also, the data source included was a review of existing literature and direct observations on slums and adolescents. Surveys were conducted with adolescents, after gaining parental/guardian consent and assent from the children, to know how their experiences with their environment.

In-depth interviews were conducted with parents, school authorities, an official from the planning and managing sector and health officers. Questionnaire and focus group discussions with adolescents. The research team applied adequate measures to ensure that techniques were child friendly in cases where adolescents are directly involved besides applying necessary ethical procedures. Overall, the study relied on multiple sources of information to ensure both construct and internal validity through data triangulation. The

duration of the entire data collection process was within two months and each participant used between 15-20 minutes to respond to the items in the questionnaire and 30-40 minutes for the interviews. Due to the COVID-19 pandemic, the research team wore nose masks and hand sanitisers with them. Nose masks were given to participants who didn't have and made to sanitize their hands before and after responding to questionnaires. The required distances and all other safety protocols were followed during the data collection period.

Data Analysis

Data analysis is the process of putting facts and figures together to solve a research problem. Its purpose is to identify, transform, support decision making and bring a conclusion to research. In the context of this study, both qualitative and quantitative data were collected. Every data gathered has been cross-checked to avoid any form of error that would affect the analysis of the data. Descriptive analysis was used using the SPSS to analyse the quantitative data using mean, mode and standard deviation and the results of this data were presented using tables and charts. Qualitative data on the other hand was analysed based on the various themes and objectives of the study using narrative analysis and the data was presented in the form of text.

Ethical Consideration

There was complete adherence to ethical standards throughout the study. Ethical clearance was obtained from the Institutional Review Board of the University of Cape Coast. After seeking consent from the parents of participants, respondents were encouraged to participate in the study voluntarily and information about the research was read to the participants.

Participants were not forced into answering questions they were not comfortable with. Counselling sessions were provided for adolescents who broke down emotionally. To ensure anonymity and confidentiality, participants were asked not to write their names on the questionnaire. For those who were interviewed, they were briefed about the intent of the work as purely for academic purpose and that their identity was never going to be revealed. All citations were properly acknowledged. There was no monetary compensation from the study.



CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

The purpose of the study was to explore the effects of slums on adolescents living in slum communities in Elmina. Specifically:

1. Assess the influence of the socio-economic environment on the growth of adolescents in slums in Elmina
2. Examine the coping strategies adopted by an adolescent in slum areas in Elmina.
3. Explore the role of stakeholders in planning and managing slum areas in Elmina.

This chapter contains a detailed presentation and discussion of the data analysis and results of this study. The study selected 319 adolescents from three different communities and other key informants. Adolescents were selected using systematic and simple random sampling and were chosen from a variety of socio-demographic backgrounds, they did, however, share one major characteristic; that is, they all lived in slums. Purposive sampling was used to select nine parents (three from each community), one personnel from the education sector, one personnel from the health sector and one personnel from the Planning Department of the K.E.E.A. assembly office. Focus Group discussions and questionnaires were used to collect information from the adolescents and interviews were conducted with the key informants for information for the study. Descriptive analysis using the SPSS and narrative analysis tools were used for the analyses.

Results

Socio Demographic Information of Adolescents

Table 2: Socio Demographic Information of Adolescents

Variable	Frequency	Percentage (%)
Sex		
Male	116	37
Female	197	63
Total	313	100
Age		
10-14	136	43
15-19	177	57
Total	313	100
Literacy Rate		
Yes	63	20
No	250	80
Total	313	100
Household Size		
1-5	102	33
6-10	123	39
11+	88	28
Total	313	100

Source: Field survey, 2021

The socio-demographic information of the adolescents gives a clear picture of the adolescents in order to get fair representation in the data collection well as a better understanding of the adolescent.

Both genders were used for the study which female accounting for 63%, while the males accounted for 37% out of 313 respondents, (see Table 2). The ages of the respondents were put in groups of two, early adolescence (10-15years) and late adolescence (11-19years). 57% of the respondents were

in their late adolescence stage while 43% were in their early adolescence. From the table, 250 respondents which constitute 80% were able to read and write while 63 respondents representing 20% indicated that they were not able to read and write. Even though most of the respondents were in school, some could not read or write due to truancy. According to the results in Table 5, 102 constituting 33% of the total respondents belonged to a household size between 1-5 members, 123 representing 39% of the respondents belonged to a household size between 6-9 members and 88 represented 28% of the respondents with 11 and above members as their household size.

Table 3: Socio Demographic Information of Respondents

Variable	Frequency	Percentage (%)
Religious Denomination		
Christian	274	88
Muslim	23	7
Total	313	100
Person Respondents Live With		
Parents	237	75.7
Guardian	50	16
Partner	25	8
Alone	1	0.3
Total	313	100
Number of Adolescent Siblings		
1 – 5	180	57.5
6 – 10	69	22
10+	63	20.1
None	1	0.3
Total	313	100

Source: Field Survey, 2021

Table 3 shows the religious denomination of respondents who responded to the questionnaire. From the table, 274 of the respondents which

represent 88% said they were christians, 23 respondents representing 7% said they were muslims while 16 respondents representing 5% said they were traditionalists. The research made use of respondents from the three main religious groups that exist in Ghana. The results show the person respondents were living with. From table 3, it is observed that 237 respondents representing 75.7% were living with their parents, 50 respondents representing 16% said they were living with their guardians, while 25 constituting 8% said they live with their partners and one respondent stay alone. The number of siblings the respondents had who are between the ages of 10-19 years. From the table, 180 representing 57.5 % had between 1-4 siblings who were adolescents, 69 representing 22% had between 5-9 adolescent siblings, 63 constituting 20.1% said they had 10 and above adolescent siblings and one respondent had just one adolescent sibling.

Socio- Economic Environment

Table 4: Level of Education of Respondents

Level of Education	Frequency	Percentage (%)
Primary	122	39
JHS	140	45
SHS	35	11
Apprenticeship	16	5
Total	313	100

Source: Field survey, 2021

Table 4 showed that 140 of the respondents (45%) were in the Junior High Schools. 122 representing 39% were in the primary schools, 35 (11%) were in Senior High School, while 16 constituting 5% had dropped out of school and were enrolled in apprenticeship programmes.

Table 5: Economic Status of Respondents

Economic status	Frequency	Percentage (%)
No	250	80
Yes	63	20
Total	313	100

Source: Field survey 2021

The results presented in Table 5 shows the economic activities the respondents were engaged in. 250 of the respondents representing 80%, indicated that they do not engage in any economic activities while 79 of the respondents representing 25% indicated they engaged in economic activities.

Table 6: Type of Economic Activity Engaged in by Respondents

Type of Economic Activity	Frequency	Percentage (%)
Selling	39	62
Sewing	6	9.5
Carpentry	6	9.5
Hair Dressing	5	8
Servitude	3	4.7
Fishing	4	6.3
Total	63	100

Source: Field survey (2021)

From Table 6, 39 of the respondents representing 62% indicated they sell different kinds of foodstuff. Six of the respondents representing 9.5%, said they were learning how to sew. Similarly, six respondents, also representing 9.5% said they were in carpentry apprenticeship programme. Five respondents, representing 8% indicated they were into hairdressing while three

respondents that representing 3.8% said they were servants. Four of the respondents representing 6.3% indicated they were engaged in fishing.

Table 7: Type of Housing

Type of Housing	Frequency	Percentage (%)
Block building	102	32.6
Mud house	52	16.6
Wooden structure	159	50.8
Total	313	100

Source: Field survey (2021)

Table 7 shows that 102 respondents representing 32.6% were living in block buildings, 52 respondents representing 16.6% lived in mud houses and 159 respondents representing 50.5% were living in wooden structures. From the Focus Group Discussion, a discussant said, *“I live under a shed with my brother. I make sure to cover our belonging with rubber so as not to get them wet. At night if it rains, we sit till the rain stops then we can continue with our sleep”*, (14 years old female).

Another discussant stated, *“due to financial difficulties, my parents moved from the building we were renting into a rented kiosk.”*, (10 years old male).

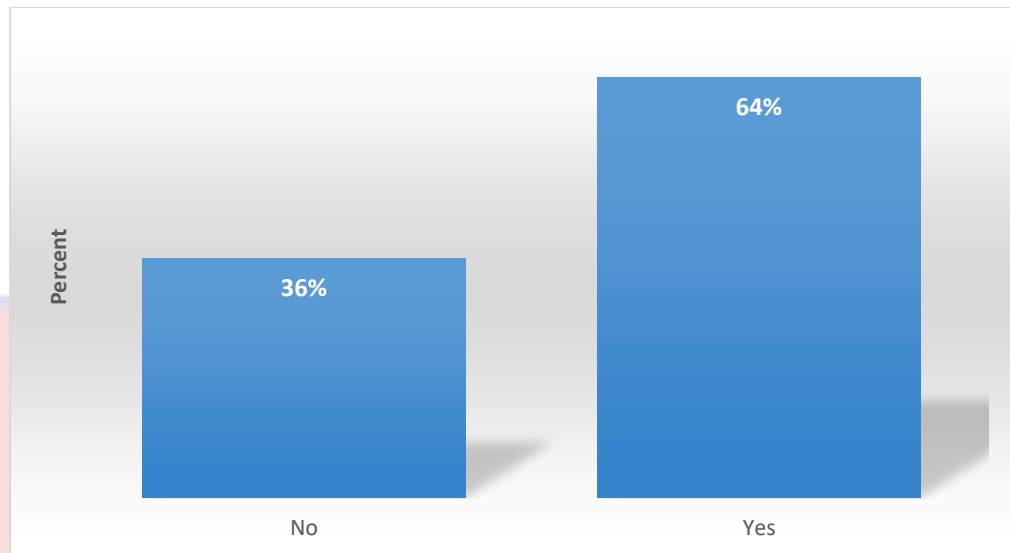


Figure 5: Respondents Access to Health Care

Source: Field survey (2021)

From figure 4, 36% of the respondents had no access to health care while 64% had access to help care when sick. The health personnel said “normally adolescents who came to the hospital from these areas, comes with stomach problems, malaria, skin disease and pregnancies. The adolescents only come to the hospital when their situation is critical, they use all types of concoctions to try to cure themselves. Mostly it is the pregnant adolescents that come to hospital most because it looks like a competition and the new fashion in Elmina, especially Ayisa and Esarmu (Health Personnel).

Table 8: Basic Needs of Adolescents

Needs	Frequency	Percentage (%)
No	241	77
Yes	72	23
Total	313	100

Source: Field survey (2021)

Out of the 313 respondents, 241 representing 77% lacked basic needs like shelter, food and clothing, while 72 representing 23% said their needs were met (Table 8).

Table 9: Livelihood Conditions of Respondents

Livelihood Conditions	Frequency	Percentage (%)
very satisfied	22	7
Satisfied	78	25
not satisfied	114	36
very bad	99	32
Total	313	100

Source: Field survey (2021)

Table 9 shows that 22 respondents representing 7% were very satisfied with their livelihood conditions, 78 respondents representing 25% were satisfied, 114 representing 36% were not satisfied and 99 representing 32% said their livelihood conditions were very bad.

From the focus group discussion, a discussant said, “*we don’t have toilets and bathroom in our house so we go to the lagoon to bath ease ourselves and sometimes we are harassed by bad men*” (15-year-old female).

Another discussant said, “*we have a bathroom but no toilet so we go to the public toilet or the sea shore to ease ourselves*” (17-year-old male).

Again, another said, “*we don’t have both, with the toilet we ease ourselves behind the sea defence but for bathing, we arrange the board for smoking fishes and put the basin in the middle and bath then dispose the water and remove the boards later for smoking fish*” (18-year-old female).

With regards to the disposal of how they dispose of rubbish a discussant said, “*we used to throw our rubbish in the sea then they made the sea defence and*

the chief asked us not to throw rubbish there. So now we sneak at night or dawn to dump them behind the defence and run”(13-year-old male).

Another discussant said, *“we dump our rubbish in the lagoon but when it rains the lagoon gets flooded and brings them back into our houses and so we swept and dump them right back”* (a 13-year-old female).

Table 10: Kind of Challenges Respondents Encounter

Kind	Frequency	Percentage (%)
Financial Difficulties	74	34.7
Discrimination by their peers who live outside the slums	76	36
Difficulty adjusting to the difficult life situation in slums	26	12
Inadequate social amenities	37	17.3
Total	225	100

Source: field survey, 2021

During the survey, it was revealed that some of the respondents faced challenges as can be seen in Table 10. Based on the challenges, 213 respondents who were not satisfied with their living conditions stated that they faced the following challenges. 74 respondents representing 34.7% faced financial difficulties, 76 respondents representing 36% faced discrimination by their peers who live outside the slums, 26 respondents representing 12% had difficulty adjusting to the difficult life situation in slums and 37 respondents representing 17.3% were faced with inadequate social amenities (Table 10).

During the FGD, the discussants talked about their challenges with their environment. From the discussion, one discussant said,

“There are a lot of things wrong with my environment. It is as if we are taking care of ourselves. We are left to make our own decisions. Whether we sleep in the house or not our parents don’t care. This gives us the freedom to engage in any social vices because we lack parental control” (16-year-old female).

Another respondent said; *I am always affected by the noise and smoke from the weed smokers in my area* (19-year-old male).

Another described his environment by saying;

I don’t like my environment because there are a lot of criminal acts there. There was a day my younger brother (10 years) was almost kidnapped. This is because we sleep under a shed with no parents. I being the oldest take care of my siblings when my mother goes on a trek. When she is around too, she joins my father in his room leaving us all alone in the shed. At night we go through a lot of attacks and threats (17-year-old female).

Table 11: Abuse Status of Respondents

Abuse	Frequency	Percentage (%)
No	101	32
Yes	212	68
Total	313	100

Source: Field survey (2021)

Table 11 shows the abuse status of the respondents. 101 representing 32% indicated that they were not abused while 212 representing 68% said they were being abused.

Table 12: Kind of Abuse Respondent Suffer

Kind	Frequency	Percentage (%)
Physical Abuse	85	40
Child Labour	47	22
Verbal Harassment	47	22
Sexual Harassment	25	12
Rape/Defilement	8	4
Total	212	100

Source: field survey, 2021

Table 12, shows that out of the 212 respondents, 85 respondents constituting 40% suffered physical abuse, 47 respondents representing 22% suffered child labour, similarly, another 47 respondents representing 22% were verbally harassed while 25 respondents representing 12% were sexually harassed and eight respondents representing 4% were raped or defiled.

Coping Strategies

Table 13: Coping Strategies of Adolescents

Coping Strategies	SD	D	A	S A	M	SD	Median
I try to grow up as a result of my experience	113(36.1%)	89(28.4%)	66(21.1%)	45(14.4%)	2.14	1.064	2
I try to get advice from someone about what to do	70(22.4%)	101(32.3%)	92(29.4%)	50(16.0%)	2.39	1.004	2
I put my trust in God	40(12.8%)	40(12.8%)	76(24.3%)	157(50.2%)	3.12	1.063	4
I restrain myself from doing anything too quickly	33(10.5)	44(14.5%)	85(27.2%)	151(48.2%)	3.13	1.015	3
I use alcohol or drug to make myself feel better	117(37.4%)	82(26.2%)	73(23.3%)	41(13.1%)	2.12	1.058	2
I make plan of action	80(25.6%)	85(27.2%)	72(23.0%)	76(24.3%)	2.46	1.118	2
I accept my situation can't be changed	85(27.2%)	117(37.4%)	77(24.6%)	34(10.9%)	2.19	.958	2
I give up trying to reach my goal	54(17.3%)	111(35.5%)	88(28.1%)	60(19.2%)	2.49	.991	2
I learn something about the experience	43(13.7)	47(15.0)	66(21.1)	157(50.1%)	3.08	1.099	4

Source: field survey, 2021

Mean of Means =23.12

SD= Strongly Disagree, D = Disagree, A= Agree, SA= Strongly Agree, M= Mean, SD= Standard Deviation.

Each item on the questionnaire had four responses that the respondent needed to make a choice. The responses were coded and ranked accordingly as; strongly agree 4, agree 3, disagree = 2 and strongly disagree = 1. A mean of less than 1.5 indicated that a lot of the respondents strongly disagreed with the statement. A mean greater than 1.5 but less than 2.5 indicated that the majority of the respondents disagreed with the statement while a mean greater than 2.5 but less than 3.5 showed that many of the respondents agreed with the statement. Finally, a mean greater than 3.5 showed that most of the respondents strongly agreed with the statement. A median less than 2 indicated that majority of the respondents disagreed or strongly disagreed to the statement while a median greater than 2 indicated that majority of the respondents agreed or strongly disagreed to the statement.

Table 13 shows the statements that were found on the coping strategies the respondents adopt to be able to cope with their environment on the questionnaire and the results that they produced. Respondents were asked if they try to grow up as a result of their experiences and 113 strongly disagreed with the statement, 86 disagreed, 66 agreed and 45 strongly agreed ($M=2.14$, $SD=1.064$ and $Median=2$) Respondents were again asked if they try to get advice from someone about what to do and 70 strongly disagreed to the statement, 101 disagreed, 92 agreed while 50 strongly agreed ($M=2.39$, $SD=1.004$ and $Media=2$). Again, 40 respondents strongly disagreed with the statement “I put my trust in God”, the same number of respondents, 40, disagreed with the statement, 76 agreed and 157 strongly agreed ($M =3.12$, $SD=1.063$ and $Median=4$). Respondents were asked if they restrain themselves from doing anything too quickly in times of difficulty and 33 responded they

strongly disagree, 44 disagreed with this statement, 85 agreed and 151 strongly agreed ($M=3.13$, $SD=1.015$ and Median=3). Similarly, respondents were asked if they use alcohol or drugs to make them feel better in times of difficulty and their responses indicated that 117 strongly disagreed, 82 disagreed, 73 agreed and 41 strongly agreed ($M=2.12$, $SD=1.058$ and Median=2). When they were asked if they make a plan of action, 88 said they strongly disagreed, 85 said they disagreed, 72 said they agreed and 76 said they strongly disagreed ($M=2.46$, $SD=1.118$ and Median=2). The results showed that when respondents we asked whether they have accepted that their situations will never change, 85 strongly disagreed with the statement, 117 disagreed, 77 agreed and 34 strongly disagreed ($M=2.19$, $SD=.958$ Median=2). Statement on whether the respondents have given up on their goals showed 54 responded that they strongly disagreed with the statement, 111 said they disagreed, 88 said they agreed while 60 said they strongly agreed with the statement ($M=2.49$, $SD=.991$ and Median=2). Lastly, statement on how respondent learned something from their experiences indicated 43 of them strongly disagreeing with 47 disagreeing while 66 agreed and 156 strongly agreed with the statement ($M=3.08$, $SD=1.099$ and Median=4).

Table 14: Number of Respondents that belong to Social Group

Social Group	Frequency	Percentage (%)
No	238	76
Yes	75	24
Total	313	100

Source: Field survey (2021)

Table 14 shows the number of respondents that belong to social groups in their communities. 238 representing 76% said they did not belong to any

group while 75 representing 24% said they belonged to social group. During the Focus Group Discussion, and out of the twelve respondents, four belonged to a social group called Train International Girls. It was a Non-Governmental Organisation that help to train adolescent girls on their rights and reproductive health.

Table 15: Purpose for Joining Social Groups

Purpose for joining	Frequency	Percentage (%)
Sexual Education	40	54
Companionship	21	28
To be assertive	7	9
Reproductive Health Issues	7	9
Total	75	100

Source: field survey, 2021

Table 15 shows that in the survey, 75 respondents belonged to a social group in their community. Out of the 75, 40 respondents representing 54% joined the groups to get acquire knowledge about their sexuality, 21 respondents representing 28% joined for companionship, seven respondents representing 9% joined to be assertive and similarly, another seven respondents representing 9% joined to solve their reproductive health issues.

Table 16: Sexuality Status of Respondents

Sexually Active	Frequency	Percent
No	221	71
Yes	92	29
Total	313	100

Source: Field survey (2021)

Table 16 shows that out of the 313 respondents, 221 representing 71% were not sexually active while 92 representing 29% were sexually active. Also, all 12 respondents in the FGD said they were sexually active

Table 17: Decisions for Having Sex

Decision to have sex	Frequency	Percentage (%)
Consensual sex	53	58
Rape	14	15
Under the influence of drug/alcohol	8	9
Peer pressure	11	12
Financial gains	6	6
Total	92	100

Source: field survey, 2021

Table 17 shows that among the 92 respondents who claimed that they were sexually active, 53 representing 58% had sex willingly, 14 representing 15% were raped, eight representing 9% were under the influence of drug or alcohol, 11 representing 12% were being influenced by their peers and six representing 6% did it for financial gains.

Table 18: Respondents' Knowledge of Preventing Pregnancy

Knowledge on Preventing Pregnancy	Frequency	Percentage (%)
No	172	55
Yes	141	45
Total	313	100

Source: Field survey (2021)

Table 18 shows the respondents' knowledge of ways of preventing pregnancy. 172 representing 55% said they did not know it while 141 respondents representing 45% knew the subject matter. During the FGD, the

discussants revealed some ways of preventing pregnancies. Some went ahead to even talk about how they get rid of unwanted pregnancies.

Discussant one said, *“I wash my vagina with cold water right after sex to prevent pregnancy”* (15-year-old female).

Discussant two said, *“when I miss my period, I combine soft drink with half a cup of sugar and drinks and it washes my womb”* (18-year-old female).

Discussant three said, *“I make my girlfriend chew Nescafé or ‘760’ to clear the baby at the early stage”* (19-year-old male).

Table 19: Methods Respondents Know/Use to Prevent Pregnancy

Methods	Frequency	Percentage (%)
Emergency Contraceptive	81	57
Condoms	54	38
Injectable	4	3
IUD	2	2
Total	141	100

Source: Field survey (2021)

The result obtained as shown in Table 24 indicated that out of the 141 people who responded to the questionnaire, 81 representing 57% knew about an emergency contraceptive, 54 constituting 38% knew about condoms, four respondents constituting 3% knew about injectables and two constituting 2% knew about IUDs.

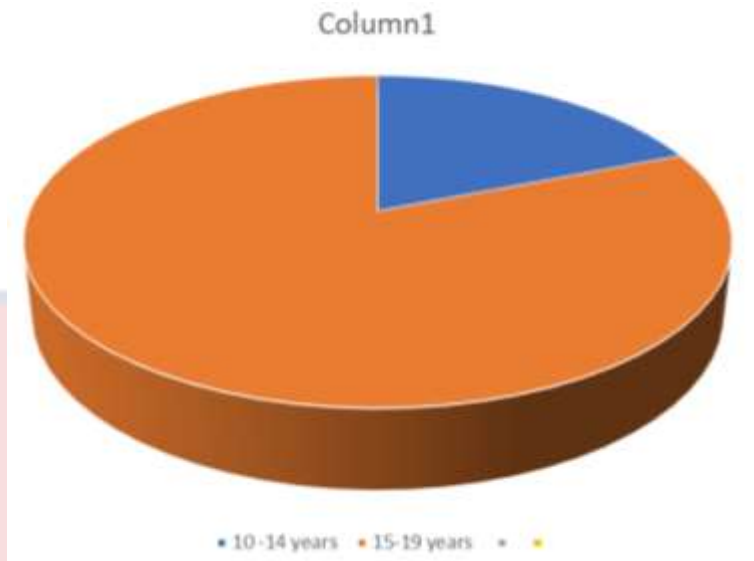


Figure 6: Age at Which Respondents Got Pregnancy

Source: Field survey (2021)

From the survey, out of the 313 respondents, 26 were pregnant with two girls representing 0.6% being in the age group of 10 -13 years, 16 of them representing 5.1% were in the 14–17 -year group while eight of them which represents 2.6% were in 18 and 19-year group.

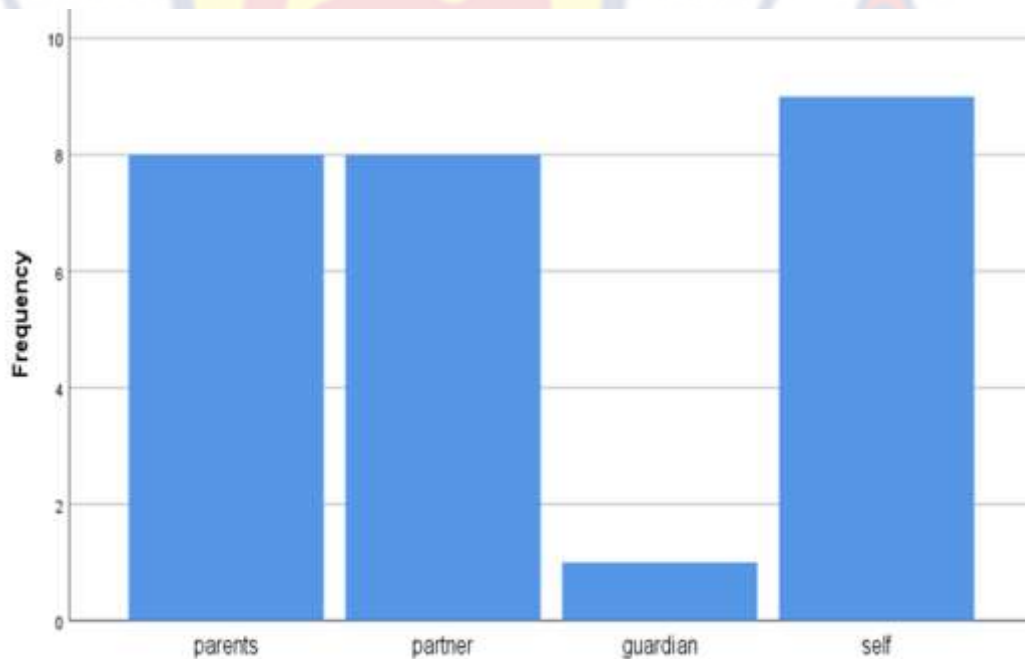


Figure 7: Person who took care of all expenses during pregnancy

Source: Field Survey (2021)

As seen in Figure 7, eight respondents representing 2.6% of pregnant respondents were taken care of by their parents. Another eight representing 2.6% were taken care of by their partners, while one person representing 0.3% was taken care of by the guardian. Nine respondents representing 2.9% however, said they were taking care of themselves.

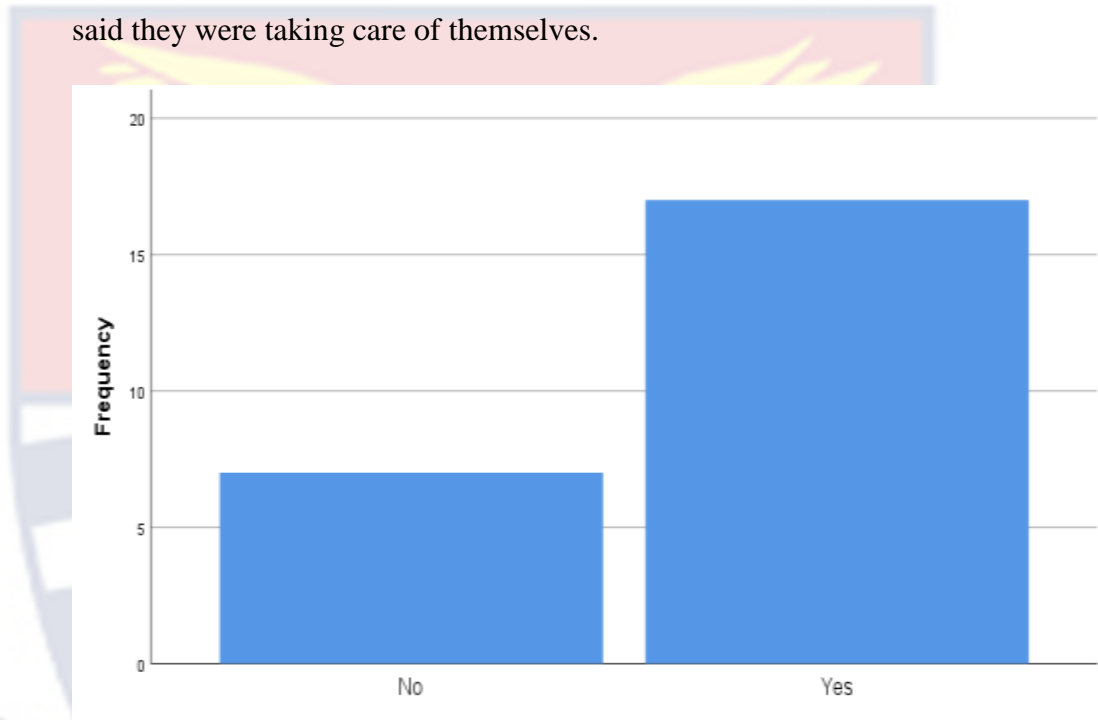


Figure 8: Education Status of Respondents Before Pregnancy

Source: Field survey (2021)

Figure 8 shows that 19 representing 6.1% of the respondents were schooling when they got pregnant while seven representing 2.2% were not schooling. This shows that most of the girls who were pregnant were still schooling.

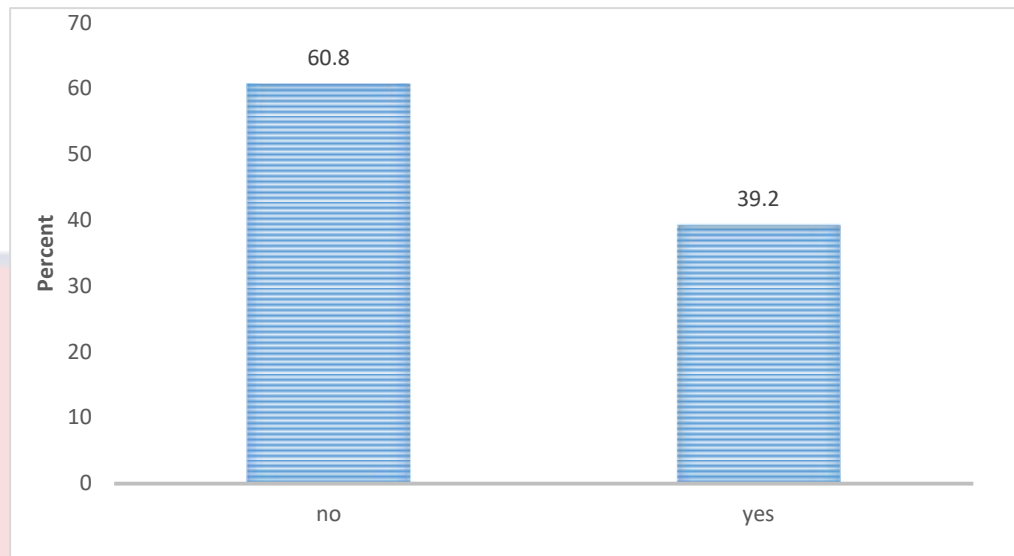


Figure 9: Respondents' Comfortability as They Grow up

Source: field survey, 2021

Figure shows respondents' comfortability to their environment as they grow up. The researcher wanted to find out if adolescents are happy and comfortable with the way they are growing up. Their responses showed that 60.8% were not happy with the way they were growing up while the rest 39.2% were ok with the way they were growing up.

Role of Stakeholders in Planning and Managing Slum Areas in Elmina

Table 20: Support Received from Stakeholders

Support	Frequency	Percentage (%)
No	242	77
Yes	71	23
Total	313	100

Source: Field survey (2021)

Table 25 shows the support received by respondents from the assembly or other institutions. The responses given by respondents indicated 242 respondents representing 77% did not receive any support while 71

representing 23 were receiving support from the assembly or other institutions. This suggests that the municipal assembly provide little or no support to people living in slums.

Table 21: Kind of Support Received

Kind	Frequency	Percentage (%)
Financial Support	24	34
Alternative Livelihood Options	47	66
Total	71	100

Source: Field survey, 2021

Table 21 shows that 24 respondents representing 34% had financial support and 47 representing 66% had some alternative livelihood options. In the interview with the personnel from the planning department on the local opportunities and programmes available for adolescents, he said,

“the Business Advisory Centre (BAC) or Business Resource Centre offers entrepreneurial skills and training for them and sometimes gives start-up capital. Other times too they organize women empowerment programmes for them” (Municipal Planning Officer).

He added, *“in our budget, we take care of brilliant but needy students. We organize programmes to reduce unemployment and so we monitor from time to time. We sometimes put them into apprenticeship and give them start-up capital aftermath” (Municipal Planning Officer).*

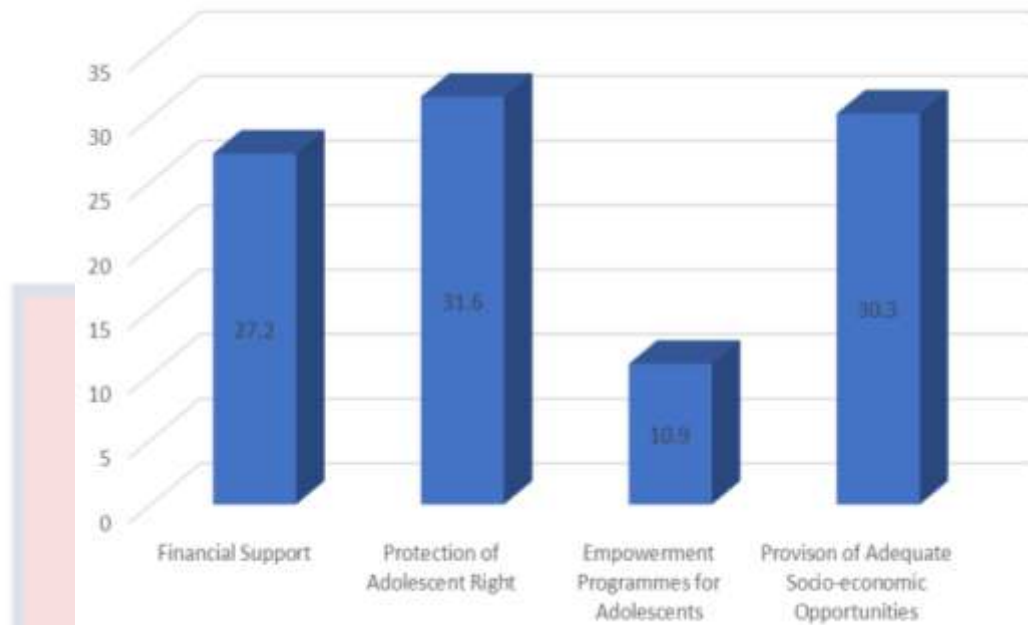


Figure 10: Interventions Suggested by Respondents

Source: Field survey, 2021

From the survey, 27.2% representing 85 of the respondents said they wanted financial support from local institutions, 99 representing 31.6% wanted their rights to be protected by the local institution, 34 representing 10.9% wanted the local institutions to organize empowerment programmes for adolescents and 95 representing 30.4% requested for the provision of adequate social-economic opportunities.

Discussion of Results

Socio-Demographic Information

The gender of the study was female dominated though the difference is slight. This finding is in line with the population of Komenda Edina Eguafo Abrem municipality, where the population of females supersedes that of the male population (Ghana Statistical Service, 2014) . Aside, establishing the sex distribution of the study was necessary as research studies suggest the importance of gender in decision making concerning the implementation of an

intervention (Tannenbaum et. al., 2016). Another socio-demographic data collected was the ages of adolescents. Respondents of ages 10–19 were represented, there was a fair distribution across the age range with slight differences. The respondents were grouped under early and late adolescence.

The findings of the study showed that a large part of the sample was in basic school with the minority in the secondary cycle. This confirmed the findings of the low number of enrolment of adolescents to SHS by UNESCO (1995) and UNICEF (2005). The study revealed that, the majority of the respondents were able to read and write while about 20 percent could not even though they were or had been to school. However, the interview with educational personnel was in agreement with the findings of (Lasserve, 1996; Jerome, 1990; Asamoah, 2010) which stated that slum living makes it difficult for children to stay in school and receive a quality education. In the study, though they had been enrolled on schools, they exhibited attitudes such as truancy, laziness and apathy to learning.

Socio-Economic Influence on the Growth of the Adolescent

The finding of the study showed that the majority of the adolescents were not employed, however, about 25% were currently doing one job or the other. This is in agreement with the findings of UNICEF (2005) and WHO (1997) on adolescents and employment, but it is not in total agreement as the number of adolescents working is significantly low as compared to the ones not working in the study. Those who are employed too are engaged in low-level economic activities same as their parents, such as fishing, trading, sewing or hairdressing which supports the findings of Ahmed et. al., (2019); Singh (2016); Joshi et al. (2013); Alamgir et al. (2009). This can be linked to the exosystem of the

conceptual framework. When there was a close season in fishing in Elmina (a government policy for all fishing communities), parents were not able to go to work, so some of the adolescent engaged themselves in some economic activities in order to help their parent take care of the home. Employment is seen to be an integral part of the socioeconomic status which is used to determine their living conditions (Joshi et al., 2013). The findings showed that out of the 313, 79 respondents were engaged in one occupation or the other.

The type of housing according to the findings in the study showed that the majority of the respondents (50.8%) lived in wooden structures with the rest living in semi-permanent and permanent structures. This indicator used confirms with the work of Karn et al., (2003) who argues that, the type of housing unit influenced the socio-economic and environmental factors which had an impact on the health of the respondents. This contributes to high rate of poverty among the slums (Bello, 2002). This finding confirms to the environmental determinism theory.

One of the indicators for determining the socioeconomic status and growth of adolescents is their health status. In the study, a few of the sample had no access to health care, but even that, those who had access to health care felt reluctant to make use of it.

“They only come to the hospital when the situation is critical, they use all types of concoctions to try to cure themselves. Mostly it is the pregnant adolescents that come to hospital most because it looks like a competition and the new fashion in Elmina, especially Ayisa and Esarmu” (health personnel).

The health seeking of adolescents were seek to be poor. These findings confirm the findings of by Karn, et. al., 2003; WHO, 2002; Coalition &

Ransford, A (2021) that slum residents have negative attitude toward the seeking of health care. This shows that, they have allowed their environment to determine their health status which is in line with the theory of environmental determinism.

In the study, it was revealed that the more than half of the adolescents were not satisfied with their conditions in their environment. During the Focus Group Discussion with the adolescents, one discussant stated that,

“ I am affected by the activities of the weed smokers; they smoke anywhere they like. Uncompleted buildings and huts all around our community are being used to smoke weed. Just behind my house is a ghetto for smoking and I fear my life may be at risk since am a girl” (15 year old female). The environment these adolescents find themselves makes them vulnerable to all sorts of social vices and can impede developmental outcomes. This checks with the findings of Alamgir et al. (2009) and also confirms the Bronfenbrenner’s bioecological system theory that says everything in the child and within the child affects how he/she grows and develops. In an interview with the personnel from the education service, she said;

“Since most of the people at these places are unemployed and this main source of livelihood is fishing and petty trading, days harvest is bad, there will be no food for the house. They are mostly engaged in hand to mouth jobs. These make the pupils engage in all sorts of activities to cater for themselves resulting in teenage pregnancy, prostitution and other deviant behaviours. So yes, their livelihood conditions are very bad” (education personnel). The adolescents face conditions that are bad and so they are forced to grow up by helping the parent take care of the house . this normal distracts their academics

or put them into dangers. This is in agreement of the findings of Chandra-Mouli et al. (2014) which dealt with how slum dwellers are unhappy about their living conditions.

Again, Zahn-Waxler et al. (2002); Grych (2002); Wilson & Gottman (2002); Kejerfors (2007) corresponded with the findings of the study that 71.9% of respondents faced challenges of different kinds. These adolescents faced financial difficulties such as food, provision of school needs and clothing. Again, they faced discrimination, difficulty in adjusting to difficult life situations there and fewer livelihood options. One of the discussants in the FGD stated that;

“Sometimes when I am laughed at because of where I stay, I feel like killing my mother for money so I can also look presentable respected and not discriminated” (14-year-old male). Adolescents in slums faces discriminations from time to time and this lowers their self-esteem and self-confidences, which is very critical in human development.

These adolescents again suffer abuses such as physical abuse, child labour, verbal harassment, sexual harassment, rape and defilement which conforms to the studies of UN-Habitat (2016); Singh (2016); Amoako and Cobbinah (2011); Rangwala (2002) which is a perfect description of a slum and the challenges they encounter. During the FGD, the discussants shared their ordeals, one said;

“Because I have to sleep outside, I decided to go to my elder sister’s house to sleep the but anytime I sleep there my sister’s husband has sex with me by force and I’m scared to tell anyone” (12-year-old female).

Also, 68% of the respondents revealed that they were not satisfied with their living conditions which according to Mumah et al. (2014) is a cause of teenage pregnancies in a slum.

Coping Strategies Adopted by Adolescents in Slum Areas in the Elmina

The questionnaire and FGD held with the respondents showed that adolescents adopted strategies such as joining social groups, listening to music, dancing, gambling, playing games like football and watching television to overcome their challenges. Some adolescents stated how these activities helped them face and cope with their challenges which conforms to the study of Agnew (2012) and Esiri (2016).

“When I become overwhelmed with everything around me, I sing to myself and dance so that I can focus on the future ahead of me” (16-year-old female).

According to the answered questionnaire, respondents join these groups to be assertive and gain education on their sexuality and reproductive health issues which conforms the study of Cocorada and Mihalascu (2012). Some adolescents indicated in the discussion that joining the social groups was a coping strategy to deal with the kind of environment they live in. one respondent said;

“To escape my environment, I always offer to help my teacher over weekends so that I can be comfortable. Weekends are my best days” (14-year-old female). These positive coping strategies adopted by the adolescents were in conformity with the theory of environmental possibilism which state that man has a commanding power over his environment.

Another discussant added;

Gambling has been my best companion and comforter. When I win is chilling time. That's the source of my happiness. For me staying in the street to gamble is better than sleeping with my six siblings in one kiosk and always fighting. My freedom is important to me." (18-year-old male).

One other coping strategy for the females was to turn to their boyfriends for accommodations, food and care. This becomes the cause of teenage pregnancies in these areas as early as between 10-13 years and this increases the likelihoods of experiencing physical, sexual and psychological violence which is similar to study conducted by Orindi et. al., (2020). However, some of the adolescents were members of some social groups which gave emotional and financial supports to their members which conforms to the study of (Wilson et al. 2005, as cited in Guo et al., 2015). These negative coping strategies also is in agreement to the theory of environmental determinism, which state that the environment dictates for man. These positive and negative coping strategies adopted by adolescents as a result of their environment will lead/ led to developmental outcome such as the pregnant and the early mothers.

Role of Stakeholders in Planning and Managing of Slum Areas in Elmina

The finding from the study showed that some of the adolescents received some support from the stakeholders which is in line with the Bronfenbrenner's theory where the exosystem the macrosystem has an influencing the growth of the adolescent. Some of these supports are financial support and some alternative livelihood options. An example is seen in the study, where the assembly and the Business Resource Centre offered entrepreneurial programmes to the slum dweller including adolescents. This conforms to

Ndaguba et al. (2019) that argues that stakeholders involvements help in the reduction of poverty.

According to the interview with the personnel from the municipal assembly, social amenities, counselling, legal services and programmes are held for adolescents from time to time. From the focus group discussion, not all adolescents received all the help offered by stakeholders due to ignorance.

On the positive side, most of the sample in the study were in school which was a good sign that that understood the essence of education. From personal experience and observation as a teacher in Elmina, not all adolescents from slums have bad experiences, there are positive ones as well. There was an adolescent girl who lived in Ayisa, one of the slum communities in Elmina and attended the school I teach in. She was very intelligent all round, she placed first in every subject and represented the school in all competitions and won them all. Currently she is representing central region in “Girls in I.C.T.” and in S.H.S 2 in Wesley Girls’ S.H.S. under scholarship.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Overview

This chapter presents the summary of the work, the key findings obtained from the analysis of the results, the conclusions and recommendations as well as suggestions for further studies.

Summary

The study's purpose was to explore the effects of slums on adolescents living in slum communities in Elmina in the Komenda Edina Eguafo Abrem Municipality. Three research questions were set to assist and direct the researcher to remain focused.

- The first research question sought to assess the influence of the socio-economic environment on the growth of adolescents in slums in Elmina
- The second research question was to examine the coping strategies adopted by an adolescent in slum areas in Elmina.
- The last research question wanted to find out the role of stakeholders in planning and managing slum areas in Elmina.

A questionnaire was designed for the adolescents to elicit their responses and analysed using SPSS version 26. The exploratory sequential mixed method design was employed in the study and a sample of 319 adolescents from three different communities.

Adolescents were selected using systematic and simple random sampling and were chosen from a variety of socio-demographic backgrounds, they did, however, share one major characteristic; that is, they all lived in

slums. Purposive sampling was used to select three parents (one each from the three communities), one personnel from the education sector, one personnel from the health sector and one personnel from the planning and managing department of the K.E.E.A. assembly office. Questionnaires and Focus Group discussions were used to collect information from the adolescents and in-depth interviews were conducted with the key informants for information for the study. The data gathered were analysed using frequency tables, means, standard deviations and narrative essays. The results were discussed and related to the work of other researchers. Conclusion, recommendations and suggestions for further studies were also given.

Key Findings

The following findings were obtained from the analyses of the research questions.

1. The study revealed that the adolescents were engaged in petty trading to fend for themselves and help with their family. Some of the adolescents sold fruits, fishes and other foodstuff before and after school. Some also go for fishing with their parents which sometimes cause them to be truant in school. It was revealed that adolescents faced challenges and so they do not like what they experience in their environment as they grow. Some of these challenges were abuse of human rights. Some of the abuses included sexual harassment, child labour and lack of shelter.
2. The research revealed that adolescents assess, perceive, learn and deal with stressful situations. For their survival and adaptation, they developed coping strategies to cope with the stress they go through.

These strategies included problem solving strategies, emotion distraction strategies and avoidance strategies. Some of these coping strategies were both positive and negative. Examples includes joining of clubs and societies, seeking counselling in schools and gambling.

3. Some stakeholders in the Komenda Edina Eguafo Abrem municipality offered some supports such as apprenticeships and start-up capitals to adolescents in general which included adolescents in slums. Parents of adolescents receive such package as well in other to be resourceful and fend for their wards.

Conclusions

The study concludes based on the findings that:

1. Adolescents in the study area had some experiences that affected their growth. These experiences affected some areas of their lives such as education, health, social and economic. They engaged themselves in petty trading to survive. They sometimes sell before going to school and always sold after school, sometimes they don't go to school at all. The adolescents in the study also faced discriminations among their peers who lived outside the slums and some were abuse.
2. Adolescents in the study area developed some coping strategies to deal with challenges in their environments. These strategies included problem solving strategies such as accepting responsibilities and seeking for social support, emotional distraction strategies such as singing and playing video games and avoidance strategies such as the use of drugs and alcohol. Some of these strategies were positive while others negative which one way or the other affects their development.

3. Stakeholders in planning and managing of slums in Komenda Edina Eguafo Abrem provided some form of supports to adolescents in slums. These supports included legal, social and economic supports. Example were entrepreneurial programmes, legal services for the protection of rights and provision of sanitation containers. Even though these helps were offered yet, they are insufficient, they still need lot of supports.

Recommendations

The following recommendations are made for policy and practice based on the findings and conclusion derived from the study:

1. The municipal assembly should establish community-based youth facilities to help alleviate some of the issues that adolescents face. These facilities will provide needed information, develop social networks that help them build tenacity and find other forms of support, and participate in solving their communal problems. This could help with their developmental skills.
2. The government should give or support NGOs to provide low-cost housing and amenities to slum residents on a long-term basis. There should be adequate finances available to upgrade slum communities in order to minimise poverty by providing effective waste disposal, road and gutter construction, and toilet and bathroom facilities. This was once proposed by Group Nduom to upgrade Ayisa community but didn't receive any support from the government.
3. The municipal assembly and the local government should organise public awareness campaign about the value of education and

adolescent delinquency should be run in collaboration by various NGOs and government agencies.

4. Follow up by stakeholders on those adolescents and parents who have been through entrepreneurial training to assess the progress on the interventions.

Suggestions for Further Studies

The study looked into experiences of adolescents living in slums in the Elmina in the Komenda Edina Abrem Municipality. The challenges and the socio-economic status of adolescents were revealed. The coping strategies they adopted were ascertained. The intervention and support rendered by governmental institutions were investigated as well. However, with the large and rising number of adolescents living in slums in developing countries, it is imperative to continue the research on adolescents' development and slum living communal variation and the welfare of individuals and the communities as a whole. Further research on;

1. The family environment of the adolescent in family functioning and communication.
2. Sexual Reproduction Health, that is, assessing the knowledge, attitude and practice of the adolescents and the interventions needed for change in behaviour toward their reproductive health.

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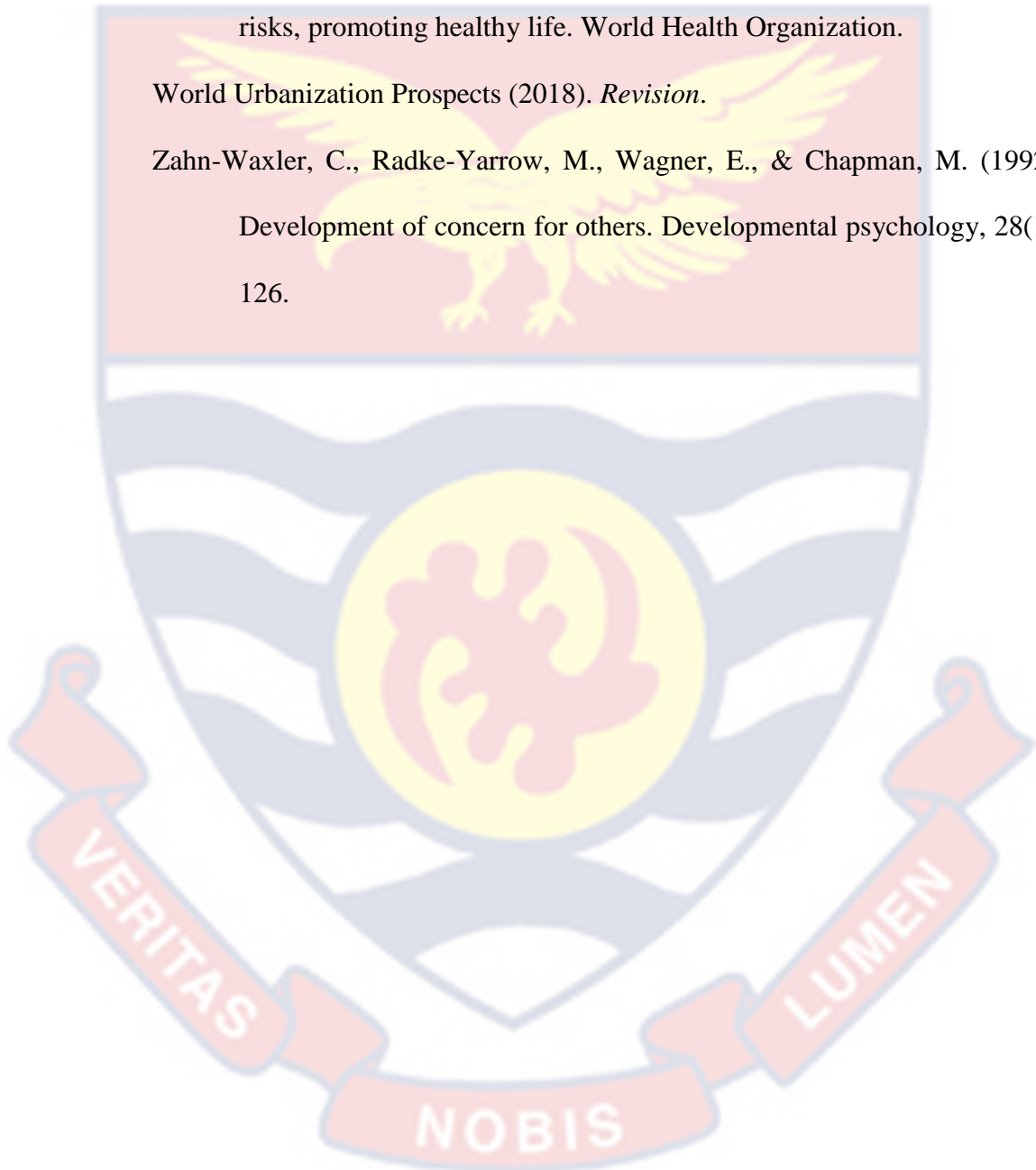
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APPENDICES

APPENDIX A

**Questionnaire for Adolescents about their Experiences with their
Environment**

University of Cape Coast

College of Humanities and Legal Studies

Department of Geography and Regional Planning

Instructions: the purpose of this study is to assess the experiences of adolescents their environment and how they respond to difficulty. This questionnaire asks to indicate what you generally do and feel about your experience with your environment. Do not write your name on this questionnaire. Your responses will be anonymous and will never be linked to you personally. Your participation is entirely voluntary, if there are items you do not feel comfortable to answer please skip them.

Thank you for your time.

Part 1: Bio Data

Please tick the appropriate responds.

1. What is your sex? A. Male [] B. Female []
2. What is your age?
3. What is your level of education?
 - a. Primary []
 - b. J.H.S []
 - c. S.H.S []
 - d. Non-formal education []
4. Are you able to read and write? A. Yes [] B. No []
5. Are you currently employed? A. Yes [] B. No []
6. If yes, what is do you do?
7. What is your household size?.....

8. What is the number of your siblings between the ages of 10-19?
A. Under 5 [] B. Above 5 []
9. Who are you staying with?
A. Parents [] B. Guardian [] C. Alone []
10. What is your religious affiliation?
A. Christian []
B. Muslim []
C. Traditionalist []
D. Other []

PART 2

Socio-Economic Influence on the Growth of Adolescent

11. How many social groups exist in this area?.....
12. Do you belong to any of these social groups? A. Yes [] B. No []
If NO skip Q20 & Q21
13. What is the purpose for joining the group?
14. Does it have any influence on your sexual and social lives?
A. Yes [] B. No []
15. Are you sexually active? A. Yes [] B. No [] if no, skip Q25 and Q26
16. If yes, at what age did you first had sex?.....
17. What influenced your decision to have sex?
a. Consensual sex
b. Rape
c. Under the influence of drug/alcohol
d. Peer pressure
e. Financial gains
f. Others (specify).....
18. Have you heard of any of the methods that can be used to prevent pregnancy?
A. Yes [] B. No [] if No skip to Q23 & Q24
19. Which method you use?
20. How often do you use any of the methods?.....
21. Have you given birth before? A. Yes [] B. No []

22. Who does the house you live in belongs to?
- Parents
 - Rented
 - Family house
23. What type of building do you live in?
- Storey building
 - More than 2 rooms
 - Clay house
 - Wooden structure
24. Do you have access to health care when you are sick?
- A. Yes [] B. No []
25. Are you prevented on way or the other from accessing education?
- A. Yes [] B. No []
26. Are your needs met? A. Yes [] B. No []
27. Who is responsible for meeting those needs?
- Parents
 - Guardians
 - Self
 - Partner
28. Do you engage yourself in any economic activity when you close from school?
- A. Yes [] B. No []
29. If YES, does it have any effect on your education?
- Yes []
 - No []
30. How best will you describe your livelihood conditions?
- Very satisfied
 - Satisfied
 - Not satisfied
 - Very bad

PART 3

Coping Strategies Adopted by Adolescent

31. Do you currently face challenges as an adolescent?

- A. Yes [] B. No []

32. If yes, what are some of the challenges you face in this area?

- A. Financial difficulties []
- B. Discrimination []
- C. Difficulty adjusting to difficult life situations here []
- D. Fewer livelihood options []
- E. Others (Please specify)

33. Have you ever been abused? A. Yes [] B. No [] if NO skip Q51

34. If yes, which kind of abuse?.....

The following items describes statements about how you cope with stressful events. Indicate your agreement or disagreement with the following statement by circling your responses using this scale. There is no ‘right’ or ‘wrong’ answers so choose the most accurate answers for you.

Strongly Disagree = SD

Disagree = D

Disagree Somehow = DS

Agree Somehow = AS

Agree = A

Strongly Agree = SA

Coping strategies	SD	D	DS	AS	A	SA
35. I try to grow up as a result of my experience.						
36. I try to get advice from someone about what to do						
37. I put my trust in God						
38. I restrain myself from doing anything too quickly						
39. I use alcohol or drugs to make myself feel better						
40. I make plan of action						
41. I accept my situation can't be changed						
42. I give up trying to reach my goal						
43. I learn something about the experience						

44. Are there any particular individuals or groups you can turn to when you have problems?

If yes, explain what kind.....

45. As a youth, do you receive any support from social groups or local institutions (such as District Assembly, NGOs, Development Agencies, etc.)

- a. Yes []
- b. No []

46. If yes, what kind of support do you normally receive from these social groups and/or institutions?

- a. Financial support (e.g. credit or loans) []
- b. Alternative livelihood options []
- c. Other (Please specify.....)

47. How satisfied are you with the social group/institutional support that you receive?

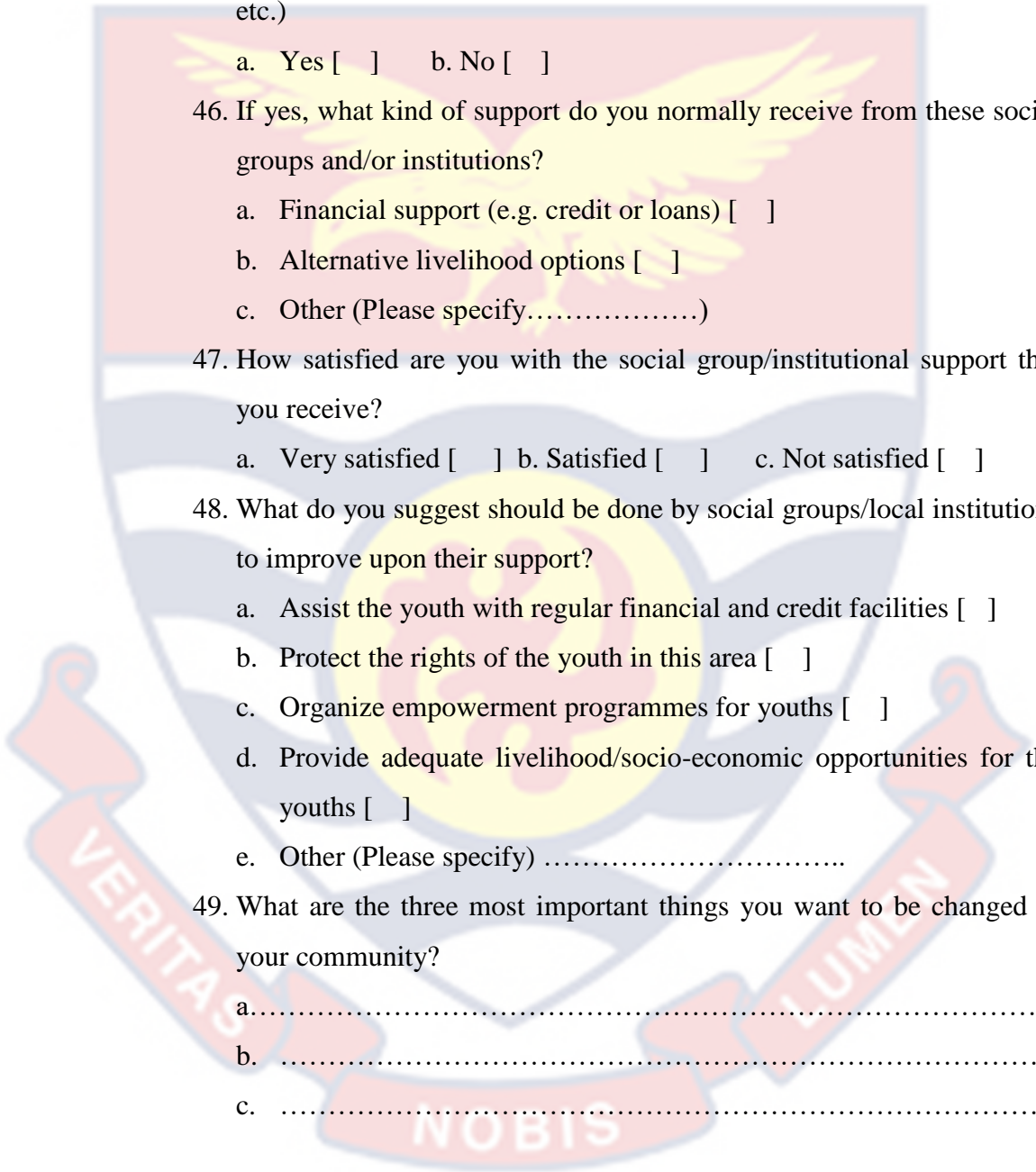
- a. Very satisfied []
- b. Satisfied []
- c. Not satisfied []

48. What do you suggest should be done by social groups/local institutions to improve upon their support?

- a. Assist the youth with regular financial and credit facilities []
- b. Protect the rights of the youth in this area []
- c. Organize empowerment programmes for youths []
- d. Provide adequate livelihood/socio-economic opportunities for the youths []
- e. Other (Please specify)

49. What are the three most important things you want to be changed in your community?

- a.
- b.
- c.



PART 4**For adolescent pregnant girls/ adolescent mothers only**

50. How old were you when you got pregnant?

51. How old was you partner at that time?

52. Who takes/ took care of you during your pregnancy?

a. Both parents b. Mother only c. Father only d. Husband

e. other

53. How did you react to the news of your pregnancy?

a. Happy b. Afraid c. Disappointed d. Felt matured f.

Others

54. Have you been receiving support from your partner? a. Yes b. No

if No skip to Q56

55. If yes, in what way does he support you?

56. Were/ are you schooling during your pregnancy? a. Yes b. No if

No skip to Q58

57. Do you intend to go back to school? a. Yes b. No

Thank you for your time

APPENDIX B

Focus Group Discussion with Adolescents

Goal: To gain as accurate a picture as possible of student experiences in their environment. Your responses will be anonymous and will never be linked to you personally. Your participation is entirely voluntary, if there are questions you do not feel comfortable to answer please feel free.

A. Preparation

As participants enter, the coordinator should

- a. Ask participants to sign in
- b. Ask participants to sign consent form (if applicable)
- c. Ask participants to fill out profile sheet/response sheet

B. Overview of Focus Group Discussion

As focus group discussion begins, the facilitator should

- a. Introduce him/herself
- b. Explain purpose of focus group
- c. Confirm that participants have signed the consent forms (if applicable) and reiterate that participants can stop participating at any point
- d. Describe his/her role:
 - To ask questions and keep the group on track
 - Explains that discussion will move fairly quickly, even though people might have more to say about a particular topic
- e. Describe participants' role:
 - To share experiences and opinions, both positive and negative
 - Explains that there are no right or wrong answers
 - Explains that everyone should participate in discussion
- f. Explain logistics of discussion:
 - 90 minutes maximum
 - Arrangements for water and restroom break
 - Cell phones turned off
- g. Explain ground rules:
 - One person speaks at a time; no side conversations
 - No one person dominates; everyone will have a chance to be heard

- There are no right or wrong answers; the discussion is about participants' experiences

C. Interview Information

- a) Region:
- b) District:
- c) Community:
- d) Date of interview:
- e) Name of interviewer:
- f) Name of study settlement:
- g) Time interview started:
- h) Time interview ended:
- i) Number of visits:

D. Background Issues

- a) Let adolescents tell you about their themselves (Age, education status religion, place of residence, hometown, parent(s) or guardian living with and their occupation, etc.) [Probe for anything relevant to their background]
- b) What do you like or don't like about your environment? Why? [Probe]

E. Socio-Economic Influence on the Growth of the Adolescent

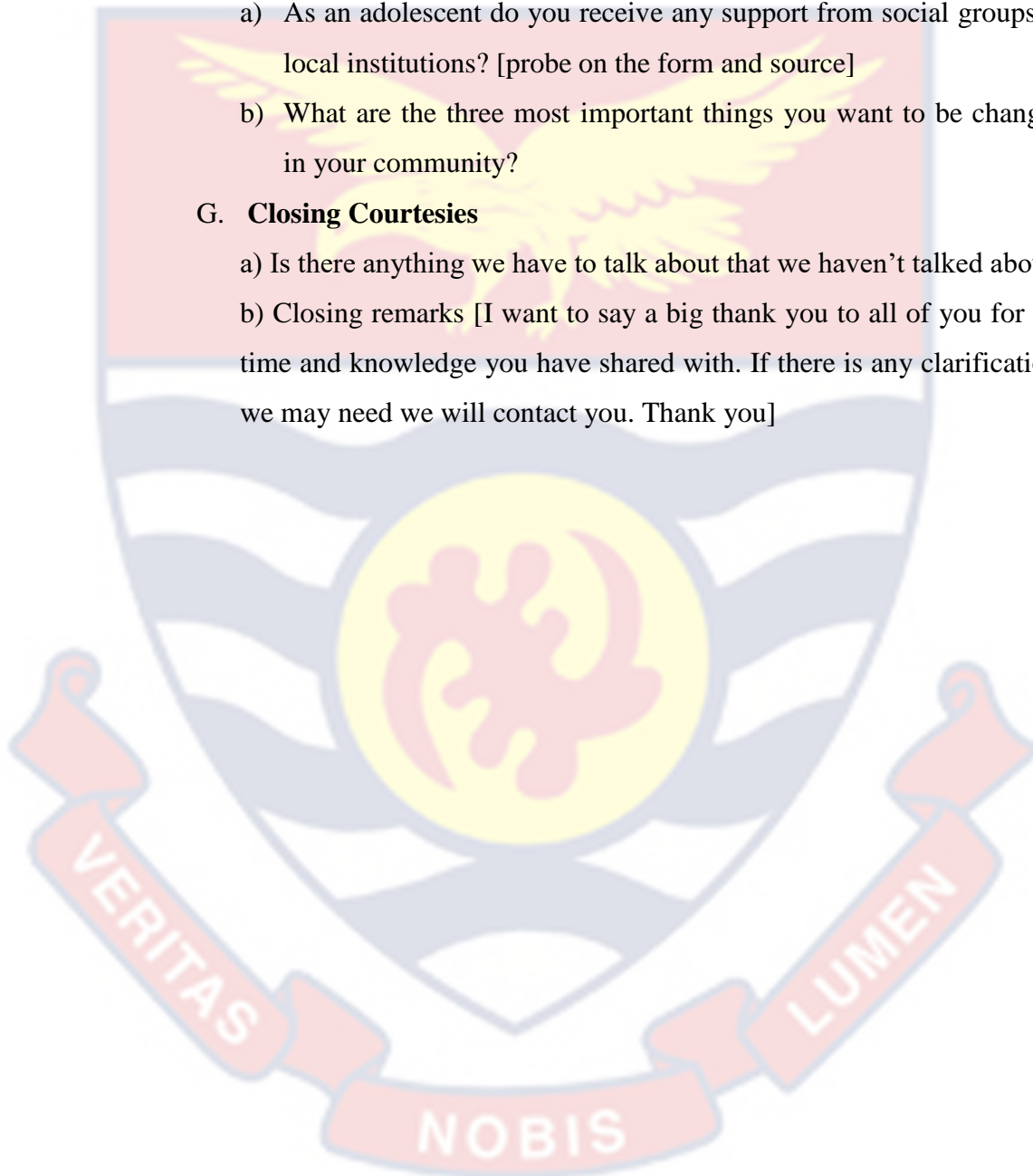
- a) How many social groups exist in their area? [probe to know if they belong to any or not and why?]
- b. Have you been educated on sex? [probe to know about their sexual live, decisions on sex, contraceptives and teenage pregnancy]
- c. Does your parent have regular income? [probe]
- d. What type of housing do you live in? [probe to know how it influences their choices and decisions]
- e. How are your needs met? [probe]
- f. Do you have access to health care? [probe on how and who is responsible for taking care of their health]
- g. Do you engage yourself in any economic activity? [probe]
- h. How best will you describe your living conditions?

F. Coping Strategies Adopted by Adolescent

- a. Do you currently face challenges as an adolescent? [Probe for issues of abuse, financial difficulties, access to credit, discrimination difficulty adjusting to difficult life situations and harassment]
- a) As an adolescent do you receive any support from social groups or local institutions? [probe on the form and source]
- b) What are the three most important things you want to be changed in your community?

G. Closing Courtesies

- a) Is there anything we have to talk about that we haven't talked about?
- b) Closing remarks [I want to say a big thank you to all of you for the time and knowledge you have shared with. If there is any clarification, we may need we will contact you. Thank you]



APPENDIX C

In-depth Interview Guide for Parents**Introduction**

Explain the idea of the in-depth interview

This is being taped so that I don't have to take notes while you are giving your opinions

There is no right or wrong answers but just your opinion and different perspectives needed

You are free to ask questions or additional comments at any time

I am an MPhil student conducting research on the experiences of adolescents living in slum areas.

1. Basic Demographic Information on Respondent

- a) Sex.....
- b) Any disability? [just observe]
- c) Marital status.....
- d) Number of children
- e) Number of adolescent children: Male: Female:
- f) Number of children between the age of 10 to 19 years
- g) Occupation:
- h) Sources of income.....
- i) Level of education:

2. Socio-Economic Environment Influence the Growth of Adolescents

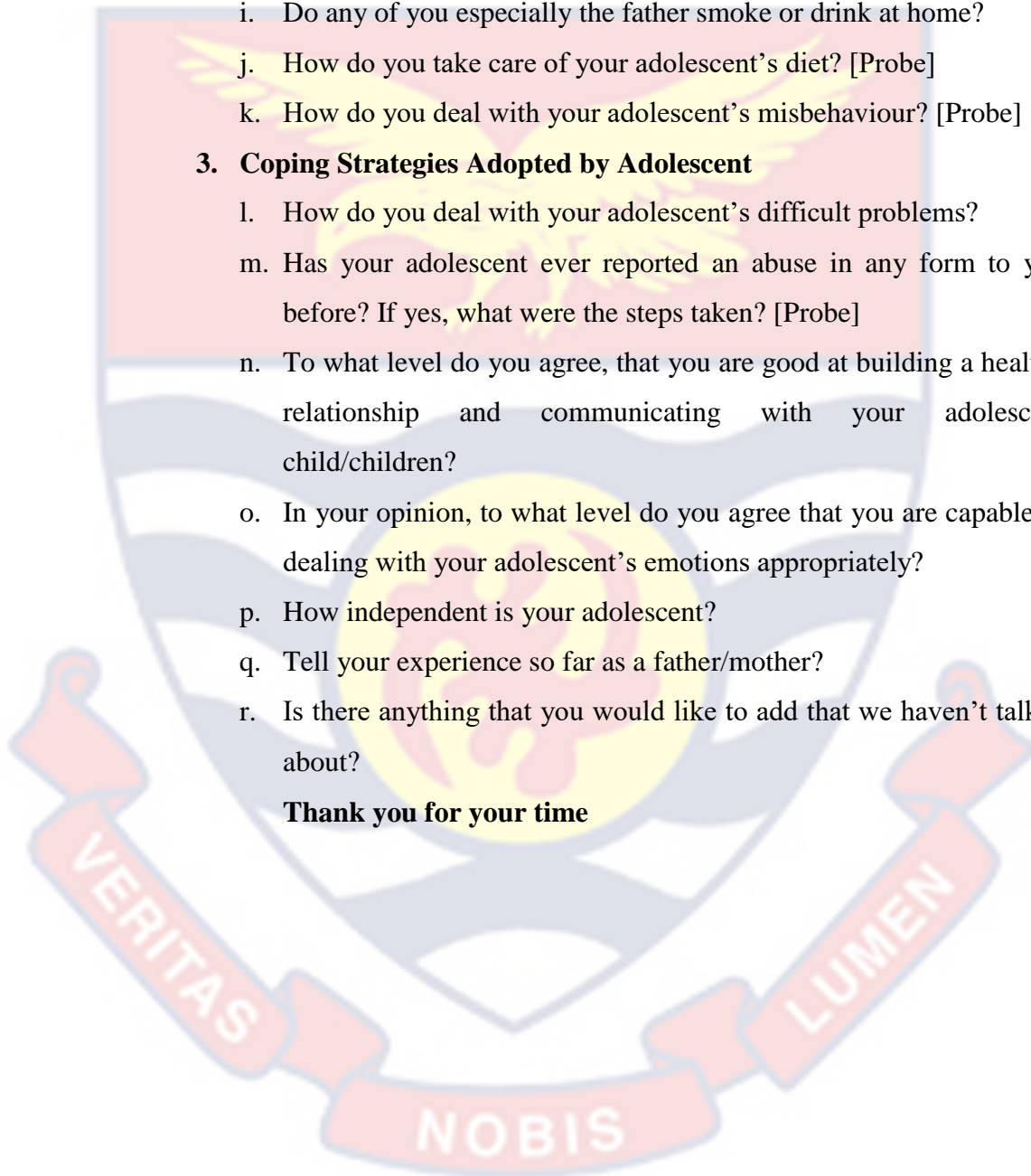
- a. Do you live in a joint or nuclear family?
- b. What time do you leave the house to work and close from work?
- c. If both of you are working, how do you manage to look after your child?
- d. What are your fears or concerns about your adolescent in this environment?
- e. How capable do you think you are to support your adolescent's education at home?

- f. Have you had a conversation on sex with your adolescent yet?
[PROBE]
- g. How often do you fight at home in front of your adolescent?
- h. To what extent are you aware of your adolescent's social activity on social platforms?
- i. Do any of you especially the father smoke or drink at home?
- j. How do you take care of your adolescent's diet? [Probe]
- k. How do you deal with your adolescent's misbehaviour? [Probe]

3. Coping Strategies Adopted by Adolescent

- l. How do you deal with your adolescent's difficult problems?
- m. Has your adolescent ever reported an abuse in any form to you before? If yes, what were the steps taken? [Probe]
- n. To what level do you agree, that you are good at building a healthy relationship and communicating with your adolescent child/children?
- o. In your opinion, to what level do you agree that you are capable of dealing with your adolescent's emotions appropriately?
- p. How independent is your adolescent?
- q. Tell your experience so far as a father/mother?
- r. Is there anything that you would like to add that we haven't talked about?

Thank you for your time



APPENDIX D

In-Depth Interview Guide for Health Official**Introduction**

Explain the idea of the in-depth interview

This is being taped so that I don't have to take notes while you are giving your opinions

There is no right or wrong answers but just your opinion and different perspectives needed

You are free to ask questions or additional comments at any time

I am an MPhil student conducting research on the experiences of adolescents living in slum areas.

1. Basic Demographic Information on Respondent

- a. Age:
- b. Sex:
- c. Name of hospital:
- d. Years of experience on job:
- a. What is your title?
- b. How long have you been in your current position?
- c. What are the roles played in your position?

2. Health Seeking Information from Adolescents Living in Slums

- A. Do adolescents from Esarmu, Tetter Kessim and Ayisa normally come to hospital when sick? a. Yes [] b. No []
- B. Could you please tell me about health related issues that are common in these communities?
- C. What are the most common sources of health care for the adolescents? Why do you think the adolescents in your area patronize those sources of health care?

D. Are the health needs of the adolescents different from those of the other population and why?

E. Are there differences in health access between the adolescents and the other population group? Why?

3. Coping Strategies Adopted by Adolescent Slum Dwellers in

Assessing Health Care

F. Could you please tell me about the challenges in health seeking behaviour in these communities? [probe]

G. Could you please tell me about coping strategies these adolescents adopt to overcome health challenges until they come to the hospital? [probe]

H. Which of these three areas have been seeking health care often?

4. Roles of Stake Holders in Planning and Managing the Health of Slum Dwellers

I. What provisions have been made for them in terms of seeking health care?

J. What challenges does your organization face in providing health care in these communities?

K. Is there anything that you would like to add that we haven't talked about?

Thank you for your time

APPENDIX E

In-Depth Interview Guide for Planning and Managing Official

Introduction

Good morning/afternoon. My name is Dinah Morgan-Insaidoo a postgraduate student of the Department of Geography and Regional Planning, University of Cape Coast (UCC). The purpose of this interview is to gather information on *“Growing Up in Slums: Experiences of Adolescents Elmina, Ghana”*. The study seeks to understand the experiences of adolescents and how they cope with their environment. With regards to ethical guidelines underlying scientific research involving human participants, formal consent is required. The information which you are going to share with us will not be shared with anyone else. I humbly, want to seek your consent to participate in this study. Your participation is voluntary and you may refuse to participate in or withdraw from this study at any time. However, your participation in this study is key since the intention is to aid in policy drafting and implementation. The interview will be recoded with your permission. The interview will last between 30 to 40 minutes. Thank you for your willingness to take part in this study. Please confirm that you have understood why we are doing this study and whether I can continue with the interview. If you need to get any other information, please contact **Dinah Morgan-Insaidoo** via email: dminsaidoo@stu.edu.gh (0545096463)

1. Basic Demographic Information on Respondent

1. Age:
2. Sex:
3. Department:
4. Years of experience on job:
5. What is your title?

6. How long have you been in your current position?

What are the roles played in your position?

2. Role of Stakeholders in Planning and Managing of Slum Areas in Elmina

7. Do you prepare district/zonal council plans?

8. How often do you prepare plans? [probe]

9. How often do you conduct inspections? [probe]

10. Do you inspect site before approving site documents?

a. Yes [] b. No []

11. Do you coordinate with other local government? [probe]

12. How many times do you meet with public officials and the public regarding development plans and land use? [probe, what are some of the issues discussed]

13. Do you deny building proposal? a, Yes [] b. No []

14. When you deny building proposals do you go the site from time to time to make sure illegal buildings are not put up?

15. How many times do you go for field inspections?

16. What are the number of authorized and unauthorized buildings in Esarmu, Tetter Kessim and Ayisa?

17. What measures do you put in place if the layout designed for the community is distorted?

18. What are some of the local opportunities available for improving the standard of living for adolescents in these areas?

19. Do you organize programmes for adolescence between the ages of 10-19 in areas such Esarmu, Tetter Kessim and Ayisa?

20. If yes, how often and effective is it? [probe, how cooperative is they/ their level of interest]

21. Has your office been addressing cases of adolescent that needs attention?

22. Do you do need assessments to know which kind of project to undertaken?

23. What are your sources of funds and what are they used for?

Thank you.

APPENDIX F

In-Depth Interview Guide for Education Official

Introduction

Explain the idea of the in-depth interview

This is being taped so that I don't have to take notes while you are giving your opinions

There is no right or wrong answers but just your opinion and different perspectives needed

You are free to ask questions or additional comments at any time

I am an MPhil student conducting research on the experiences of adolescents living in slum.

1. Basic Demographic Information on Respondent

- a. Age:
- b. Sex
- c. Name of school:
- d. Years of experience on job:
- e. What is your title?
- f. How long have you been in your current position?
- g. What are the roles played in your position?

2. Socio-Economic Environment Influence the Growth of Adolescents

- a. Are there some behavioural differences in pupils living in well planned environment and those living in slums? [probe]
- b. Have you noticed that pupils living in slum areas have some difficulties that needs to be addressed? [probe]

- c. Do you think their academic performance is influenced by their environment they live? [probe]
- d. Are the counselling sessions for pupils who face difficulties from time to time?
- e. How is your relationship with the parents of your pupils?
- f. Are you able to come together with parents to help find solutions for your pupils in difficult times?
- g. Do you have cases where the pregnancy rate in your school mainly is from girls who live in slums?

3. Coping Strategies for Adolescent to Cope with their Environment

- h. What do you think should be done to improve the living condition of these pupils?
- i. Probe: what do you think has worked? What do you think didn't/doesn't work?
- j. How could these efforts be made better or redirected?
- k. Probe: are these efforts targeted at the right audiences?

Role of Stakeholders in Planning and Managing of Slum Areas

- l. Are there special initiatives from above for pupils living in slums?
- m. What specific actions are your school implementing in collaboration with the stakeholders to improve lives in these areas for your pupils?
- n. Is there anything that you would like to add that we haven't talked about?

APPENDIX G

Ethical Clearance by IRB

UNIVERSITY OF CAPE COAST

INSTITUTIONAL REVIEW BOARD SECRETARIAT

TEL: 0558093143 / 0508878309

E-MAIL: irb@ucc.edu.gh

OUR REF: UCC/IRB/A/2016/1091

YOUR REF:

OMB NO: 0990-0279

IORG #: IORG0009096

6TH SEPTEMBER 2021

Ms. Dinah Morgan-Insaidoo
Department of Geography and Regional Planning
University of Cape Coast

Dear Ms. Morgan-Insaidoo,

ETHICAL CLEARANCE – ID (UCCIRB/CHLS/2021/33)

The University of Cape Coast Institutional Review Board (UCCIRB) has granted Provisional Approval for the implementation of your research titled **Growing up in Slum: Experiences of Adolescents in Elmina, Ghana**. This approval is valid from 6th September 2021 to 5th September 2022. You may apply for a renewal subject to submission of all the required documents that will be prescribed by the UCCIRB.

Please note that any modification to the project must be submitted to the UCCIRB for review and approval before its implementation. You are required to submit periodic review of the protocol to the Board and a final full review to the UCCIRB on completion of the research. The UCCIRB may observe or cause to be observed procedures and records of the research during and after implementation.

You are also required to report all serious adverse events related to this study to the UCCIRB within seven days verbally and fourteen days in writing.

Always quote the protocol identification number in all future correspondence with us in relation to this protocol.

Yours faithfully,


A handwritten signature in blue ink, appearing to read 'Paul K. Buah-Bassuah'.
Prof. Paul K. Buah-Bassuah**UCCIRB Chairman**

CHAIRPERSON
INSTITUTIONAL REVIEW BOARD
UNIVERSITY OF CAPE COAST

APPENDIX H

Letter of Introduction from Department of Geography and Regional
Planning

UNIVERSITY OF CAPE COAST
COLLEGE OF HUMANITIES AND LEGAL STUDIES
FACULTY OF SOCIAL SCIENCES
DEPARTMENT OF GEOGRAPHY & REGIONAL PLANNING



Our Ref: GRP/S4/20/Vol.1/220
Your Ref:

UNIVERSITY POST OFFICE
CAPE COAST, GHANA
WEST AFRICA
17th February, 2021

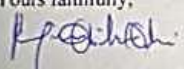
Dear Sir/Madam,

**LETTER OF INTRODUCTION
TO WHOM IT MAY CONCERN**

The bearer of this letter, **Ms. Dinah Morgan-Insaidoo (SS/PGR/19/0004)**, is a Second year MPhil student at the Department of Geography and Regional Planning, University of Cape Coast. She is conducting a study on the topic: *"Growing up in slums. Experiences of Adolescents in Elmina, Ghana"*.

We shall therefore be very grateful if your organisation could assist her with any relevant information to support the study

Thank you.

Yours faithfully,

Dr. (Mrs) Regina Obilie Amoako-Sakyi.
HEAD

Telephone: (Head) 03321-30681, (General Office) 03321-30680
Fax: 03321-34072 E-mail: geography@ucc.edu.gh