Urbanization, Urban-Slum Settlements and its Implications on Health: An Insight from Lagos State, Nigeria

Michael Olusegun Demehin*

London School of Science and Technology, Aston Campus, Lecturer, Department of Health and Social Sciences, Aston Cross Business Village, Birmingham, B6 5RQ
Email: michael.demehin@lsst.ac

Abstract

The nexus between living conditions and health has been a debatable issue for many decades. The dismal living conditions in Nigeria cities have become topical in recent times. It is worrisome how many urban Nigerians dwell in shacks, dilapidated and substandard houses, with varying degrees of filth and degradation within the neighborhood. Reports have indicated that more than 1 billion people worldwide live in urban slum and these slum dwellers are exposed to health risk due to poverty or lack of access to necessary resources for healthy living. Due to the challenge of poverty and economic crises ravaging the third world nations among which is Nigeria, the number of slum settlements and slum dwellers is expected to grow further. The living conditions of slum dwellers are characterized by overcrowding, insecure tenure, and poor access to infrastructure, such as sanitary facilities. The latter has a considerable impact on the health of the inhabitants. In line with the ongoing concern of the urban slum conditions and slum dwellers wellbeing, this study took a personal observation approach and secondary reports view of the experiences and health situation of urban slum dwellers in Lagos State. The focus of the study was specifically Makoko which is one of the urban slums in Lagos Mainland Local Government in Lagos State. According to findings in this Paper, almost 27% of the people in Lagos Mainland Local Government live in this urban slum, and many of them faced high health risk. The study also discovered that among other factors, income and cultural factors took the leading roles in the decision to live in a slum settlement.

Keywords: Urbanization; Slum Settlement; Health; Lagos State; Makoko.

* Corresponding author.
1. Introduction

The socioeconomic conditions in many African countries including Nigeria have resulted into the development of many unwanted situations among which is the emergence of urban slum settlements. Watching through many of the mainstream media platforms that are state or federal owned in Nigeria may give one a false view of the living conditions of people in (Lagos State) Nigeria. Many of the pictures given through politically guided programmes and broadcasts, showed the aspects of Lagos State that can prove to the world the well doings of the political party in power. A closer view of the living conditions in Lagos State gave a different view of what has been presented on the media platforms. Going by the work of [1], a high number of Lagosians live in slum settlements, illegal structures and squatter settlements. According to [2], the imbalance of amenities between rural and urban Nigeria continue to encourage the influx of migrants into the city of Lagos. Unable to afford the healthy environment and accommodation, many of the migrants resulted into living in one of the urban slums or the crowded regions [1, 3]. Settling in the slum areas will have health implications for the people.

According to [3], since the period of Second World War and the civil war in Nigeria that happened between 1967 and 1970, many families who lost their heads find it difficult to meet the needs of their younger ones. This has led to the challenge of many people moving to the city centres especially Lagos in search of better live. The influx of this people has encouraged the development of slum and squatter settlements within and around Lagos State. Not only has the inflow of the people brought about illegality in terms of structures and settlements, this challenge of overpopulation due to migration and natural increase, also has health implications as many of the slum settlements lack good water, drainage system, as well as proper waste management system to mention but few. While many blames have been passed on the occupants of these illegal settlements and structures by the government and political actors, it must be clarified that people desire to live in proper conditions. Therefore, the present reality may be what they do not appreciate normally but for the poor socio-economic condition in the country, it becomes what they settle for. Going by the analysis of Jeremy Bentham, human beings are pleasure lover [4]. While human beings try to move towards what gives them pleasure, they setback from whatever gives them pains. Living in squatter or slum settlement is not really pleasurable but many have chosen to live in this type of settlement due to the challenge of the inability to afford a better settlement with necessary facilities.

While the government of Nigeria both at the state and federal level is still finding it difficult to pay N30,000 minimum wage, the financial implication for living in three bedroom flat in conducive environment in Lagos State is over N1,200,000 depending on the accommodation and the location of the accommodation. In the bit for the people to live closer to their places of work, slum settlement becomes their choices of residence. Until the financial situation of many people in Nigeria becomes better, more of the slum settlements will continue to emerge. This will definitely have health implication for the people of Nigeria. In line with this ongoing view, this study aims to extrapolate the conjecture between slum settlements and health status of the slum dwellers.

2. Literature Review and Theoretical Underpinnings

The nexus between living conditions and health has been a debatable issue for many decades. According to [5], the dismal living conditions in Nigeria cities have become topical in recent times. It is worrisome how many
urban Nigerians dwell in shacks, dilapidated and substandard houses, with varying degrees of filth and degradation within the neighborhood. According to [6], more than 1 billion people worldwide who are urban slum dwellers are exposed to health risk due to poverty or lack of access to necessary resources for healthy living. Due to the challenge of poverty and economic crises ravaging the third world nations among which is Nigeria, the number of slum settlements and slum dwellers is expected to grow further. The living conditions of slum dwellers are characterized by overcrowding, insecure tenure, and poor access to infrastructure, such as sanitary facilities. The latter has a considerable impact on the health of the inhabitants. Going further in this view, [7] states, about 32% (approximately one billion) of the world’s urban population is estimated to live in slums. This view has also been earlier established [8]. A breakdown of the slum dwellers shows a very high percentage (62%) for sub-Saharan Africa over relatively lower rates of 43% for South and 36% for East Asian regions respectively [7]. World Bank [9] report shows that South Sudan produces the highest (96%) proportion of slum dwellers while South Africa (23%) records the least. The living condition in Slums are associated with squatting, poor housing quality, poor access to basic healthcare, unimproved drinking water, poor sanitation and hygiene, insecure land tenure, and absence of physical planning, among others. These conditions surely will have health implications. In the view of [10], there is a strong link between poverty and the living condition of the people. Meaning, the more disposable income available to an individual, the better the live and kind of environment the person will live in. For instance, child mortality is still high in some regions of the world especially Nigeria when compare to regions of North America and Europe ([1]. Since over 65% Nigerians or more live below poverty line [11, 12], it could also be inferred that many of these people are among the occupants of slum and squatters settlements which are not healthy for human living.

According to [13], Lagos State has about 200 slum/squatters settlements. According to the same report, more than 65% of the people who migrate to Lagos live in one of these slum or squatter settlements. The influx of people into the state of Lagos has brought about many challenges. Since 2000, the city of Lagos has been drawing in an estimated 600,000 people per year and many among these migrants end up in one of the slums in the state [13]. Just like the experience of many fast-growing cities, the proliferation of slums and the influx of many people have put a tremendous strain on the government of the Lagos state. A combination of difficult terrain and many years of economic crisis, and corruption have compounded the State problem. There is serious challenge with the transportation system, and millions of commuters are trapped for hours in the traffic due to the problem of overpopulation within Lagos State. This daily experiences of stress and struggle is one of the main reasons for pure health and sudden death among many people in Lagos State, Nigeria. According to [13], the following were noticed in Lagos State which will directly or indirectly have health implications on Lagosians:

“Beggars and children move through the traffic, hawking water, electronic gadgets, medicines, food, clothes, toys, music cassettes, sunglasses, pens, shoes and picture frames. There is no proper sewage network, and safe drinking water is available only to a small number of people. A regular power supply has been described as a ‘distant dream’, and in heavy rains many homes are flooded. Lagos is one of those places where you wonder just how anything manages to function, said one BBC correspondent, echoing the view of many who visit or live in Nigeria’s commercial capital [13].
Going by the work of [1], there is a strong correlation between density and the mental health of the people. It was also established that more number of murders and civil unrest occur in the density areas compared to well-managed environments. Many civil unrests as well as murders are consequences of psychological instability that are due to stress within the density areas [2]. According to [14], WHO identifies a range of general determinants of urban health. Many factors where considered by WHO as determinant of urban health among which are physical, social, cultural, and environmental [14]. Increasing urbanization has resulted in a faster growth of slum population due to rural-urban migration. Various agencies, especially, those in developing countries are finding it difficult to respond to this situation of rapid urbanization effectively due to the enormous resources needed to ameliorate the social condition. Disparities among slums exist owing to various factors such as environmental, political as well as the interest of the government in attending to a community per term. This has led to varying degrees of health burden on the people generally and slum dwellers in particular [15]. The health condition of slum dwellers is appalling and many children have become victims of mortality due to the poor socio-environmental condition in Africa [10, 11]. Urban economies, urbanization, and urban environments influence the health status of the poor [15]. Urban slums comprise a social cluster that engenders a distinct set of health problems due to the arrangements and the life-style of the people. This neglected slum population has become a major reservoir for a wide spectrum of health conditions that the formal health sector may have to deal with. The social negligence of the slum population will inevitably eventually lead to greater cost than what it costs to manage non-slum community populations. The informal nature of slum settlements, cultural, social, and behavioral factors are unique to the slum populations. This has made little to be known about the spectrum, burden, and determinants of illnesses in these communities that give rise to some of the health complications, especially of those diseases that are chronic but preventable among the slum dwellers. Going by the work of [16], over a billion people who are living in urban areas, live in slums where environmental determinants lead to disease. According to [15], a significant cluster of ill health in slums and poor environment in Nigeria stems from poor access to sanitation and clean drinking water. Slums are often located near factories and busy roadways, thus, rendering their inhabitants vulnerable to a high burden of respiratory disease. According to [17], urbanization has its glorious day in Nigeria. Urbanization in Nigeria was a thing of joy in the early years of Nigeria independent in 1960s. Until the late 1970s, when the oil boom and the operation of ports in some parts of the country, accompanied with physical developments, led to a massive movement of populace from the countryside to the cities, and various problems began to emerge in cities like crimes, unemployment, insecurity, poverty and slums, health challenge among other problems.

2.1. Gender Perspectives in Slum Settlements and Health

In many countries of the developing world, the major cities are characterized by an appalling high incidence of urban poverty, privation, and mass hunger. In many of these cities, the incidence of poverty is well over 50 per cent of the residents. For instance, Bangkok has at least 410 slum areas in the city, with potable water supply being available to only half of the city residents [5]. Lagos, Ibadan, Bombay, and Dhaka are some of the populous world cities in which over two thirds of the city residents live in the urban slums. In these slums are clustered the majority of the urban poor of which many of them are women, who suffer varying degrees of poverty, illiteracy, ignorance, superstition, malnutrition, and other social ills that help to illustrate the extent of deprivation suffered by these city-dwellers [18, 19, 20]. A holistic approach to women’s health will necessarily
begin from the premise that health is a basic human right. As such, women all over the world have right to good health. The World Health Organization in its Constitution affirms, the enjoyment of the highest attainable standard of health is one of the fundamental human rights of every human being without distinction of race, religion, political belief, economic and social condition. The health of all people is fundamental to the attainment of peace and security [5]. It can be further emphasized that ill health especially mental health are cause of some of the murder cases recorded in recent Nigeria. The state of human health also has a lot to do with their socioeconomic wellbeing. According to [10, 21, 22], the level of poverty in Africa has made many women and children to be at the receiving end of economic crises in the region. Unable to cater for home and family members, men in Africa become aggressive, and also result into maltreatment of their children and wives who may either stay at home as full house wives or unemployed. Many women in Africa have become victims of poor socio-economic environments. Some of them have been beating to death while some are financially tortured by the men. The case of African culture is another factor in mention. Going by the work of [20], the cultural belief of some African nations are not favourable to women. There is culture where female children and women are not allowed to inherit the properties of their fathers or late husbands. This situation has led to many women and children becoming occupants of illegal structures and slum settlements. Considering the environmental conditions of most slum settlements, people living in this kind of environment may also be mentally unstable because it has been established by Folarin [1] that, there is a correlation between living condition and the state of human wellbeing. Due to the state of unstable mental conditions in the slum environment, children and women have become victims of rape and unwanted pregnancy. Some have even contacted other dangerous diseases such as HIV/AIDS and other Sexual Transmitted Diseases (STDs).

2.2. Lagos State: Urbanization and Urban Crises

Lagos is one of the Nigeria’s most populous cities; Lagos is the commercial and industrial capital of Nigeria. Lagos State was the administrative capital of Nigeria until when it was moved to Abuja. It is the major seaport and the entrepot for Nigeria and some neighboring African countries. These factors have contributed greatly to the to the explosive population growth of Lagos over the past six decades since the independent of Nigeria as a country. From being a small colonial administrative headquarters in the 1930s and 1940s, the population of Lagos has been increasing. Today, Lagos is considered an overpopulated city which has grown beyond its capacity. In spite of this glaring fact, more people are still flocking to Lagos from the rural areas in search of survival opportunities [5, 1]. The official population figure for Lagos was put at 5,000,000 inhabitants, during the 1991 census. But most discerning Nigerians believe this is a gross understatement of the city's population, probably politically motivated. Unofficial figures which appear more reliable estimate the city's population at between 8,000,000 and 10,000,000 inhabitants. Both the official and unofficial population figures serve to convey the basic idea, that Lagos is fast becoming a megacity whose strengths and woes are traceable directly or indirectly to the income opportunities it is believed to offer its inhabitants.

However, the administrators of the state and the property owning class could not make adequate provisions for the new migrants. There was poor health and environmental planning and management strategy. Many of the new migrants being illiterate, indigent and lacking in basic survival skills became stranded in a city which separates them from their families and deprives them of the social security provided by the extended family
system [3, 23, 5]. As a consequence, these people had to resort to the city fringes and nearby slum settlements, where they either set up or found residential accommodation. In these substandard habitations, environmental degradation and health threatening living conditions continued unabated. It may be necessary to state that urbanization per se does not lead to slums and squatter settlements. Urbanization itself is a direct result of the development process and as such, the disarticulated development model adopted by successive Nigerian governments created slums and squatter settlements. Urbanization should therefore be seen as a challenge and an opportunity for development, rather than simply the result of rural development and uncontrolled migration. Rapid urbanization is neither a crisis nor a tragedy as it has created a host new opportunities which are inextricably linked with growth and development. As a result of congestion and overstretching of existing facilities in the slums, most of the settlements have become an epitome of dilapidation parading make-shift shacks, collapsing buildings, filth, inadequate water supply, high degrees of environmental pollution and an area of high level noise from excessive human activity. The high density of population in each of the dwelling houses, and the cramming of the slum houses on land, make the settlements prone to epidemics. This is true of the Lagos slums of Ajegunle, Amukoko, Ijora, Badia, Mushin, Oworonshoki, Makoko etc. The health and social well-being of slum dwellers is often adversely affected by the factors related to the slum environment [5]. In this connection between slum environment and health of the dwellers, the health of the slum dwellers is directly linked to the pernicious overcrowding, poverty, unemployment and malnutrition. Moreover, these factors also influence the health and well-being of some of the residents of planned estates like Ikoyi, Lekki, Magodo, Ikeja GRA, Festac, Satellite towns etc. In fact, these planned estates are fast degenerating into slum settlements especially areas like Jakande Estates both in Lagos Mainland and Lagos Island Areas. This premise is supported by the overcrowding observable in Jakande Housing Area of Lekki resulting in the erection of shacks and stalls in parks, and playground, coupled with the absence of basic sanitation in these former “havens of hope and joy”.

For the purposes of clarification, the slum settlements of Lagos State and other States in Nigeria came into being as a consequence of uncontrolled, and unplanned urban development and the population dynamics of the country. It is also the rapid urbanization in the face of a paucity of urban infrastructure that is responsible for the decay and degeneration of many of the planned residential estates of Lagos. In addition to these developments, urbanization has also exerted far-reaching effects on the health and social life of Lagos residents. The rising crime wave, increased rates of violence, drug abuse, as well as the increased influx and mobility of the population are partly explicable on the basis of unplanned urbanization. Also the high rate of vagrancy, begging for survival, employment, and high cost of living are partly caused by the rapid rate of urbanization observed in the past six decades. Because of the pervasiveness and gravity of the effects of unplanned urbanization on the living conditions of urban dwellers in Lagos State and many other cities in Nigeria, it is imperative that a proper delineation of its exact impact be made. A proper understanding of the causative role of urbanization in relation to the socio-medical problems of the urban residents will help in the articulation of the necessary ameliorative programmes [5]. According to [5], the effects of unplanned urbanization can be categorized as follows: (a). the erection of slum and squatter settlements in different parts of the metropolis. About two-thirds of the inhabitants of Lagos State live in substandard habitations. The overcrowding that is the hallmark of these unpleasant habitats is always obvious in the homes, on the streets, in the markets, and all public places [1]. There are inadequate facilities for sanitation, waste disposal, supplies of potable water, as well as high degrees of
environmental pollution. (b). pervasive unemployment, underemployment and mass poverty is another striking consequence of unplanned urbanization. As a result of the mass migration of rural dwellers to the urban areas, many of the migrants cannot get the jobs that lured them to the cities. Moreover, the oil glut that hit the Nigerian economy in the 1980s as well as the amateurish economic experimentation and profligacy of successive regimes in Nigeria led to the collapse of many business organizations, and industrial plants within the cities. This blocked off potential employment opportunities for many of the city migrants. Whereas many people could not get jobs, many others suffered mass retrenchment as a result of the collapse of business organizations, while many qualified personnel became under-employed. This eventually ushered in a new era of mass poverty, and privation within the Nigerian society. This new wave of unemployment, retrenchment and social paralysis set the stage for the ascendancy of social vices. In order to survive the unfolding scenario of unprecedented hard times, many people had to look for ways to eke out a living: through hawking, petty trading, and casual labour. Many others learnt new skills, and started working in the informal sector as cobblers, dry-cleaners, watch and radio repairers, plumbers, tailors, shoe makers etc. Income from the new professions as well as many of the existing ones could not cater for proper accommodation therefore; urban slums become the saving haven of many urban migrants in Lagos State. Many of these people have become worse off health-wise due to the environment conditions in the slum settlements. (c) Another effect of urbanization is the proliferation of social maladies like prostitution, drunkenness, and abuse of psychoactive drugs, child abuse, rape, criminal behavior, and an overwhelming incidence of sexually transmitted diseases, including HIV-AIDS. (d) Also worthy of note as an effect of rapid urbanization is the escalation of communicable and contagious diseases among the slum residents. These problems are an ever worrisome cause of morbidity and mortality among the slum residents. This increased prevalence of communicable disease is a direct result of the appalling living and environmental conditions found in the slums. With the absence of sanitation facilities within the slum settlements, the factors that tend to perpetuate the continued transmission of these diseases abound. Also the pervasive over-crowding found within these settlements favours the spread of infectious diseases. The situation is not helped by the fact that many of the victims of these maladies lack the financial wherewithal to take care of their health problems. [24]. This factor coupled with the complete absence of social security support in the country, tends to encourage the large scale spread of communicable diseases among the slum residents. It is in the light of the conditions of slum settlements profiled above and the need to evolve practical remedial actions that this paper is developed.

2.3. Theoretical Underpinning Of Functionalism and Dysfunctionalism

There are several ways through which sociologists view social phenomenon in the society. Major among tools of social explanations are structural functionalism, conflict theory, and symbolic interactionism. In this paper, we shall adopt the structural functionalism theory. The structural-functional perspective, also referred to as functionalism theory, is a theory that views society as a system of interdependent parts carrying out functions crucial to the well-being of the whole system. For instance, the structural-functionalism point of view considers the institution of the family to have the primary responsibility for maintaining the physical and emotional well-being of the members of society, socializing them, and teaching them basic morality and how to treat other people with respect. In the African traditions, family play important role of informal educator where the elders in the family continue to teach the up-coming generation values that keep the society from generation to generation. The educational system has the function of providing the knowledge and skills for people to become
productive participants in the economy and the leadership system of the society. The economy combines people’s knowledge and talents with technology and resources to produce goods and services, while the political system maintains order and defends society against threats.

Functionalist note that institutions have both manifest functions and latent functions. For example, the manifest function of elementary school is to educate children and provide them with a basic foundation for more advanced learning. This early institution of learning also has the latent functions of supervising and protecting young children while their parents and or guardians are at work. While the major occupation of the functionalists is centered on providing explanations on the function-ability of the social institutions in the society, the structural-functionalists also look at social problems in the society. For explanations on social problems, they provided three major approaches/explanations: social pathology, social disorganization, and social dysfunction. Social Pathology: The founding fathers of sociology who also work on structural functionalism, August Comte, and Emile Durkheim, and Herbert Spencer, viewed society as analogous to a living organism that can be healthy, evolve to a higher state, or become ill (suffer from a disease). This approach is referred to as social pathology. From this point of view, society can become sick and plagued with harmful conditions for several possible reasons. One is the failure to adequately teach children the cultural values and norms necessary for peaceful coexistence and productivity. This could result from the dysfunction of the family or the educational system, or the failure of economic institution leading to other institutions being unable to adequately carry out their functions. Spencer argued that the presence of too many morally or physically defective people could prevent a society from evolving to a higher state. Spencer created the expression “survival of the fittest” to represent his belief that people and societies were more likely to evolve if each individual enjoyed or suffered the consequences of his or her abilities and actions. The most “fit” would survive and prosper. Consistent with this view, he was generally against government intervention in society to aid the weak or poor or to redistribute income or resources. Spencer’s view of society, which became known as “social Darwinism,” provided supposedly scientific rationalizations for the views of some European leaders who believed that their societies were inherently superior and had the right to dominate over nonwhite peoples. It also supported local politicians in their efforts to oppose social welfare systems, which would help “unfit” people, survive and interfere with the process of evolution. Going by Spencer’s view many people who currently live in the urban slum may have been neglected on the argument of the social Darwinists who against the social supports for the poor and the weak. Social Disorganization which is the second functionalist explanation for social problems emerged from the work of sociologists at the University of Chicago, including Ernest Burgess and Robert Park. Observing the massive influx of immigrants from rural areas and other countries who arrived to work in the surging industrial economy, these social scientists concluded that social change that occurs too quickly causes social disorganization, the disruption of the functioning of social institutions. Schools were unprepared for the huge flood of children, good housing was scarce, and the cultural composition of neighborhoods changed rapidly and often kept changing. Many people became disillusioned when their norms did not fit with urban life or help them achieve their goals. This situation, being without meaningful or useful norms, is called anomie. Family life suffered and crime soared. Functionalist Robert Merton developed a theory about crime as a social problem based on the concepts of social disorganization and anomie. He claimed that because the United States had a highly materialist culture but very unequal access to legitimate opportunities such as education and jobs, those
without opportunities become highly frustrated. Many of them respond by innovating, creating illegal patterns of behavior to obtain the materialistic values of their culture. Robert Merton described another cause of social problems: social dysfunction. According to this approach, the positive functions of social institutions may simultaneously create harmful (dysfunctional) conditions. For example, the policy of urban renewal by Governor Raji Rasaq of Lagos State in 1992 has good intention of beautifying Lagos. But this eventually caused more problems as thousands of people were displaced and properties worth millions were destroyed. Many deaths occurred as a result of the destruction of properties in Maroko now Lekki. Many landlords in those areas went into shocks and become sick, and eventually died in the process of fighting for their rights. It must be said here that, the quagmire of destruction of properties on the basis of urban renewal project is anchored on the failure (dysfunction) of the government institutions and the leadership of the Nigerian society. Many people believe that, if government have done the right thing from the beginning, many people who built houses that later got demolished would not have done so. But corruption within the government sector will make it possible for people to get building approval and later, such approval will be revoked and the building will be demolished. Many abnormalities within the Nigerian society can be explained on the platform of dys-functionality of the State. Even the ongoing analysis of slum settlements cannot be explained out of the dys-functionality of the State and the institutions within the State of Lagos State, and Nigeria as a whole.

2.4. Conceptual Framework

![Conceptual framework](image)

_Figure 2.1: Conceptual framework._

Source: Researcher, 2022.

As represented in figure above, the causes of the emergence of urban slum are multi-dimensional. Among the factors that are responsible for the proliferation of slums in Lagos State and most States in Nigeria are; failed institutions, poverty, poor education, role of politicians, family and cultural crisis among others. All these factors and the phenomenon of slum settlements has serious implication for the wellbeing of the people as seen in the framework above.
3. Methodology

This study focuses on the fundamental relationship between living conditions in the slum settlements and the health status of the slum dwellers. This study took Makoko Community in Lagos State as the major area of study. Makoko is one of the slum settlements under Lagos Mainland Local Government. Makoko is a peripheral shanty riverine community located on the eastern part of Lagos metropolis, on the fringes of Lagos lagoon [16]. Makoko with estimated population of about 85,840 in 2009 lies within Longitude 312 and 313, and Latitude 628 and 629. It is located within the coverage area of Lagos Mainland Local Government. It is predominantly occupied by different ethnic groups who engage in fishing. The dominant tribes in the community are Egun and Ilaje people with few Yoruba, Igbo, Ijaws and Itsekiris due to their major occupation. The Eguns, Ilajes, Ijaws and Itsekiris rests in structures constructed on stilts above Lagos Lagoon and while the Yoruba sub-tribe - the Egbas, Ijebus, Ondos and Ibadans as well as Igbos and Hausas dominate the land area [16]. According to Wikipedia, the current population of Lagos Mainland Local Government stands at 317,980 while that of Makoko is 85,840 with this figure, almost 27% of Lagos Mainland dwellers live in Makoko which is one of the slums within the Local Government Area. This paper makes use of both observation method and secondary data from studies that have been done in the area of slum settlements and health. Major findings are taken from studies that were already done in Makoko Area of Lagos State.

3.1. Limitation of the Study

This study focuses on urbanization, slum settlements and its implication on human health. While this study brings robust arguments from global to local, the environmental scope of the study is based on Makoko of Lagos State (Nigeria) in particular. The scope of this study and the focus would have been wider than it is but for financial limitation of the author. This study was sponsored and research processes carried out, all within the financial capacity of the author. This is a serious limitation for the author and the study.

Figure 2.2

Part View of Makoko

Source: [15]
4. Findings and Discussions

4.1. Causes of Slum Settlements In Nigeria

In the work of [25], they argued that causes of slum settlements in Nigeria cannot be argued outside the effect of urbanization in most of the Nigerian cities. Urban decay in Nigeria is essentially caused by rapid urbanization and the mismatch in the provision and maintenance of housing and infrastructure [25]. Most of the housing quality related problems in Nigeria result largely from inadequately planned land use, non-secure land tenure, poor socio-economic condition, poor construction and weak development control. The resultant-effect of some of these challenges are the proliferation of slums which are characterized by overcrowding, flooding, dilapidated structures, existence of stagnant waste water in generally dirty and unhygienic living environments [25].

Going by the argument of [26], the creation and habitation of slum settlements cannot be divorced from the challenge of urbanization and the housing needs of the urbanites. To [26], not less than 50% of the world populace live within and around the city centres where they can have access to work and livelihood. The perceived opportunities in the cities now serve as the pull factors- calling more people to the urban areas. Unable to live in well-planned environment due to the cost, many result to living in existing slum areas or create new ones. It is believed that, man in his right sense will appreciate a properly planned environment. The present reality of slum settlements in Nigeria can be justified by the saying “when the desirable is not available, the available becomes the desirable”.

The ongoing analysis of the causes of urbanization cannot also be separated from the rural-urban drift which is caused by the high level of structural inadequacy in the rural areas. Going by the work of [3], many people left the rural areas to the urban centres unprepared. Unable to access necessity of life in the urban centres, they results into the situation of illegitimate life-style. Many people who are moving to the urban centres are unable to fund proper facilities in the cities; they therefore result into living in one of the urban slums or creating new ones. It must be emphasized in this case that, urbanization and rural-urban drifts are keys factors among many
causes of urbanization and slum in Nigeria.

4.2. Urban Slum Settlement and Health of Slum Dwellers

According to [27], there is a strong relationship between environment and the total wellbeing of an individuals. Going by the findings of this report, ESRC stated as follows:

“Low income communities are unplanned and operate without a formal infrastructure. The residents face a range of social issues and there are high incidences of alcohol and drug abuse, and often, domestic violence. Some of these areas are very unsafe. There is also a high incidence of disease” [27].

The above argument is a clear description of the situation in Makoko Community in Lagos State. In the work of [24], statistically, a correlation between environment of residence and health status was established. In the work of [19], the relationship between old people’s well-being and the environments of residence was also established. According World Health Organization, to be healthy is to be in a state of complete wellbeing physically, socially, emotionally, financially, and not merely in the absence of disease or infirmity. Going by this definition of World Health Organization, a people who live within the slum environments will have challenges with their health status. This argument is beyond hypothetical statement as studies have established the links between environment and health status of people [27, 19, 24].

4.3. Analysis of the Available Water in Makoko and its Health Implications for the Dwellers

It is real that, resources people survive with are sometimes products or access in their environments. This examines the water condition in Makoko and how it impacts on the health and well-being of the community residents. In the findings of [16], most of the water supplied to Makoko Community for consumption does not pass the health measure of the WHO. According to this same author, he stated as follows:

“The results of sampled water assessment revealed that 40% positivity rate of the 10 water samples collected from the stilt houses on Lagoon and 33.3% positivity rate of the of the 6 water samples collected from over-land residents were confirmed bacterium vibrio cholera presence. The presence of faecal coliform in the sampled water also suggests high contamination of sewage and animal waste. The values of total coliforms range between 0.00 and 2.10 x 106 while total bacterial counts range between 1.140 x 108 and 2.10 x 109 from point to point. Low level of personal and domestic hygiene could lead to extensive environmental of water sources in the area. It appeared that most probable incidence was caused by unimproved drinking water sources. Based on WHO recommended standards of MPN index of less than 10 for total coliforms with total absence of faecal coliforms was deemed to be satisfactory for human consumption and presence of faecal coliforms in any number rendered the water sample unsatisfactory”[16].

The relationship between urbanization, slum settlements and ill-health (and eventual mortality) has been established. In the work of [28], urban under 5 mortality increased as urban population is increasing. To these scholars, the situation with most urban centres of the world has affected negatively under 5 mortality [28]. Going by this finding, it can be inferred that the Nigerian society stands a great risk of ill health due to
unplanned environment. The habitants of urban slums are likely to increase as the socio-economic situations in the nation get worst due to the challenge of corruption, terrorism, and inflation.

4.4. Disposable Income, Slum Dwellers and Utilization of Health Care Services

According to [24], health status of people cannot be divorced from the level of their disposable income. This earlier finding of [24] was also supported by the work of [28]. As people move from the rural areas to the urban areas without proper financial preparation, they risk their lives and health to survive. There is the challenge of commodification of health. This is a serious challenge for the poor in most Nigerian urban slums such as Makoko. Going by the findings of [29], many of the respondents in Makoko agreed that financial weakness is both responsible for most people choice of locations as well as access to health care services. According to [15], health has been commercialized so also is healthy environments which make it difficult for the poor to access. For this situation to be averted, a proper welfare system is needed. If the level of poverty in Nigeria is not ameliorated, there will continue to be the challenge of slum settlements and lack of access of the poor to the necessary health facilities [15].

4.5. Culture, Life-Style, Slum Settlement and Health Practice

Some of the findings in this segment are based on qualitative method of personal observation of the people in Makoko. The findings are also supported with secondary information from scientific authorities. Most people in Makoko are either Ilaje from Ondo State, Nigeria, Ijaw of South-South zone of Nigeria, Egun from Badagry, Lagos State- Nigeria [16]. The native profession of these people is fishing. Living in the mainland areas will not give them easy access to the practice of fishing in their own way. It must also be said that some of them may not be as poor as some reports may have painted but their choice of environment may be based on professional/cultural practices. Some of them practice open defecation into rivers and still make use of the same water for other needs such as bathing, washing of plates etc. Among the people living along the riverine areas such as the Ijaws, some of them have the cultural practice of throwing new born babies into the river with the belief that the babies will stay afloat once their paternity is right. Based on the conditions of some of the rivers, many of the babies may contact diseases and die eventually. The view of culture and health has also been commented on by [30]. According to her, there are cultural practices in Africa that may not encourage good health. This view has also been established in the work of [31], where he stated that certain cultural practices in Africa may make their adherents to live in a particular unhealthy manners based on their cultural beliefs. In other words, it may surprise one to know that there are people who may have financial capacities to move out of slums but because of some cultural practices, they remain in the slum settlements. It must also be established here that, sometimes, people’s lifestyles e.g. choice of residence location may not be as a result of financial lack or poverty, but it may be due to cultural beliefs. Based on this fact as observed among the people of Makoko, the National Orientation Agency may need to engage in active practice of national reorientation for Nigeria to build a healthy population.
5. Recommendations and Conclusion

- Based on some of the findings in this paper, poverty, poor planning, unsecure land tenure, corruption among others are among the reasons for the proliferation of slum settlements in Nigeria. Given the right environment, some of the dwellers in the urban slums would prefer to live in good areas but their inability to afford the financial cost has rendered them impotent. It is therefore the suggestion of this paper that the government of Nigeria should do something in the area of the poor socioeconomic condition of the country. The antidote to the proliferation of urban slums is government intervention in the housing sector and the economic empowerment of the Nigerian populace.

- It was also discovered that, the poor environmental conditions of the slum impact on the health of the people. This has made the spread of diseases common in the slum areas. The government of Nigeria is therefore called for urgent intervention in ameliorating the environmental conditions of the urban slum, not only in Makoko but all the slums for the purpose of ensuring a healthy nation. For instance, it was established in the work of [16] that the water the people are making use of does not pass the safety test. The government needs to do something in this regards because water is essential for human survival.

- It was discovered based on some of the already reported works that, the purchasing power of the people has a lot to do with their access to good health facilities and good environment. This is talking about disposable income that is available to the people. Many Nigerians are living below poverty line. This paper suggests financial empowerment for the people and economic friendly policies that can encourage foreign investors in the nation of Nigeria. Doing this will give room for employment opportunities for the people of Nigeria.

- As already argued, there are certain cultural practices in Nigeria or Africa that may encourage unhealthy living. On this note, we call for the National Orientation Agency and other socialization platforms to be positively active in floating programmes that will build a healthy nation and healthy people. If some of the findings of this paper e.g. poor socioeconomic condition can be addressed, Nigeria can become a better nation than it is presently.

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