Gown and Town: A Community engagement project involving adolescent health stakeholders to identify enablers and barriers to senior secondary school retention in Ibadan, Nigeria
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Background: Many health-risk behaviours are initiated during adolescence resulting in poor health. Findings from previous studies we had conducted revealed that out-of-school adolescents ages 15-19 years were more likely to initiate health-risk behaviours including unsafe sex, smoking and drinking compared to their counterparts currently enrolled in senior secondary school. Against this backdrop, our team conducted a community and public engagement project in Ibadan, Nigeria. The objectives were to engage with in- and out-of-school adolescents, school owners, teachers and parents to identify locally relevant enablers and barriers to senior secondary school retention, proffer solutions to promote retention and provide adolescents with opportunity to present these findings at a stakeholders’ forum tagged, “Education is a Vaccine”.

Methods: Participants were purposively selected from four schools and a community within Ibadan. Information was obtained using participatory methods: data walk activity among 15 teachers and adolescents, community mapping among 12 teachers and a photovoice exercise with 17 in-and out-of-school adolescents. Adolescent participants subsequently presented the findings at a stakeholders’ forum attended by about 110 participants (State ministry of education officials, school owners, teachers, parents, researchers, and adolescents). Results: Barriers to senior secondary school retention identified included: a tendency for some adolescents to join gangs, inability of parents to pay fees, poor school infrastructure and incessant fuel scarcity which prevented students from going to school. Enablers included financial empowerment of parents, trained teachers and counsellors in schools and availability of government scholarships. The stakeholders’ forum resulted in increased commitment by all stakeholders to implement activities to enhance school retention. Ministry of education officials resolved to facilitate return of the out-of-school participants into school. Teachers and parents pledged to counsel and support adolescents to stay in school. Adolescents resolved to refrain from activities that promote school dropout. Conclusion: Community engagement should be encouraged among adolescents and adults alike. It provides information on health-related problems from the community members’ perspective and develops their capacity to engage with stakeholders towards a common goal of improved health and well-being. It enhances participation in research and should be promoted. This will improve development, uptake, and sustainability of evidence-based interventions.