

Quality of Life of Rural Women and Government Intervention Programmes in Ondo State, Nigeria

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Abstract

Quality of life (QOL) as the total well-being of individuals and societies, is a multi-faceted phenomenon determined by the cumulative and interactive impact of many and varying factors such as housing conditions, infrastructure, access to social amenities, income, standard of living, and overall satisfaction about the physical and social environment. Since women constitute a greater proportion of the population in Nigeria-about 49.99% and three-quarters of those who live in abject poverty, globally, are in rural areas of which the majority are women. The study, therefore, focuses on the QOL of rural women and government's intervention programmes in Ondo State, Nigeria, during the Olusegun Mimikoled administration. The study was carried out in 18 purposively selected villages from the 18 Local Government Areas (LGAs) in Ondo State, using a multi-stage sampling technique with copies of Structured Questionnaires Schedule (QS) administered to 1800 respondents. In-depth interviews (IDIs) were also conducted on some women alongside the questionnaire schedule to complement the quantitative data. Findings show that only a quarter of the women benefitted from any of the government intervention schemes (26.4%) while the majority did not (73.6%). The study recommends that scheme/programmes such as "Abiye" Safe Motherhood and the Mother and Child Hospital should be sited in all four senatorial districts across the State. Government should provide targeted support through low-interest loans and micro-credit schemes to help women invest in their agricultural and trading activities. Community-based monitoring systems and regular evaluations will help assess the impact of these programmes on poverty reduction and women's empowerment in rural Ondo State.

Keywords

Quality of Life, Government Intervention Schemes/Programmes, Caring Heart, Rural Women

1. Introduction

Quality of life (QOL) is the total well-being of individuals and societies. Costanza et al. (2008) an ecological economist, argued that QOL has long been an explicit or implicit policy goal, though adequate definition and measurement have been elusive. Diverse "objective" and "subjective" indicators, across a range of disciplines and scales, have been suggested in the literature. However, recent surveys on subjective well-being (SWB) and the psychology of happiness have spurred renewed interest. Standard indicators of QOL often include not only wealth and environment; but, also physical and mental health, education, social belonging, recreation, and leisure time, as well as social belonging (Derek, Johnson, Pratt, Watts, & Whatmore, 2009). Nussbaun & Sen (1993) argues further that a person's quality of life is best measured by their ability to achieve valuable functioning rather than just their income or material possessions. QOL in the rural setting according to Phillips (2006) is a multi-faceted phenomenon determined by the cumulative and interactive impact of many and varying factors such as housing conditions, infrastructure, access to various amenities, income, standard of living, and overall satisfaction with the physical and social environment. Phillips (2006) is of the view that the two indicators of QOL-subjective and objective point at two different things. The subjective indicator focuses on pleasure as the basic building block of human happiness and satisfaction of QOL. However, the objective indicator, on the other hand, focuses on a radically different perspective. To those working with such indicators, the important questions to ask at the individual level are whether people are healthy, well-fed, appropriately housed, economically secure, and well-educated, or not rather than whether they feel happy.

Given the importance of indicators for project monitoring and evaluation in meeting a range of economic, social, and environmental goals, the framework for the choice of indicators used to assess quality is often adopted by the World Bank (WB). The indicators tend to include: economic growth, earnings growth; the absence of poverty and unemployment; decent housing; health and life expectancy; an educated population; high levels of cultural participation; low rates of crime; equity in social opportunities, and the absence of political corruption in the broader context of responsible environmental management (The World Bank, 2007 cited in Zaid & Popoola, 2010). The satisfaction derived from the various life domains directly contributes to individual QOL. The domains that are selected as indicators of QOL for the study are: housing, occupation, income, health, education, neighborhood/community, family life, government, social status, and spiritual life. They are selected because they have been considered relevant to different aspects of the structure of well-being in many studies (Adejumobi & Odumosu, 1998; Etim, 2007; Etim & Solomon, 2010; Zaid & Popoola, 2010). The perception and experience, such as values and overall satisfaction derived from them, are essential to the ultimate feelings of QOL. Hence, the study focuses on the QOL and government intervention programmes (GIPs) in Ondo State, Nigeria. Women make up 49.99 per cent of the population (National Bureau of Statistics, 2023; World Bank, 2020). While three-quarters of those living in abject poverty, globally are in rural areas and the majority are women (IFAD, 2001; ODI, 2014; International Fund for Agricultural Development (IFAD), 2011; Campos, Villani, Davis, & Takagi, 2018; Onwuka, Nwadibu, & Isiwu, 2019; Aluko & Mbada, 2020).

The concern for increasing the QOL of rural women in Nigeria is significantly reflected in the concerted efforts being resolutely made to alleviate the socio-economic conditions of the rural poor households. Many programmes sponsored by either the national government or international agencies have been designed to improve the rural women's QOL in Nigeria (Modupe, 2008). Worthy of note are: the Better Life for Rural Women (BLP) in 1987, by the late Mariam Ba-bangdathen the First Lady of Nigeria; and the Family Economic Advancement Programme (FEAP), Family Support Program (FSP) in 1993 by Mariam Abacha-then the First Lady of Nigeria 1993-97-which were established to play critical roles in alleviating the conditions of rural women in Nigeria, socially and economically. In addition, the Directorate of Food, Roads and Rural Infrastructure (DFRRI), National Directorate of Employment (NDE), Federal Urban Mass Transit Program, National Agency for Mass Literacy and National Agricultural Land Development Authority (NALDA), and the establishment of People's Bank and Community Banks was to facilitate access to credits and also to create a differential petrol pricing-system, among others.

Before the introduction of the Structural Adjustment Programme (SAP) in 1986, previous governments came up with different measures intended to qualitatively improve the lot of Nigerians. Such measures ranged from agricultural projects to provide gainful employment, food security, for the populace, and raw materials for industries to health, housing, and educational programmes. Measures like the National Accelerated Food Production Programme and the Nigerian Agricultural and Co-operative Bank, in 1972, Operation Feed the Nation (OFN)-to teach rural farmers how to use modern farming tools, in 1976; and, Green Revolution Programme (GRP) to reduce food importation and increase local food production in 1979; and the Directorate of Food, Roads and Rural Infrastructure (DFFRI), in 1986. The overall objective, with respect to agriculture, was to ensure food sufficiency for the country (Alaye-Ogan, 2008). Programmes, in this instance, included The Green Revolution, NALDA, Seed Multiplication Programme, etc. In the area of health, the major programmes were basic health programmes, including Oral Rehydration Therapy (ORT), Polio Vaccine, and lately HIV/AIDS treatment and prevention programmes. In formal education, the programs included the 6-3-3-4 educational system and the Universal Basic Education (UBE) program which has been recently modified as 9-3-4. In 1999, the National Poverty Eradication Programme (NAPEP) was introduced in 2001 to attack poverty and improve the QOL through skill acquisition and job creation, among others. However, it was reported that, within four years of its existence, NAPEP gulped the sum of N11.8 billion (about USD98 million) for the alleviation of poverty in the country (Anger, 2010; Kura, Viswanathan, & Ishak, 2019). Also, in 2003 the National Economic and Empowerment Strategy (NEEDS) was introduced to cushion the effects of poverty and guarantee QOL. In a further attempt to address the poverty issue, International Fund for Agricultural Development (IFAD) developed a specialized programme targeted at farmers (Fakayode, Adesanlu, Olagunju, & Olowognon, 2015; IFAD, 2015). Between 2016 and 2021 the government also designed the National Social Safety-Nets Project (NASSP); aimed at dedicating national resources to improve the lives of its citizens and strengthen the role of social protection in helping to distribute resources more broadly (https://nassp.gov.ng/about-us/history/).

1.1. Statement of Problem

Women living in the rural areas of Nigeria are generally known to be suffering from widespread deprivation. Rural women, most often, fail to access various government intervention—programmes' resources and services even when such poverty alleviation programmes are available (Aruna, 2016). The reasons may not be unrelated to the socio-economic conditions of the rural women or the format in which such intervention programmes are packaged for accessibility.

In the Ondo State of Nigeria, it has been observed that women living in rural areas are unable to access government intervention programmes that can assist them in meeting the challenges of daily life (Aruna, 2016). Most rural women are still not able to cater adequately to their basic needs of food, clothes, shelter, obligations, gainful employment, and skills. They have limited access to socio-economic infrastructure such as economic, health, potable water, and sanitation; and, consequently, limited opportunities for advancement towards their QOL (Zaid & Popoola, 2010). The advent of civilian government in 1999 in Nigeria ushered in a civilian Governor of the State during the Third Republic. The first effort made by the then administration, led by the late Chief Adebayo Adefarati, was the full implementation of the National Poverty Eradication Programme (NAPEP), even though it was then a federal government programme. NAPEP was established by the Federal Government of Nigeria (FGN), under the presidency of Chief Olusegun Obasanjo in 2001, to train youths in vocational trades, to support internships, to provide micro-credit supplies to small- and medium-scale enterprises, and to create employment in the automobile industry. These goals were, to some extent, accomplished and the poverty level seemed to have been reduced while QOL was enhanced in the state at the end of that administration in 2003. The Ondo State Oil Producing Areas Development Commission (OSOPADEC) was inaugurated by the Adefarati administration, in 2002, to alleviate poverty in the oil-producing communities of the State and bring succour to the hitherto neglected communities (Akinmulegun, 2013; Akinyemi, 2014). The Commission was mandated to manage 40% of the 13% mineral derivation accruing to the state from the Federation Account for the development of the oil-producing communities. OSOPADEC has been providing the necessary infrastructure and empowering the people for a better QOL. It is involved in the provision of school buildings, health centres, roads, canal dredging, construction of jetties, construction of footbridges, award of scholarships and bursaries, etc. These infrastructural activities were performed well under the said administration. In 2003, the late Dr. Olusegun Agagu took over as the Governor of the State. The administration embarked on some community-development programmes which included a Critical Care Unit (CCU), Micro-Credit Schemes, Skill and Manpower Acquisition Programme, provision of water (i.e., boreholes), maternal and child health care, and the FADAMA programme by the Federal Government of Nigeria for promoting agricultural development (Akinmulegun, 2013). Some of these programmes seemed to have made some positive impact on the well-being of the poor in the State, but it was short-lived. The Ondo State Government (ODSG) and some other intervention agencies, such as Ondo State Oil Producing Development Commission (OSOPADEC), Niger-Delta Development Commission (NDDC), and National Poverty Eradication Programme (NAPEP)had at different times introduced some intervention programmes, such as poverty alleviation, health for all, etc. which rural women in the State could benefit from. Some impacted communities like Akunnu, Ikakunmo, Ikun, Ugbe and Oba all in Akoko North LGAs have also benefitted from the United Nations Development Programmes (UNDP) intervention strategies for empowering women in the rural areas of Ondo State between 2001-2004 (Ondo State, 2010). In recognition of the failure of past government efforts, some non-governmental organizations (NGOs) stepped up efforts also to improve women's QOL, especially in rural areas. A notable example is the Country Women Association of Nigeria (COWAN) which started in Ondo State, Nigeria in 1982 (Modupe, 2008). The administration of Dr. Olusegun Mimiko, from its commencement in 2009, designed a "Caring Heart" policy to tackle poverty from multiple angles, in order to improve QOL, generally, under the following programmes:

(a) Abiye" Safe Motherhood and the Mother and Child Hospital schemes.

(b) The construction of Mega Schools and the provision of free transport for secondary school students.

- (c) Ultra-Modern Market schemes.
- (d) Gender Equality and Women Empowerment Sensitization.
- (e) Micro-credit Schemes and Youth Empowerment.

(f) No-To-Poverty Skills Acquisition.

(g) Agricultural Villages and Centres (Ondo State, 2010).

Several studies e.g. Fakayode, Adesanlu, Olagunju, & Olowognon (2015); Akinyemi (2014); Opafunso & Okhankhuele (2014); Akinmulegun (2013); Zaid & Popoola (2010); Modupe (2008), etc., on QOL have been carried out in several fields of endeavor. However, this current study is to assess how far the intervention programmes of the administration of Dr Olusegun Mimiko have been able to impact rural women's QOL in Ondo State.

1.2. Theoretical Framework

The theoretical framework for this study is empowerment theory, empowerment is a concept that links individual strengths and competencies, natural helping systems, and proactive behaviors to social policy and social change (Rappaport, 1984). It involves using intervention methods to guide people toward achieving a

sense of control.

Empowerment-oriented interventions enhance wellness while they also aim to ameliorate problems, provide opportunities for participants to develop knowledge and skills, and engage professionals as collaborators instead of authoritative experts (Perkins & Zimmerman, 1995).

Various definitions of empowerment generally reconcile the concept as "an intentional ongoing process centered in the local community, involving mutual respect, critical reflection, caring, and group participation, through which people lacking an equal share of valued resources gain greater access to and control over those resources" (Cornell Empowerment Group, 1989) or simply a process by which people gain control over their lives, democratic participation in the life of their community (Rappaport, 1987), and a critical understanding of their environment (Zimmerman, Israel, Schulz, & Checkoway, 1992).

Empowerment suggests that participation with others to achieve goals, efforts to gain access to resources, and some critical understandings of the sociopolitical environment are basic components of the concept. Theories of empowerment involve both processes and outcomes, empowering processes for Individuals for example might include participation in community organizations. At the organizational level, empowering processes might include collective decision-making and shared leadership. Empowering processes at the community level might include collective action to access government and other community resources (e.g., media). Empowered outcomes on the other refer to operationalizations of empowerment that allow us to study the consequences of empowering processes. Empowered outcomes for individuals might include situation-specific perceived control and resource mobilization skills (Rappaport, 1984; Swift & Levin, 1987; Zimmerman, 1993). Empowered outcomes for organizations may include organizational growth, development of organizational networks, and policy leverage. Empowered outcomes for communities may include evidence of pluralism, accessible community resources, and the existence of organizational coalitions.

From its commencement in 2009 the administration of Dr. Olusegun Mimiko, designed a "Caring Heart" policy to tackle poverty from multiple angles, in order to improve QOL, generally, and embarked on the following poverty alleviation and relief programmes:

(a) Abiye" Safe Motherhood and the Mother and Child Hospital schemes.

(b) The construction of Mega Schools and the provision of free transport for secondary school students.

(c) Ultra-Modern Market schemes.

(d) Gender Equality and Women Empowerment Sensitization.

(e) Micro-credit Schemes and Youth Empowerment.

(f) No-To-Poverty Skills Acquisition.

(g) Agricultural Villages and Centres (Ondo State, 2010).

Thus, it is the intention of the Ondo State Government, in context, to empower individuals, groups, and communities to overcome the challenges of their personal,

groups, and communities, such as poverty and lack of adequate quality of life. The Government thereby introduces some intervention programmes and schemes to empower and ameliorate the citizens' sufferings, within their domains, though the major problems the programmes and schemes often face are usually implementation problems, since, at the point of implementation, the schemes may either be hijacked by political party-members or distributed to favour political party-members. But, at the point of assessment, such programmes may not be fully accessed by those who the programmes are actually meant for. And, in some other cases, the programmes and schemes might have been fraught with various corrupt practices that do not make such schemes and programmes see the light of day. As was observed by Akinmulegun (2013) the concerned rural populaces who are the targeted beneficiaries were never involved nor were their opinions sought and some of the programmes were poorly implemented. While Idachaba (2000), concluded that the benefits of such programmes are not adequately touched.

2. Methods

2.1. Description of the Study Area

Ondo State was carved out of the old Western Region on 3rd February 1976, by the Gowon-led military administration of Nigeria. The State occupies a land area of 14,793 km². The state has an estimated population of about 475,000 million people (ODIPA, 2023). Ondo State has 18 LGAs, spread across the three Senatorial Districts. The ethnic composition of Ondo State is largely from the Yoruba stock with sub-dialectical groups, such as Akoko, Akure, Ikale, Ilaje, Ondo, Owo, Ijaw, Apoi, etc.

2.2. Methods of Social Research

The study was carried out in 18 purposively selected villages in each of the LGAs in Ondo State. Therefore, a total of 1800 women were sampled from the selected 18 rural villages across all the LGAs of the State. Data was obtained from 1800 respondents who were purposively selected from the 18 rural towns in the LGAs of Ondo State for the study. For this research, one rural community was selected in each of the LGAs based on its rurality, 100 respondents were then selected from each community for the study. The selected communities are shown below: Auga, Ese, Ipe, Isimerin, Ilu-Abo, Aponmu, Igbotu, Atosin, Ipogun, Enuama, Agunla, Ajagba, Ajue, Erinje, Kajola, Bagbe, Ute and Emure-Ile.

A multi-stage sampling technique was utilized in this study. Firstly the purposive sampling technique was adopted in the selection of a community each from the eighteen LGAs. Secondly, a systematic sampling technique, with a sample interval of 5, was used to select houses from the selected communities. In all, 1800 houses were selected, thirdly, a woman was randomly selected from each house for the study, making total of 1800 respondents and questionnaires were administered on them. In-depth interviews (IDIs) were also conducted on the Market Women leaders-Iyalojas, community women leaders and Chiefs, government officials in charge of intervention programmes (Director of Micro Credit Scheme in the State at the was a woman) alongside with the questionnaire schedule towards complementing the quantitative data.

The quantitative generated for the study was analyzed using "Stata" and presented in descriptive statistics such as tables, charts, and graphs. The relevant independent and dependent variables were cross-tabulated, and appropriate inferential statistics was used to determine the nature of relationships between the variables in the data presentation at 0.05 levels of significance. Qualitative data were discussed using content analysis technique, Moreover; some aspects of the IDIs were reported verbatim with a view to drawing important insights from the discussions.

3. Results and Discussion

Quality of Life (QoL) study was designed to assess the social and economic choices available for the rural women of active working age in Ondo State through government's interventions. With the aid of structured questionnaire, the study obtained data from 1800 rural women across all the 18 Local Government Areas (LGAs) of Ondo State. Quality of Life (QoL) study was designed to assess the social and economic choices available for the rural women of active working age in Ondo State through government's interventions. With the aid of structured questionnaire, the study obtained data from 1800 rural women across all the 18 Local Government Areas (LGAs) of Ondo State. However, due to insufficient number of respondents that met the selection criteria in some rural communities where the study was conducted and partly due to loss or incompleteness of data, only 1731 cases were suitable for analysis.

3.1. Section 1: Background Characteristics of the Rural Women

Table 1 shows the background characteristics of the rural women sampled across the eighteen LGAs of Ondo State. Disaggregation by age group shows that a quarter of the women were less than 30 years old, only 1.4% of them were in the age group 30 to 59 years; while a little less than three-quarters were between 30 and 59 years old (73.0%). The mean age of the women was 37.6 years with 2.7 standard deviations. The mean age shows that the majority of the actively working women in Ondo State, Nigeria are young. This is indicative of the youthfulness of the Nigerian population. Also, the majority of the women were Yoruba. This is expected of the sample mix since the study location—Ondo State—is one of the six states in Southwest Nigeria which are predominantly occupied by the Yoruba—one of the major ethnic groups in Nigeria.

Trading (46.2%) and agriculture (24.9%) are the most common occupations among the rural women in Ondo state. These are closely followed by artisanship (21.8%); while less than a tenth of the women are also, engaged in other various occupations. More than half of them had been working for ten years or more, while about nine in twenty had been working for less than ten years. Grouping by level of education shows that a tenth each had no formal education (11.7%) and tertiary level of education (10.1%). Half of the women had attained secondary school level of education (50.1%), while more than a quarter had only primary education (28.1%).

Characteristics	Frequency (n = 1731)	Percentage (%)
Age		
Less than 30 years	443	25.6
30 to 59 years	1264	73.0
60 to 64 years	24	1.4
Ethnicity		
Hausa	40	2.3
Igbo	177	10.2
Yoruba	1149	66.4
Others	364	21.1
Marital Status		
Never married	127	7.4
Married	1345	77.8
Separated/divorced/widowed	256	14.8
Number of living children		
Four & less children	1132	73.2
More than four	414	26.8
Occupation		
Trading	793	46.2
Artisan	374	21.8
Farming/fishing/other agricultural practice	428	24.9
Others	122	7.1
Number of years working		
Less than 10 years	724	44.5
10 years & above	903	55.5
Number in household		
Six & less	979	61.1
More than six	624	38.9
Level of education		
No formal education	191	11.7
Primary	460	28.1
Secondary	820	50.1
Tertiary	167	10.1

 Table 1. Background characteristics of the rural women.

Continued		
Number of children below 15 years in the household		
Four & less	1349	85.3
More than four	233	14.7
Number of own children below 15 years in the household	1	
Four & less	1381	90.9
More than four	139	9.1
Average monthly income		
Less than 1000 naira	401	28.4
1000 to 99,000 naira	1013	71.6
Household property		
Possessed	1418	82.0
Not possessed	312	18.0
Source of drinking water		
Clean source	906	52.6
Unclean source	815	47.4
Toilet facility		
Improved	616	35.7
Non-improved	1110	64.3
Main cooking energy		
Improved	513	29.7
Non-improved	1212	70.3
Senatorial District		
Ondo South	590	34.1
Ondo Central	573	33.1
Ondo North	568	32.8

Continued

Source: 2017 Ondo State rural women quality of life survey by the authors.

In-depth interviews were conducted with some participants in relation to the female-child rights to formal education. Summarily, some women claimed they could not proceed to higher institutions because their parents could not afford to train them higher in their educational pursuits. According to an interviewee, "*because my parents could not pay for my higher degrees, that was why I got married after my secondary school. And after marriage since I did not have degree to look for a good job, I just have to start a trade*". (Mrs. "I" 28 years old, Trader)

Classification by marital status indicates that more than three-quarters were married, less than a tenth were never married; while about three in twenty were divorced. This is evident that marriage is culturally cherished among the Yoruba people, especially in rural communities. Similarly, more than three-fifths of the women had four or less number of children, a fifth had more than four children; while a tenth had never given birth at all at the time of the survey. This information on childbearing reflects a clear description of high premium placed on childbearing among the Yoruba. However, the fertility level has appreciably declined relative to other ethnic groups in the country.

About three in five had six or less household size, while more than a third had the larger household size of more than six members. More than four in five reported having four or less number of children who were dependants in the household, while 14.7% reported having more than four of this category of children in their household. Also, nine in ten reported having four or fewer biological children who were dependants living in their household; while about a tenth reported a higher number. This is a measure of young-aged dependency in the household. The higher the number of children under 15 years of age, the heavier the economic burden in terms of care to be given in the household.

Further in-depth interviews were conducted on the question of the high rate of dependency, majority of those interviewed believed that children are gifts from God. To probe further into the economic burden of higher dependency, one of the interviewees explained that "*since children are gifts from God, he will provide ways to cater for them*". (Mrs "A" 45 years, Community Leader)

Considering the economic burden of household care as described above, it is relevant to assess the income of the women and household assets in order to understand how the responsibility for the burden was being met. Disaggregating the women by average monthly income category shows that more than a quarter were earning less than ten thousand Naira, while about seven in ten were earning between ten thousand Naira and ninety-nine thousand Naira monthly. Converting this to average daily income indicates that many of the women were living on 334 Naira a day. At the current exchange rate at the time of the survey, this was less than a dollar. Assessing this against the poverty reduction goal set in the Millennium Development Goals which were updated as the Sustainable Development goals, implies that government's effort in this area is low.

Based on household property, 82.0% reported possessing at least one of the household properties listed for assessment, while the remaining 18.0% did not possess any of them in their household. The property includes but is not limited to television sets, automobiles, mobile phones, chairs, bedding, kerosene stoves and gas cookers, digital television signal devices, etc.

To have more insight on why many of the respondents did not have, one of the interviewees explained that *feeding our household is the most important right now, and even when you struggle to buy them no electricity to use them, and moreover we can't afford them.* (Mrs "T" 40 years, Community leader)

Access to clean potable water is one of the pointers to a good quality of life. The rural women were, therefore, asked questions concerning their household's access to clean water. Only about a half reported having access to clean potable water, while the remaining two-fifths were taking water from an unimproved or unclean source. Also, the availability of toilet facilities is an important factor of ensuring healthy living for the members in a household. Worryingly, only about a third of the rural women were making use of improved toilet facilities, while the majority of more than two-fifths were making use of non-improved facilities. Similarly, access to cooking energy was measured by asking the rural women about the types

of their main cooking energy. Less than a third were using improved cooking energy (29.7%), while fourteen in twenty were using non-improved. Distribution by Senatorial District of the rural women shows that about a third were equally sampled from each of the three Senatorial Districts of the State.

Figure 1 shows the proportion of Ondo State rural women classified by marital status.

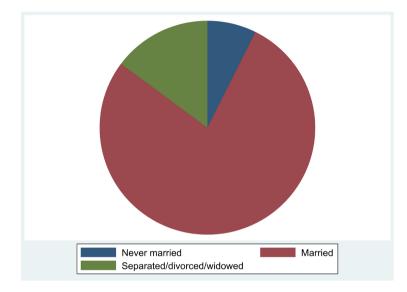
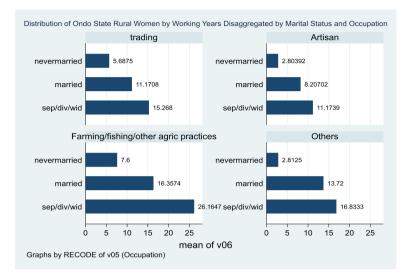


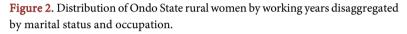
Figure 1. Distribution of Ondo rural women by marital status.

Majority of the rural women were currently married, far less than the proportion currently married who were previously in marital union but were currently no more in the relationship due to separation, divorce or death of spouse. However, the least proportion was never married.

Figure 2 shows the rural women's proportion by mean year of working and classification by marital status and occupation. There are four categories of occupation; namely, trading, artisan, farming/fishing/other agricultural practices, and other occupations. Also, marital status is categorized as never married, married, and separated/divorced/widowed. The mean working year shows similar pattern across the three marital statuses and for each occupational category. Generally, average working year was the least among the proportion never married and the highest for the proportion separated, divorced or widowed for all the categories of occupation. However, average working years was the least among separated, divorced or widowed women who were artisan; while it was the highest among those who were engaging in farming/fishing/other agricultural practices. For example, among the rural women who were traders, those who were never married had worked for an average of 5.7 years, married traders had worked for an average of 11.2 years; while 15.3 years was the average working years for the traders who were separated, divorced or widowed.

Figure 3 represents the classification of rural women by occupation disaggregated by average family size and marital status. Women who were traders, artisan,





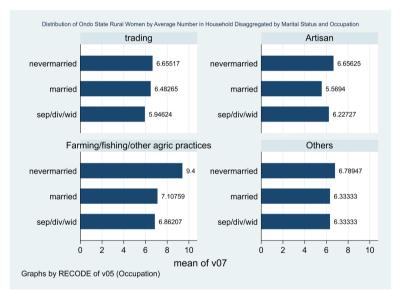
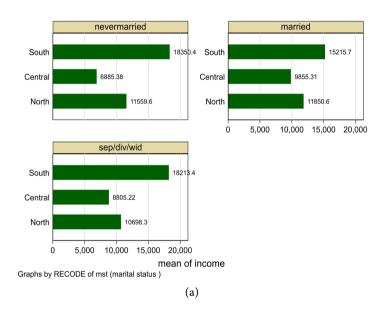


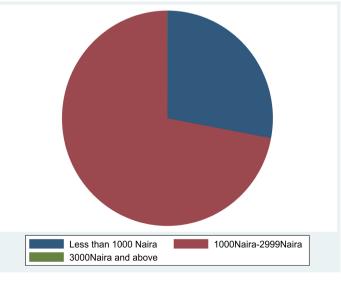
Figure 3. Distribution of rural women by average number in household disaggregated by marital status and occupation.

and those who were engaging in other occupations had an average family size of approximately 7 members each. There is a departure from this among those who were farming/fishing or engaging in other agricultural practices as they had an average family size of 9 members. However, the size of members in family reduces across marital statuses. Those who had never married had the highest family size, followed by married women; while those who were previously married had the smallest family size. The possible explanation for this hinges on the fact that the rural women who are yet to marry are mostly those who are still living with their parents where their siblings are, and also, parts of the household. Therefore, their family size tends to be higher than those who are currently married or have ever married.

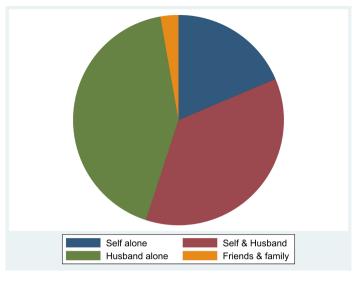
3.2. Section 2: Distribution of Women According to Responsibilities on Household Upkeep and Decision-Making

The information about responsibility for household care reveals that three in ten of the respondents reported being singly responsible for their household daily feeding expenses (30.4%), 42.4% were bearing the expenses jointly with their husbands, while a quarter reported that household daily expenses were the sole responsibility of their husband (25.2%), and about one in fifty was relying on family and friends for their household daily feeding expenses (2.1%). Similarly, a quarter of the women reported that they were solely taking responsibility for the purchase of household property (25.9%), two-fifths reported taking joint responsibility with their husband on the purchase (41.4%); while three in ten had reported that the purchase was the sole-responsibility of their husband (30.4%), and about one in fifty relies on family and friends for household property (2.4%) (Figure 4, Table 2).





(b)



(c)

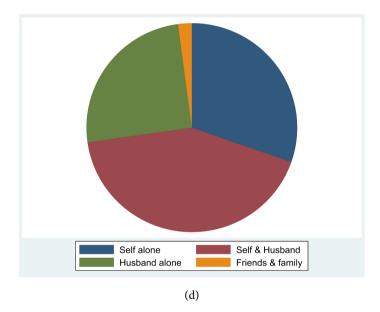


Figure 4. (a) Distribution of rural women by average monthly income disaggregated by marital status and senatorial district; (b) distribution 1; (c) distribution; (d) distribution.

 Table 2. Distribution of women according to responsibilities on household upkeep and decision-making.

Responsibility	Frequency (n=)	Percentage (%)
Person responsible for household daily feeding expenses		
Self alone	519	30.4
Self & husband	725	42.4
Husband alone	430	25.2
Friends/family	36	2.1

Person responsible for household property expenses		
Self alone	442	25.9
Self & husband	707	41.4
Husband alone	519	30.4
Friends/family	41	2.4
Person responsible for children's schooling expenses		
Self alone	303	18.6
Self & husband	593	36.4
Husband alone	688	42.2
Friends/family	45	2.8
Daily feeding expenses		
Less than 1000 naira	384	28.0
1000 & above	990	72.0
Decision-making on when to have children		
Self alone	204	11.8
Self & Husband	1224	70.9
Husband alone	284	16.4
Friends/family	15	0.9
Decision-maker on general household needs financing		
Self alone	352	20.4
Self & Husband	727	42.0
Husband alone	591	34.2
Friends/family	60	3.5

Source: 2017 Ondo State rural women quality of life survey by the authors.

3.3. Section 3: Business, Business Capital and Access to Government Intervention Programmes

Table 3 shows the information on access to sources of business finance and government intervention schemes among the rural women in Ondo State. More than two-fifths of the rural women reported utilizing their personal savings as a source of business finance (42.5%), a third reported that their husband provided them with business finance (32.0%); while only 16.1% got loans from external sources, and less than a tenth derived business finance from family and friends (9.4%). Only a third reported having ever taken a loan for business (34.5%), while the remaining two-thirds had never taken a loan before (65.5%).

Only about one in twenty reported having ever taken a loan from the government (6.6%), more than nine in ten had never (93.4%), Only 17.4% had ever taken a loan from non-governmental organisations (NGOs); while one in twenty had ever taken loan from banks (5.1%), and two-fifth reported to have ever taken loan from cooperative societies (41.3%). Information on awareness of and benefits from government intervention for economic enhancement indicates that more than half of the rural women were aware of the government intervention schemes (55.4%); however, the remaining proportion 44.6% was not aware. Only a quarter benefitted from any of the government intervention schemes (26.4%), while the majority did not (73.6%).

Table 3. Information on business	business capital and access to government intervention
programmes.	

Variable	Frequency (n = 1731)	Percentage (%)
Main source of business finance		
Personal savings	717	42.5
Husband	541	32.0
Friends/families	159	9.4
Loans from external sources	272	16.1
Ever taken a loan for business		
Yes	582	34.5
No	1103	65.5
Taken loan from government		
Yes	53	6.6
No	754	93.4
Taken loan from non-government organization		
Yes	139	17.4
No	661	82.6
Taken loan from bank		
Yes	41	5.1
No	758	94.9
Taken loan from cooperative society		
Yes	325	41.3
No	462	58.7
Aware of government intervention for enhancement		
Yes	941	55.4
No	759	44.6
Benefitted from any government intervention		
Yes	300	26.4
No	838	73.6
Benefitted from Ondo State agricultural inputs subsidy		
Yes	82	15.5
No	447	84.5

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Benefitted from Ondo State special market improvement		
Yes	41	7.8
No	484	92.2
Benefitted from newly-built neighbourhood market shop		
Yes	87	16.6
No	438	83.4
Benefitted from Ondo State Abiye Health Programme		
Yes	161	30.7
No	363	69.3
Benefitted from Ondo State "No-to-poverty" scheme		
Yes	40	7.6
No	487	92.4
Benefitted from micro-credit loan		
Yes	67	12.7
No	461	87.3
Reason for not benefitting from intervention programme		
Limited access	404	28.4
Lack of collateral	72	5.1
Lack of interest	286	20.1
Not aware	659	46.4
Assessment of pre-intervention benefit living condition		
Better than now	146	34.2
Worse than now	109	25.5
No significant change	172	40.3
Assessment of post-intervention benefit living condition		
Improved	252	61.2
Not improved	159	40.3

Continued

Source: 2017 Ondo State rural women quality of life survey by the authors.

3.4. Section 4: Relationship between Selected Rural Women's Characteristics and Post-Intervention Welfare

Table 4 shows the cross-tabulation of the distribution of women's post-intervention welfare status across socio-demographic characteristics and the Chi-square test performed at 0.05 level of significance. Disaggregation by age shows that about 2 in 5 among women who were less than 30 years old reported that their welfare was improved after the intervention (42.7%), the proportion is reduced by 5 percentage points among women older than 30 years (37.7%). This reflects that a greater proportion of women older than 30 years had improved post-intervention welfare than women who were younger. However, age is not significantly related to post-intervention welfare status (p > 0.05).

	Post-intervention Welfare Status		
Women's Characteristics	Not Improved	Improved	χ²
Age			2.677
Less than 30 years	41 (42.7)	55 (57.3)	
30 to 64 years	118 (37.7)	198 (62.3)	
Ethnicity			6.355
Hausa/others	29 (28.2)	74 (71.8)	
Igbo	27 (41.5)	38 (58.5)	
Yoruba	103 (42.2)	141 (57.8)	
Marital Status			4.152
Never married	4 (18.2)	18 (81.8)	
Married	123 (39.2)	191 (60.8)	
Separated/divorced/widowed	31 (41.3)	44 (58.7)	
Number of living children			0.002
Four & less children	100 (42.9)	133 (57.1)	
More than four	46 (43.0)	61 (57.0)	
Number of children below 15 years in the household			
Four & less	134 (45.6)	160 (54.4)	
More than four	16 (21.6)	58 (78.4)	14.052
Occupation			12.525
Trading	65 (37.6)	108 (62.4)	
Artisan	25 (37.9)	41 (62.1)	
Farming/fishing/other agric practice	63 (46.7)	72 (53.3)	
Others	5 (14.3)	30 (85.7)	
Number of years working			2.888
Less than 10 years	66 (47.1)	74 (52.9)	
10 years & above	81 (38.0)	132 (62.0)	
Level of education			5.576
No formal education	21 (43.8)	27 (56.2)	
Primary	43 (41.7)	60 (58.3)	
Secondary	76 (40.0)	114 (60.0)	
Tertiary	16 (27.3)	40 (72.7)	
Average monthly income			2.006
Less than 1000 naira	23 (51.1)	22 (48.9)	
1000 to 99,000 naira	104 (39.9)	157 (60.1)	

Table 4. Relationship between selected rural women's characteristics and post-intervention welfare.

Continued			
Senatorial District			0.000
Ondo South	44 (27.0)	119 (73.0)	
Ondo Central	11 (12.9)	74 (87.1)	
Ondo North	104(63.4)	60 (36.6)	

Source: 2017 Ondo State rural women quality of life survey by the authors.

Contrarily, there is a significant relationship between ethnicity and women's post-intervention welfare (p < 0.05). Women who were from Hausa extraction (71.8%) reported to have attained better post-intervention welfare compared to their Igbo (58.5%) and Yoruba (57.8%) counterparts; although more than half of the women reported improved post-intervention welfare across each of the ethnic groups. Marital status indicated a definite pattern of improved post-intervention welfare such that the proportion is greatest among women who had never married (81.8%), it reduced to 60.8% among those who were married and further declined to 58.7% among those who had been widowed, divorced or separated. Interestingly, there is no significant relationship between marital status and post-intervention welfare status (p > 0.05).

Similarly, the relationship between number of living children for the women and post-intervention welfare status is not significant (p > 0.05) as there is no difference in welfare status between those who had four or a smaller number of children and those who had more than four. Number of children below the age of 15 years in the household is, however, significantly associated with post-intervention welfare status (p < 0.05). The proportion of women who experienced improvement in their post-intervention welfare was higher among women who reported the presence of more than four children in the household (78.4%) than among those who had fewer numbers of children of the same category (54.4%).

There is, also, a significant relationship between women's occupation and postintervention welfare status (p < 0.05). Although, all categories of women's occupation had more than half of their proportion in the group of women who experienced improved post-intervention welfare, women who engaged in agriculture (farming, fishing, or other agricultural practices) recorded the lowest proportion (53.3%). Those who engaged in other occupations different from trading, artisanship, and agriculture recorded more than four-fifths of women who experienced improved welfare status after intervention (85.7%); while three-fifths each were among women who were traders (62.4%) and artisans (62.1%).

However, the number of active working years, educational level and average monthly income of women show no significant relationship with women's post-intervention welfare status (p > 0.05). Interestingly, the pattern across these women's characteristics is somehow remarkable. For instance, women's proportion who experienced improved welfare was higher among those who had worked for 10 years and longer (62.0%) than those who had worked for fewer years (52.9%), highest proportion of women who reported improved post-intervention welfare

was among those who had attained tertiary level of education (72.7%), and more women who were making average monthly income of at least 10,000 naira reported improved status than those who were making lesser income (48.9%).

The cross-tabulation of women's senatorial district of residence and post-intervention welfare status indicates that the highest proportion of women who reported improved post-intervention welfare among the residents of Ondo Central Senatorial District (87.1%), followed by those who were residing in the South Senatorial District (73.0%); the proportion was comparatively low among rural women in Ondo North Senatorial District (36.6%). The Chi-square test shows a significant relationship between Senatorial District of women and post-intervention welfare status (p< 0.05). Living in the North Senatorial District of Ondo State is associated with unimproved post-intervention welfare as only a third reported improved welfare status (36.6%) compared to about three-quarters of women in Ondo South (73.0%) and more than four-fifths among Ondo Central rural women (87.1%).

On the IDIs conducted to know why only 30.7% of them had benefited from the ODSG's Abiye Health Programme, an interviewee explained thus; *Life would have been better for the women if programmes like the* "Abiye" Safe Motherhood and the Mother and Child Hospital schemes had been sited in all the senatorial districts across the State. Some women would have been alive today. During childbirth, when they were "referred" from the local hospitals to the "Abiye" caringheart hospitals at Akure and Ondo, many of them had given up the ghost before arrival. But if these programmes have been close to them, many lives would have been saved" [IDI Mrs "Ey" 56 years, Trader and Market Leader].

3.5. Section 5: Binary Logistic Regression Analysis Showing Predictors of Post-Intervention Welfare Status among Rural Women in Ondo State

Table 5 shows the Binary Logistic Regression analysis of predicting factors on post-intervention welfare status. The women's characteristics that showed significant relationship with post-intervention welfare status at the bivariate level were subjected to further statistical analysis at the multivariate level using Binary Logistic Regression model. The characteristics involved are ethnicity, occupation, number of children aged below 15 years in household, and Senatorial District where women reside. Overall, the analysis of the model is statistically significant as indicated in the first row of the table. Specifically, number of children aged below 15 years in household and Senatorial District of residence were found to be significant predictors of post-intervention welfare status; while ethnicity and occupation were not significantly influencing post-intervention welfare.

Analysis of ethnicity as a predictor shows that being an Igbo (OR = 1.79, p > 0.05) and Yoruba rural woman (OR = 2.186, p > 0.05) is 1.8 and 2.2 times respectively more likely for women to experience improved post-intervention welfare than for an Hausa woman which is the referent category; though, ethnicity is not a significant predictor of post-intervention welfare status. Similarly, women's occupation is not a significant factor influencing post-intervention welfare status (p > 0.05). However, the analysis shows that being artisan is 21.2% less likely than being a trader (referent category) for rural women to experience post-intervention welfare improvement; while being engaged in agricultural practice is, also, 15.7% less likely.

Prob > Chi² = 0.0000			
Characteristics	Odd Ratio (OR)	<i>p</i> -value	95% Confidence Interval (95% CI)
Ethnicity			
Hausa/others	RC		
Igbo	1.790	0.095	0.904 - 3.546
Yoruba	2.186	0.059	0.972 - 4.919
Occupation			
Trading	RC		
Artisan	0.788	0.509	0.389 - 1.598
Farming/fishing/others	0.843	0.528	0.495 - 1.434
Number of children below 15 years in the household			
Four & less	RC		
More than four	2.960	0.002	1.491 - 5.877
Senatorial District			
Ondo South	RC		
Ondo Central	2.339	0.030	1.084 - 5.047
Ondo North	0.178	0.000	0.103 - 0.305

Table 5. Binary logistic regression analysis showing predictors of post-intervention welfarestatus among rural women in Ondo State.

Source: 2017 Ondo State rural women quality of life survey by the authors.

Having more than four children aged below 15 years in the household (OR = 2.96, p < 0.05) is about 3 times more likely for women to experience improved post-intervention welfare than having fewer children of that age group (referent group). Likewise, living in Ondo Central Senatorial District (OR = 2.339, p < 0.05) is 2.3 times more likely than living in the South Senatorial District for women to experience improved post-intervention welfare. Whereas, living in the North Senatorial District (OR = 0.178, p < 0.05) is 82.2% less likely for women to experience improved post-intervention welfare than living in the South, which is the referent category. Both the number of household children aged below 15 years and the senatorial district of residence are significant predictors of women's post-intervention welfare.

4. Conclusion

1) Trading (46.2%) and agriculture (24.9%) are the most common occupations

among the rural women in Ondo state. These are closely followed by artisanship (21.8%); while less than a tenth of the women are also, engaged in other various occupations.

2) This is a measure of young-aged dependency in the household. The higher the number of children under 15 years of age, the heavier the economic burden in terms of care to be given in the household.

3) Considering the economic burden of household care as described above, it is relevant to assess the income of the women and household assets in order to understand how the responsibility for the burden was being met. Disaggregating the women by average monthly income category shows that more than a quarter were earning less than ten thousand naira, while about seven in ten were earning between ten thousand naira and ninety-nine thousand naira monthly. Converting this to average daily income indicates that many of the women were living on 334 naira a day. At the current exchange rate at the time of the survey, this was less than a dollar. Assessing this against the poverty reduction goal set in the Millennium Development Goals which were updated as the Sustainable Development Goals, implies that the government's effort in this area is low.

4) Based on household property, 82.0% reported possessing at least one of the household properties listed for assessment, while the remaining 18.0% did not possess any of them in their household. The property includes but is not limited to television sets, automobiles, mobile phones, chairs, beddings, kerosene stoves and gas cookers, digital television signal devices, etc.

5. Recommendations

Based on the findings presented earlier, the study recommends that:

Firstly, government intervention should be strengthened in the areas of agriculture and trading, as these are the predominant occupations among rural women in Ondo State. The government can provide targeted support through low-interest loans and microcredit schemes to help women invest in their agricultural and trading activities. Additionally, the introduction of modern farming technologies and training would boost productivity and reduce the manual labour associated with agriculture. Improving market access and infrastructure is also essential, enabling women to sell their goods at competitive prices, thereby increasing their income.

Addressing the economic burden caused by large household sizes and a high number of dependents less than 15 years of age is crucial. Expanding family planning and reproductive health programmes in rural areas can help women manage family size and reduce dependency burdens. In tandem, social protection initiatives, such as cash transfers or child support grants, should be introduced to support households with a large number of dependents, thus easing the financial pressure on rural women.

Income diversification and skills development programs should be prioritized to help rural women pursue more lucrative employment opportunities. By providing vocational training in crafts, technology, and entrepreneurship, women can diversify their income sources beyond agriculture and trading.

Given the high incidence of poverty, with many women living on less than a dollar a day, poverty alleviation programmes need to be scaled up. Government poverty reduction strategies, such as conditional cash transfers and economic empowerment schemes, should specifically target rural women. Additionally, providing access to subsidized basic necessities like energy, healthcare, and housing would reduce the cost of living and improve their overall quality of life.

In the area of healthcare, programmes such as "Abiye" Safe Motherhood and the Mother and Child Hospital should be sited in all four senatorial districts across the State to improve the overall quality of life of rural women.

Finally, expanding financial inclusion initiatives can help more rural women accumulate household assets. Programmes that promote savings and mobile banking will enable them to acquire essential items such as stoves, mobile phones, and furniture over time. Government or NGO-sponsored asset acquisition schemes, offering basic household items at reduced prices or through flexible payment plans, can bridge the gap for the 18% of women who currently do not own any household property. Alongside these measures, it is crucial to establish community-based monitoring systems to track the effectiveness of government intervention programmes and ensure they are reaching the intended beneficiaries. Regular evaluations will help assess the impact of these programmes on poverty reduction and women's empowerment in rural Ondo State.

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Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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