

# Health and Wellness of Workers under Insurgency Condition: A Study of Federal Polytechnic Damaturu, Yobe State, Nigeria

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**Abstract:** Health and wellness are concepts which describe the state of wellbeing of an individual. Health and wellness are no doubt, significant elements of concerned for individual in life. The level of health and wellness of individual at a time portray his/her ability and productivity in an organization or society. Health is more than diet and wealth and a healthy person is regarded as a wealthy person. This paper, therefore, considered issues that are concerned health and wellness such as the meaning of health and wellness, the determinants of health and components of wellness. The objectives of this research are to examine the level of health and wellness of the polytechnic staff, adequacy, effectiveness, and ineffectiveness of the components of wellness. Questionnaires were distributed to sixty staff which were drawn through simple random sampling to form the sample of the study. The data were finally analyzed and found that all most all the components are on a high level except the physical component as justified by the results of the SPSS. From the finding therefore, it was recommended that factors such as recreational centers, housing, transportation. Landscaping, renovation of structures should be done in order to improve on the physical component.

**Keywords:** Assessment, Determinant, Components, Health And Wellness, Insurgency

## I. INTRODUCTION

It is a general statement that health is more than diet and wealth. A healthy person is always regarded as having everything in life. This is because all resources at the disposal of individual are meaningful when are manipulated through struggling which can only be realized when one is healthier. Health and wellness are closely interconnected that one cannot have optimally one without the other. Sometimes they are seen as similarity and same. They are usually taken as entirely different in meaning and definition but represent health related concepts or terms and formed the overall part of individual wellbeing. Health is the bedrock with which ends is justified. However, health of an individual depends on his/her state of wellness. Wellness is a process and a major player of one getting healthier for living a better life. Thus, health and wellness combined together make an individual getting an optimal health level. That is to say one cannot have one of them without the other. In this connection individual lifestyles tell much on his/her level of wellness which also has multiplier effects on his/her health status. This paper, therefore consider issues that concerned health, wellness,

determinants of health and components of wellness. It also looks at the current status of the concepts with particular emphasis on civil servants of the Federal Polytechnic, Damaturu, Yobe state.

### Statement of Problems

The research statement of problems among other things are; loneliness among staff, lack of indoors and recreational centers in and out of the school premises. Habitual Comparativeness of the school with other sister institutions among staff, the effects of the long heated trauma by Boko-Haram insurgency, state of the staff quarters as well the general compound/environment, etc.

### Aim and Objectives

The aim of the research is to assess the health and wellness condition of the entire staff of the Polytechnic under study while the objectives are as follow:

- ✓ To examine the level of the wellness of the staff
- ✓ To ascertain the adequacy of the component of wellness among the staff
- ✓ To examine effective and ineffective components of wellness.
- ✓ To look into the health status of the staff
- ✓ To provide recommendations on how to improve and correct areas of ineffectiveness of the components of the research findings.

### Research Questions

The research questions are

- ✓ What are the reasons behind the staff loneliness?
- ✓ Why the school has no functional indoors and recreation centers?
- ✓ What are reasons behind the habitual comparativeness of the school and other sister institutions?
- ✓ Are the staffs happy with the state of the staff quarters and the general compound/environment?

### Hypothesis

The research hypotheses are;

H<sub>0</sub> = the staff of the Polytechnic are generally healthy and their wellness is grossly adequate

H<sub>a</sub> = the staff of the Polytechnic are generally not healthy and their wellness is grossly inadequate

*Scope and Limitation*

The scope of the study is only the staff of the federal Polytechnic, Damaturu. The staffs studied were those on permanent and pensionable appointment with the institution. This gave a fair assessment of the topic under study.

II. LITERATURE REVIEW

This part of research would cover areas related to the topic of the study, among other things are; the definition of Health, determinants of Health, wellness, components, etc.

2.1 Definition of Health

Different scholars in the health sector have different views and opinions on the term health. It is seen as “the level of functional or metabolic efficiency of living organism”<sup>1</sup>. Others view it as “lack of illness; restrictions imposed on the development of daily activities”<sup>2</sup>. It is also seen as “a measure of the state of the physical body organs. An individual is unhealthy if there is a malfunctioning of the body”<sup>3</sup>. Another related definition sees health as “the mechanics of the different bodily organs, but in the ability of the body as a whole to function”<sup>4</sup>. A wholistic and controversial definition of health is given by WHO “as a state of complete physical, social and mental wellbeing and not merely the absence of disease or infirmity”<sup>5</sup>. Health, according to Hurber, et-el, “it is the ability of individuals or communities to adopt and self-manage when facing physical, mental, psychological and social changes with environment”<sup>6</sup>. While, Clement sees health as “the ability to maintain homeostasis and recover from insults”<sup>7</sup>. To Payne health “is optimal wellbeing that contributes to the quality of life. It is more than freedom from disease and illness”<sup>8</sup>. However, optimal health according to Payne includes “high level of mental, social, emotional, spiritual and physical wellness with the limits of one’s heredity and personal abilities”<sup>9</sup>.

From the above definitions of health, one can conclude that definition of health evolved over time. This can be seen from the revised definition of health by WHO in 1984 as “the extent to which an individual or group is able to realize aspiration and satisfy needs, and change or cope with the environment”<sup>10</sup>. Based on the above definitions of health one can also look at health as a resource needed for daily activities every day by everybody everywhere.

2.2 Determinants of Health

The determinant of health is defined as “the range of personal, social, economic, and environmental factors that influence health status”<sup>11</sup>. These include;

- ✓ Policy making
- ✓ Health services

- ✓ Individual behavior
- ✓ Biology and genetics
- ✓ Social and physical factors.

2.3 Wellness

As health have different meanings so also wellness. Jonathan looks at wellness as “the attitude you have in the way you are leading your daily life, it is nothing but your positive approach to life”<sup>12</sup>. According Clement wellness “is sense of wellbeing and quality of life”<sup>13</sup>. To wellness interactive, “it reflects how one feels sense of wellbeing about life as opposed to illness and describes the positive components of good health”<sup>14</sup>. From the definition of wellness one can also conclude that wellness is the way one feels balance in all dimensions of his/her daily life.

2.3.1 Components of Wellness

It is generally believed that a well person is satisfied in relation to his/her work, spiritually fulfilled, physically fit, socially involved, enjoys leisure time, has positive emotional mental work and above all happy and fulfilled. According to wellness interactive network, wellness “Is the integration of many different components which include mental, social, emotional, spiritual and physical”<sup>15</sup>. These components according them expand one’s potential to live a quality life and work effectively and make significant contribution to the collective wants of the society.

The research work dwelled on the aforementioned components so as to ascertain level of the wellness as well the health of the staff of the polytechnic. This is because wellness is a major player and bedrock in all the processes of getting healthier for living better life.

2.3.2 Ranking of Wellness

There is no generally accepted and adopted formula or ranking method of wellness. However, for the purpose of this research the below ranking formula was used to assess the components of wellness of the study as shown below:

Table :1

Ranking	Rate Of Percentage
High-Level Wellness	80-100
Good Wellness	70-79
Marginal Wellness	50-69
Low Wellness	Below 50

Source: field survey, 2019

III. METHODOLOGY

The methodology of the study comprises of the research design, population of the study, sample size and sampling technique, method of data source and collection, data presentation and analysis. The research is designed to assess the level of health and wellness of the staff of the federal polytechnic with the view of using both quantitative and

qualitative methods. The population of the study constituted all the entire staff of the Polytechnic. The total population comprise both the Academic and non-academic staff. The non-academic includes the senior and junior staff. As reflected in the monthly deduction from the unions’ dues slips, the population of the study is 413.

It is imperative always to get a sample size because it is difficult and cannot be realistic to study the entire population of a study. In this connection, a sample of sixty staff is considered and drawn across the total population. Thus, the sample size opinions and views were used and generalized as the true opinions and views of the entire population of the study. A simple random sampling technique was adopted in drawing the sample size in which each staff has the chance of being selected.

The study adopted the use of both primary and secondary sources of data whereby journals, textbooks, internets form the primary source while questionnaire and interview constituted the secondary source.

The method of data collection include questionnaire which was distributed to the sample. The filled and returned questionnaires were presented in tabular forms and a simple percentage approach was adopted for the analysis. The assessing variables of the study are; staff status, years of service and gender, where Chi-square was used to determine the hypothesis raised using the statistical package for social sciences (SPSS)

**IV. DATA PRESENTATION AND ANALYSIS**

As reflected in the sample size of the study, a total of sixty questionnaires were distributed and fifty seven questionnaires were filled and returned as presented in the tables below:

Table 2: Questionnaires distribution

Questionnaire	Returned	Not Returned	Total
Number	57	3	60
Percentage	95	5	100

Source: field survey, 2019

From table 2, the questionnaires returned were 57 having 35 academic staff and 22 are non-Academic staff. Out of the 35 academic staff 10 spent less than six years of service with the polytechnic while 25 spent more than six years of service. Whereas 8 out of the 22 nonacademic staff spent less than six years of service and 14 spent more than six years of service. Meanwhile, 26 and 9 of the academic staff, and 10 and 12 of the nonacademic staff are males and females respectively.

However, the questionnaire contained twenty five questions with regard to the components of wellness. Each component has five questions. In other words, question 1-5 asked questions on emotional wellness, question 6-10 asked questions on intellectual wellness, questions 11-15 centered on physical wellness, while questions 16-20 covered social wellness and lastly questions 21-25 asked questions on

spiritual wellness. The data on the five components are presented and analyzed in the tables below:

Table 3: Emotional Wellness of the Respondents

OPTION/Q	Responses						TOTAL	%
	1	2	3	4	5			
SA	13	17	8	9	13	60	21.05	
A	31	36	33	39	35	174	61.05	
D	12	2	16	8	8	46	16.14	
SDA	1			1	1	3	1.05	
MISSING		2				2	0.70	
TOTAL	57	57	57	57	57	285	100	

Source: field survey, 2019

The table 3 above shows that 234 responses out of 285 of the five set of questions which represents 82.1% rate of the emotional wellness of the respondents agreed, while 49 which constitutes 17.19% rate of non-emotional wellness of the respondents designed and 2 represents 0.70% rate of the respondents were undecided.

Table 3: Intellectual Wellness Of The Respondents

OPTION/Q	Responses					TOTAL	%
	6	7	8	9	10		
SA	9	12	19	6	27	73	25.61
A	28	27	30	7	27	119	41.75
D	18	7	4	36	2	67	23.51
SDA			3	7		10	3.51
MISSING	2	11	1	1	1	16	5.61
TOTAL	57	57	57	57	57	285	100

Source: field survey, 2019

The above table 4 revealed that 292 responses representing 67.36% of the respondents’ rate of intellectual wellness agree, 77 responses representing 27.01% of the respondents’ rate of non-intellectual wellness disagree and 16 responses representing 5.61% of the respondents were undecided.

Table 4: Physical Wellness of The Respondents

OPTION/Q	Responses					TOTAL	%
	11	12	13	14	15		
SA	31	21	12	2	7	73	25.61
A	24	32	29	7	19	111	38.95
D	1	4	12	33	28	78	27.37
SDA			3	13	1	17	5.96
MISSING	1		1	2	2	6	2.11
TOTAL	57	57	57	57	57	285	100

Source: field survey, 2019

From the table 4 above 184 responses which represent 64.56% of the respondents’ rate of physical wellness, 95 responses representing 32.96% of the respondent’s lack of physical wellness, and 6 responses representing 2.11% of the respondents were undecided.

Table 5: Social Wellness Of The Respondents

OPTION/Q	RESPONSES						TOTAL	%
	16	17	18	19	20			
SA	15	36	8	5	3	67	23.51	
A	36	19	34	22	25	136	47.72	
D	2	2	15	24	22	65	22.81	
SDA				5	3	8	2.81	
MISSING	4			1	4	9	3.16	
TOTAL	57	57	57	57	57	285	100	

Source: field survey, 2019

Table 5 also shows that 203 responses which represent 71.23% of the respondent’s rate of social wellness, 73 responses representing 25.62% of the respondents’ rate of not social wellness and 9 responses representing 3.16% of the respondents were undecided.

Table 6: Spiritual Wellness of the Respondents

OPTION/Q	RESPONSES					TOTAL	%
	21	22	23	24	25		
SA	9	15	33	6	4	67	23.51
A	30	34	22	26	31	143	50.18
D	13	6	2	20	19	60	21.05
SDA	2	1		3	3	9	3.16
Missing	3	1		2		6	2.11
Total	57	57	57	57	57	285	100

Source: field survey, 2019

Table 6 also revealed that 210 responses which represent 73.69% of the respondents’ rate of spiritual wellness, 69 responses representing 24.21% of the respondents’ rate of not spiritual wellness and 6 responses which represent 2.11% of the respondents that were undecided.

Table 7: The Summary of the Computed Percentages of the Components of Wellness

Component	Agree	Disagree
Emotion	82.1	17.9
Intellectual	67.36	27.06
Physical	64.56	32.96
Social	71.23	25.62
Spiritual	73.69	24.11

Source: field survey, 2019

*The Wellness Components*

The results of the findings using the SPSS are presented taking in to consideration the three variables; staff status, years of service and gender. The level of significance is 5% (0.05). The respective results as applied to the components are presented in the below tables.

Table 8: Gender \* means of emotion

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.682 <sup>a</sup>	1	.101
Continuity Correction	1.771	1	.183
Likelihood Ratio	2.878	1	.090
Fisher's Exact Test			
Linear-by-Linear Association	2.635	1	.105
N of Valid Cases	57		

Source: field survey, 2019

Table 9: Gender \* means of intellectual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.859 <sup>a</sup>	2	.651
Likelihood Ratio	.953	2	.621
Linear-by-Linear Association	.564	1	.453
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is 2.00.

Source: field survey, 2019

Table 10: Gender \* means of physical

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.783 <sup>a</sup>	2	.249
Likelihood Ratio	2.648	2	.266
Linear-by-Linear Association	1.211	1	.271
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is .67.

Source: field survey, 2019

Table 11: Gender \* means of social

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	1.261 <sup>a</sup>	2	.532
Likelihood Ratio	1.327	2	.515
Linear-by-Linear Association	1.237	1	.266
N of Valid Cases	57		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is 1.33.

Source: field survey, 2019

Table 12: Gender \* means of spiritual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.600 <sup>a</sup>	2	.741
Likelihood Ratio	.635	2	.728
Linear-by-Linear Association	.389	1	.533
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is 1.00.

Source: field survey, 2019

Table 13: Staff status \* means of emotion

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.320 <sup>a</sup>	1	.128
Continuity Correction <sup>b</sup>	1.503	1	.220
Likelihood Ratio	2.426	1	.119
Fisher's Exact Test			
Linear-by-Linear Association	2.280	1	.131
N of Valid Cases	57		

Source: field survey, 2019

Table 14: Staff status \* means of intellectual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	1.415 <sup>a</sup>	2	.493
Likelihood Ratio	1.570	2	.456
Linear-by-Linear Association	.449	1	.503
N of Valid Cases	57		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is 2.32.

Source: field survey, 2019

Table 15: Staff status \* means of physical

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	7.233 <sup>a</sup>	2	.027
Likelihood Ratio	7.186	2	.028
Linear-by-Linear Association	4.447	1	.035
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is .77.

Source: field survey, 2019

Table 16: Staff status \* means of social

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	4.511 <sup>a</sup>	2	.105
Likelihood Ratio	5.832	2	.054
Linear-by-Linear Association	4.350	1	.037
N of Valid Cases	57		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is 1.54.

Source: field survey, 2019

Table 17: Staff status \* means of spiritual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.053 <sup>a</sup>	2	.358
Likelihood Ratio	2.103	2	.349
Linear-by-Linear Association	1.956	1	.162
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is 1.16.

Source: field survey, 2019

Table 18 : Years of Service \* means of emotion

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.002 <sup>a</sup>	1	.965
Continuity Correction <sup>b</sup>	.000	1	1.000
Likelihood Ratio	.002	1	.965
Fisher's Exact Test			
Linear-by-Linear Association	.002	1	.965
N of Valid Cases	57		

Source: field survey, 2019

Table 19: Years of service \* means of intellectual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	4.350 <sup>a</sup>	2	.114
Likelihood Ratio	3.930	2	.140
Linear-by-Linear Association	2.272	1	.132
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is 1.79.

Source: field survey, 2019



Table 20: Years of service \* means of physical

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.646 <sup>a</sup>	2	.724
Likelihood Ratio	.627	2	.731
Linear-by-Linear Association	.548	1	.459
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is .60.

Source: field survey, 2019

Table 21: Years of service \* means of social

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.080 <sup>a</sup>	2	.961
Likelihood Ratio	.081	2	.960
Linear-by-Linear Association	.077	1	.781
N of Valid Cases	57		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is 1.19.

Source: field survey, 2019

Table 22: Years of service \* means of spiritual

Chi-Square Tests			
	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.302 <sup>a</sup>	2	.860
Likelihood Ratio	.316	2	.854
Linear-by-Linear Association	.257	1	.612
N of Valid Cases	57		

a. 3 cells (50.0%) have expected count less than 5. The minimum expected count is .89.

Source: field survey, 2019

Table 23: The summary of the P values of the component of wellness are shown in table

Components	Gender	Staff Status	Years Of Service
Emotion	0.101	0.128	0.613
Intellectual	0.651	0.493	0.114
Physical	0.249	0.027	0.724
Social	0.532	0.105	0.961
Spiritual	0.741	0.358	0.860

Source: field survey, 2019

#### IV. DISCUSSION OF THE RESEARCH FINDINGS

The research finding shows that the staff of the Polytechnic wellness when ranked as mentioned in 2.3.2 are on the high level of wellness emotionally, socially and spiritually on a good wellness and physically and intellectually on the marginal wellness. However, despite intellectual wellness is in marginal level but better up than the physical wellness meaning the worst component of wellness is the physical wellness. while from table 4.4, taking into count the second column that is gender, all the P values of the components are greater than the value of the level of significance which mean the Ho is accepted, means there is enough and adequate evidence to accept the null hypothesis (Ho), While the third column covered the staff status and the P values of emotional, intellectual, social and spiritual are greater than the value of the level of significance, thus the Ho is accepted and the P value of physical is less than the value of the level of significance, thus the Ho is rejected which means there is no enough and adequate evidence to accept the null hypothesis (Ho), therefore, the alternative hypothesis is accepted (Ha). The fourth column presented the years of service where all the P values of components are also greater than the value of the level of significance which the Ho is accepted.

#### Summary

The research is divided into five parts, the first part covered the introduction, aim and objectives, statement of problems, research questions research hypothesis, scope and limitation of the study. The second part discussed the meaning of health, determinants of health, wellness, components of wellness, etc. the third parts dwelled on the methodology where the research design is highlighted, population, sample size and technique of the study, sources of data and method of data collection were also discussed. Method of data presentation and analysis were also highlighted. While the fourth part covered the data presentation, analysis and the research findings and finally the last part centered on the summary, conclusion and recommendations.

#### V. CONCLUSION

From the data so far collected, presented and analyzed, one can rightly conclude that the research findings show that the staff of the federal polytechnic Damaturu are generally healthy and their wellness is grossly adequate. It also revealed that the areas that required attention is the marginal level of wellness particularly the physical because it has the lowest percentage. While the chi-square results revealed that out of the fifteen P values of the components of the wellness fourteen are greater than the level of significance which made the Ho accepted and one is less than the level of significance means Ho is rejected and also on the physical wellness as revealed by summary table 4.2 and table 4.4 respectively. It is therefore right to conclude that the wellness and health of the staff of the polytechnic are good and only the physical and intellectual aspects need to be improved.

## VI. RECOMMENDATIONS

The following recommendations are suggested so that the marginal wellness would be addressed and improved for better productivity:

- ✓ To set aside a well-equipped recreational spaces and centers
- ✓ Provide adequate housing for the staff
- ✓ Provision of good lightings, benches, etc on the campus
- ✓ Provision of road and transportation on the campus.
- ✓ Re-positioned the landscaping system
- ✓ Upgrade and equipped its clinic so as to provide appropriate health services.
- ✓ Re-renovate, construct new structures on the campus
- ✓ Employ and inculcate the act of maintenance culture in all and sundry on the campus.

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