

Experiences of Children Living in Overcrowded Homes: A Case of Ghana

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Abstrak

Kajian ini mengeksplorasi pengalaman anak-anak yang hidup dalam kondisi hunian penuh sesak di komunitas Apewosika, kawasan sub-urban Cape Coast Metropolis, Ghana. Riset fenomenologi deskriptif diadopsi dalam kajian ini. Wawancara langsung digunakan sebagai metode pengumpulan data dengan mewawancarai 10 informan yang berada di rentang umur 12-17 tahun. Seluruh informan dipilih dari 10 keluarga inti yang memenuhi kriteria yang telah ditetapkan. Metode analisis data tematik digunakan dalam kajian ini dalam menganalisis data yang telah dikumpulkan. Berdasarkan proses analisis data yang dilakukan terdapat beberapa tema meliputi: kurangnya privasi, gangguan tidur, kesulitan fokus belajar, dan penyebaran penyakit. Kajian ini mengambil kesimpulan bahwa kecukupan ruang hidup haruslah diakomodasi ketersediaannya di dalam rumah untuk anak. Setiap anak perlu memiliki ruangnya sendiri untuk mengurangi penyebaran penyakit, kecukupan waktu tidur, dan meningkatkan kualitas belajar.

Kata kunci: Anak, Ghana, Perumahan, Kesusakan Hunian

Abstract

The study explored children's experiences living in overcrowded homes in Apewosika Community, a suburb of the Cape Coast Metropolis in the Central Region of Ghana. The descriptive phenomenological research design was adopted for the study. A face-to-face interview was used to collect data from 10 participants aged 12-17 years. These participants were purposively sampled from 10 nuclear families based on the inclusion criteria. The thematic data analysis method was used in analysing the data collected. The themes that emerged from the data analysis are lack of privacy, sleep disturbance, difficulty studying at home, and the spread of diseases. The study concludes that enough space should be provided at home for children to have rooms to reduce the spread of infectious diseases among children and their family members, promote sleep, ensure their privacy and promote their studies at home.

Keywords: Children, Ghana, Housing, Overcrowded Homes

Introduction

The importance of housing is seen in diverse ways. A house not only serves as a shelter for individuals, but the manner in which individuals are housed is essential to the individuals' social, economic and general well-being. Therefore, adequate housing promotes social stability and cohesion, reduces stress, and increases residents' confidence (Cohen et al., 2007). Satisfactory housing affects children's performance at school, movement in the home, and household production positively, while low-quality housing may negatively affect the health and the general well-being of residents (Evans, Wells & Moch, 2003; Nsiah-Gyabaah 2004; Luginaah, Arku & Baiden, 2010). It has been reported that people living or having lived in overcrowded homes, condos, or conditions that are very little for their families are sick more regularly than others, primarily because

of respiratory inadequacy and aspiratory issues (Goux & Maurin, 2003). It is evident from other studies that overcrowded homes are sources of depression, anxiety, disturbed sleep, stress, and accidents around the home (Conley, 2001; Reynolds & Robinson, 2005). Also, overcrowded homes encourage the spread of infections among household members due to poor ventilation and hygienic conditions (Reynolds & Robinson, 2005; Wilson & Barton, 2018; POSTnote, 2018).

Researchers have reported that overcrowded homes affect children in several ways (Evans et al. 2001; Evans et al. 2002; Dockery et al. 2010). For instance, Solari and Mare (2012) found out that in the U.S. and Los Angeles, the negative effect of overcrowded homes on children who grew up in such living conditions persisted throughout their adult life and affected their well-being. Friedman (2010) reported that children from poor housing condition educational achievement were low as

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compared to other children in quality housing conditions. Threipland, McCulloch, Hibbard, Davies, Brinkley, and Pettifer (2015) add that growing up in a home with poor housing conditions has lifelong effects on the health and well-being of children, which in turn affect their education and future life chances. Further, Harker (2006) indicates that children living in overcrowded homes experience slow growth during childhood. In addition, children in crowded homes are reported to have difficulty making and keeping friends (Rice, 2006).

Studies on housing and children in Ghana have focused on the impact of housing quality, household wealth, and child development (Braithwaite & Lawson, 2014; Lartey, Khanam & Takahashi, 2016; Adjei & Kyei, 2013). Despite the tremendous studies highlighting the negative effect of overcrowded homes and housing environments on children, one area yet to be adequately studied in Ghana is the experiences of children living in crowded homes. For this reason, this study sought to discover children's experiences living in overcrowded homes in Apewosika (Ghana) by reporting their challenges and the need for social support. This study is essential to provide empirical evidence that will inform policy-making.

Ghana grapples with an acute housing deficit problem (Ansaah & Ametepey, 2014). Its housing shortfall exceeds 500,000 units, as it is unable to meet approximately 65% to 70% of its housing needs (Ansaah & Ametepey, 2014). Further, rapid population growth, increased urbanisation (Government of Ghana, 2009), degradation of existing structures, the absence of a sustainable housing delivery policy framework, and poor management systems (Kwofie et al., 2011) have been identified as factors contributing to this deficit. In addition, inadequate mortgage finance, the defective land tenure system, and the high cost of land (Afrane, Bin Bujang, Liman, & Kasim, 2016) exacerbate the country's housing problem. This situation has led to many people living in unfinished houses, unsuitable housing environments, and overcrowded homes (Ansaah & Ametepey, 2014; Boamah, 2015).

Apewosika is a suburb of the Cape Coast Metropolitan in the Central Region of Ghana. It is located in the North-Western part of Cape Coast and to the South of the University of Cape Coast (Appiah & Bosiwah, 2015). According to the 2010 population and housing census, the total

population of the Apewosika Community was 2,792, with only 247 houses (Ghana Statistical Service, 2010). The people of Apewosika are primarily traders and fishmongers. However, due to the community's proximity to the University of Cape Coast, some inhabitants of Apewosika Community have gained employment at the University as cleaners, labours and administrative staff (Appiah & Bosiwah, 2015).

Compound houses serve as the primary dwelling units in the Apewosika community. These compound houses typically accommodate several nuclear families. In such residences, individuals often share communal facilities or use public amenities in the community. The washrooms and kitchen are typically separate from the main building. However, these houses lack appropriate drainage systems, leading to improper disposal of liquid waste within the community. Additionally, they are constructed without adequate consideration of building regulations. Thus, the houses are poorly planned, and the community can be described as overcrowded. The families in these houses within the Apewosika community are either renting or are living in a family house. Hence, they do not have many rooms at their disposal. Based on this, the Apewosika community was chosen as an ideal place to discover children's experiences living in overcrowded homes.

Theoretical Framework

Researchers, countries, and institutions have used different approaches to measuring overcrowded homes and/or households. No standard measure of crowding is used internationally (Goodyear, Fabian, & Hay, 2011), but the commonest approaches used for measuring overcrowding in homes and/or households are the density measure, standard occupancy measure, and stress measures (Brackertz, Davison, Borrowman, & Roggenbuck, 2019).

The density measure approach to measuring overcrowding uses the number of persons per room or bedroom, square meter(s) feet per person, and rooms per person. An example of the density measure approach is the American Crowding Index (ACI). Based on the ACI, a house is crowded when two persons share a room, while a home is described as severely crowded when there are more than 1.5 people per room (WHO, 2018). The crowding threshold has been identified as 165 square feet per person.

This approach, however, does not take into account the ages or genders of individuals in a dwelling. The density measure approach, which considers the number of persons per room or per bedroom, has been utilized by the United States and the United Kingdom (Blake, Kellerson, & Simic, 2007). Also, Organisation for Economic Co-operation and Development [OECD] 2017 employed the density approach (rooms per person measure). As much as this approach is easy to use, it does not consider cultural considerations concerning the use of rooms or space (Brackertz et al., 2019).

The occupancy standard measure approach in measuring overcrowding considers some cultural standards. The Canadian National Occupancy Standards (CNOS) and Proxy Occupancy Standards are examples of the occupancy standard used by different countries and institutions. For instance, Australia and New Zealand use the Canadian National Occupancy Standards (CNOS). The CNOS criteria for households stipulate that two persons may share a room. Furthermore, children of different sexes under five years old can share a bedroom, but those of the opposite sex aged five years and older should be separated. The criteria also state that, ideally, children of the same sex aged 18 years and older may share a bedroom. In addition, single household members aged 18 years or older, as well as parents or couples, should have separate bedrooms.

On the other hand, the occupancy standards used by the European Union (EU) state that the household should have a room, an adult couple should have a room in the home and a room for each single adult individual above 18 years. It also includes sharing among children of any sex below 12 years, while sharing of bedrooms among children below 18 years should be of the same sex. However, children of different sex aged 12-17 years should not share the same room. In the United Kingdom, for instance, the Bedroom Standard is used to determine overcrowding in social housing. Based on this standard, pairs of children below ten years old (of any gender), unmarried individuals of 21 years and above (of any gender), and married or cohabiting couples need their own room. Likewise, pairs of children of the same sex, 10-21 years old, could share a bedroom (Shelter Legal England, 2019).

This study also uses stress measures to explain the psychological condition of dwellers.

It focuses on whether household members are stressed due to overcrowding and if this could lead to conflict or homelessness. In implementing this approach, dwellers are asked whether they perceive their house as overcrowded. If an individual perceives it to be so, then the house is considered overcrowded. A more refined version of the stress measure involves gathering information about experienced stress, such as the loss of personal control or health-related issues. Importantly, this approach does not account for any cultural assumptions, a feature that renders it applicable in various geographical settings. However, it is subjective that overcrowding and stress experienced by individuals could be influenced by their cultural understanding of overcrowding and their perception of stress.

In this study, it was recognised that using indexes based on bedrooms was culturally inappropriate. This is because, within the Ghanaian context, individuals are used to sharing bedrooms with siblings, other extended family members and/or parents. Also, the extended family lifestyle practised in Ghana makes using indexes or approaches based on bedroom per person difficult. Again, the use of indexes that uses people per floor area would be inappropriate in the Ghanaian context because in some communities in Ghana, like Apewosika (the study area), houses are usually built by indigenous craftsmen. Therefore, such houses are either smaller or bigger than the standard room size. Adding to the difficulty in using people per floor area is the difficulty in determining the size of the room, considering the study's participants. Although applicable in many geographical settings, the stress measure approach was unsuitable in the Ghanaian setting because it does not consider cultural assumptions. Also, due to its subjective nature, it was not regarded as appropriate for this study. Therefore, the Canadian National Occupancy Standard (CNOS) was most suitable for this study because CNOS recognises cultural influences. Also, CNOS was used because of its usefulness in the Ghanaian context, as postulated by Arku, Luginaah, Mkandawire, Baiden, and Asiedu (2011). Hence, in this study, children living in overcrowded homes were those aged 12- 17 years who shared a room with their parents or siblings of the opposite sex.

Methods

The study was conducted in Apewosika, a suburb of Cape Coast Metropolis, Ghana. The study

employed the descriptive phenomenological design to explore children's experiences living in overcrowded homes. This design was used because the study sought to understand and explain participants' experiences as they shared their experiences through face-to-face interviews (Patton, 2002; Tolentino, 2014; Elley-Brown, 2015). Ten (10) children living in overcrowded homes were involved in the study. These children were purposively sampled from 10 nuclear families based on pre-selected criteria relevant to the purpose of the survey (Speziale & Carpenter, 2007).

Study participants ranged in age from 12 to 17 years. This range was chosen to ensure credible information and significant results. Data was collected through in-depth interviews. Because individuals under 18 are considered minors in Ghana, consent was sought from the parents of these children before conducting the interviews. Parents were then asked to sign a consent form, affirming their understanding that their children would be participating in the study. During a preliminary interaction designed to establish trust and rapport, the purpose of the study was explained to the participants. They were assured that all information provided would be treated confidentially (Tolentino, 2014).

Participants were informed that they had the right to refuse to participate or leave at any point in the study based on their own will or perceived that their rights were being infringed. Participants were assured that their refusal to participate or withdraw from the study at any time would not be used against them in any form. Individual study participants were then asked to express their complete understanding and willingness to participate by signing a consent form. The study participants who could not sign but agreed to participate had their parents sign. This study adopted Colaizzi's process for phenomenological data analysis (Morrow, Rodriguez & King, 2015). Pseudonyms were given to individual participants to ensure anonymity and confidentiality. The findings derived from the analysed data were presented in themes.

Result

The findings of this study showed that children in overcrowded homes experienced varied challenges. These challenges associated

with the overcrowded home were related to their sleep, health, privacy, and education. The study participants' characteristics were presented first, followed by the themes that emerged from the analysis. The themes that emerged from the findings represent participants' experiences. These themes are described in detail and supported with interview extracts.

Table 1 shows the results of the participants' characteristics. It presents gender, age, family size, family composition, number of rooms, and sleeping places of participants. A total of ten (10) participants, five males and five females, were involved in this study. The participants were between the ages of 12 – 17 years. Out of the 10 participants, four had a family size of six, comprised of the parents (father and mother) and four children, except one of the participants whose family was made up of a single mother and five children. Three of the participants revealed that they have a family size of five. Two families consist of parents and three children, while one consists of a mother and four children. One of the participants has a family size of seven; the parents and five children. The remaining two participants indicated that they have a family size of four; their parents and two children.

Concerning the number of rooms and sleeping places available to the study participants, Table 1 depicts that four participants and their families had only a single room each. This room is the sleeping place for both the parents and the children. Five participants indicated that their families have two rooms; a living room and a bedroom. For children in these families, the living room is their sleeping place. Only one of the participants indicated that the family has three rooms; a living room and two bedrooms. The children in this family sleep in one of the bedrooms while the parents use the remaining bedroom.

Theme 1: Lack of Privacy

Privacy is a very important psychological need that allows individuals to think, daydream and work without interruption (Sherwood, 1996). Sherwood further explained that as much as individuals want to interact with others, they also need their privacy to be alone occasionally for good mental health. Hence, a home should provide places where individuals and family members can have their privacy. In other words, the home should meet individuals' need for

Table 1.
Participant's Characteristics

Pseudonyms	Gender	Age	Family Size	Family Composition	Number Rooms	Sleeping Place for Children
Ruby	Female	13	4	Parents, 2 children	1	Same room with parents
Evelyn	Female	12	6	Parents, 4 children	2; a living room and bedroom	Living room
Charity	Female	14	5	A mother, 4 children	1	Same room with mother
Jacinta	Female	16	7	Parents, 5 children	2; a living room and a bedroom	Living room
Nancy	Female	17	4	Parents, 2 children	1	Same room with parents
John	Male	13	5	Parents, 3 children	2; a living room and bedroom	Living room
Daniel	Male	12	6	Parents, 4 children	2; a living room and a bedroom	Living room
Prince	Male	13	5	Parents, 3 children	2; a living room and a bedroom	Living room
Solomon	Male	15	6	Parents, 4 children	3; a living room and 2 bedrooms	1 of the bedrooms
David	Male	16	6	A mother, 5 children	1	Same room with mother

Source: Field Data, 2021

privacy. However, this study's findings showed that the participants' homes did not meet their privacy needs due to the inadequate number of rooms. This situation resulted in brothers and sisters or parents sharing the same room with their children. The age of the participants falls within the age bracket of persons the World Health Organization [WHO] (2003) describes as adolescents.

The adolescence phase of life is characterised by the need for privacy (Lim & Kim, 2020). This suggests that participants' need for privacy is high because when children reach adolescence, they feel uncomfortable sleeping in the same room with their parents or a sibling of the opposite gender (Adu-Gyamfi, 2018; Lim & Kim, 2020). Solomon spoke about how he feels uncomfortable sharing a room with his sisters in the following words:

"...my sisters and I use the same room. So, I am always very careful when I am dressing or changing my clothes because I don't know when any of my sisters will enter the room. When they [referring to his sisters] are in the room, and I need to change my clothes, I go to the bathroom. I feel uncomfortable sharing a room with them [referring to his sisters] because I am older and a male, and they are girls. At least I should have some privacy. Because of this, I sometimes sleep in the living room."

When adolescents feel uncomfortable due to the lack of privacy, it could result in adolescents sleeping with their friends, as depicted in David's experience:

"Privacy in this house? [he questioned the interviewer]. There is no privacy here [he answered]. We are all in this one room, and so there is no privacy. I sometimes sleep in my friends' house because he has a room to himself, and I feel more comfortable there than here [referring to his house] ..."

Also, the overcrowded situation prevented participants from being themselves. Evelyn shared her experience:

"Sometimes I just want to be alone, but it is not possible because all the four of us [referring to her siblings and herself] are using a room. My siblings and I use the living room, while my parents use the bedroom."

Theme 2: Sleep Disturbance

Ideally, each individual should have a suitable personal space or sleeping place. A house should provide a safe and convenient place for its members to eat, store possessions, and sleep (Sherwood, 1996). But that is not the case for many Ghanaians due to the country's housing deficit problem. This situation was not different for the participants involved in the study. The participants revealed that they

share the same room with their parents and/or siblings of the same sex or opposite sex. Also, some participants explained that the living room serves as their bedroom. This situation resulted in the participants' sleep being disturbed, as depicted in the participants' interviews. John expressed:

"...I don't get enough sleep because sometimes I want to sleep, but my siblings will be watching television in the living room. So, I would have to wait for them to finish watching whatever they are watching before I go to sleep...sometimes too I would sleep and my siblings would ask me to reposition myself so that they can also sleep. That interrupts my sleep"

Daniel spoke about how his father interrupted his sleep because he sleeps in the living room. He said:

"...my father either goes to work early and comes home late. My sleep is mostly interrupted whenever he comes home late or is going to work early in the morning, around 4 am, he will pass through the living room before going to the bedroom or out to work."

According to Ruby, she shares the one-bedroom with her parents and her brother; therefore, she cannot get enough sleep. She expressed:

"...my mother's dawn prayer, which usually starts at about 3:00 am and ends at about 5:00 am or 6:00 am, prevents me from sleeping well [getting enough sleep]. Whenever she starts praying, I can't sleep again"

Jacinta added, *"...because we are many in the room, the room becomes hot [warm] such that I sweat, which makes me feel uncomfortable and unable to sleep. When it happens like that, I would usually get up to pick my book to fan myself or go out of the room to take some fresh air for a while. But because our door makes noise [squeaks], my mother usually complains that I disturb her sleep..."*

Theme 3: Difficult in Studying at Home

Previous studies (Lim, 2010; Lim & Kim, 2020) have reported that poor housing environments and overcrowded homes negatively influence

children's academic achievement. The findings of this study also showed that participants had difficulty in studying at home because they did not have their personal space for studying due to the overcrowded situation in their homes. The findings of the study showed that the children involved in this study had to study in the open space in front of their homes, in the kitchen, or on verandas where it was difficult for them to concentrate because of mosquitoes or passers-by. Nancy said:

"In the evenings, I study in front of the house. Just here! [referring to where the interview was taking place; the open space in front of her house] but I can't concentrate because people would be passing by, which distracts me. And sometimes I want to study at dawn, but I can't because my parents complain that they cannot sleep when the light is on."

In sharing his experience, Daniel explained:

"I wait for my mother to finish cooking, then I would take my chair and table to the kitchen to do my homework and study. I prefer studying in the kitchen because the mosquitoes are less than on the veranda."

Some participants who wanted to study had to do that outside their homes; in their friends' homes as depicted by Jacinta in her explanation:

"When I want to study, I go to my friend's house. She has a table and a chair in her room where we study. I don't have my own room. I sleep in the living room and as for that place [referring to the living room], I can't study there because they would be watching TV and be making noise."

Some participants took advantage of their proximity to the University of Cape Coast to use its summer hut for their studies in the evening; although there are mosquitos, it is comfortable compared to their homes. Charity explained:

"If I want to study, I go to the summer hut at the University of Cape Coast campus because there is no comfortable place to sit and study here [referring to her house]. But even at the summer hut, there are many mosquitos and other insects that disturb me". Ruby added, "I don't normally study at home because there

is no place to study except inside our room. But the TV or radio is always on, so I can't study. So I use the summer hut at UCC campus [University of Cape Coast]."

Theme 4: Spread of Diseases

The overcrowded situation in the participants' homes facilitated the transmission of some common communicable diseases and viral infectious diseases such as common cold and skin rashes such as fungal infections. This is because most of the children indicated that they don't only share the available room but as well share sleeping mats, mattresses, and beds. These conditions and poor ventilation promote the viability of communicable diseases as John explained how his siblings were also affected by a skin rash he experienced. He said:

"I remember I had some skin rashes and my mother asked my other two siblings not to sleep close to me on the bed or else they might experience the same. However, my older brother had it. I think it was because we were sleeping in the same room and on the same bed".

Similarly, Evelyn spoke about how she gets cold because her brother has a cold in the following words: *"Whenever my little brother gets cold, I will also get cold in less than one week".*

Furthermore, a participant expressed:

"Sometimes one person would get cold, and everyone will get because we sleep in the same room" (Prince).

Discussion

The findings of this study highlight the experiences of children living in overcrowded homes in a suburb (Apewosika) of Cape Coast Metropolis in Ghana. The study revealed that all the participants experienced a lack of privacy in their homes due to limited space, which led to sharing a room with siblings or/and parents. This implies that participants cannot maintain solitude, isolation, anonymity, and intimacy with friends and family, as postulated by Kaya and Weber (2003). This study's findings align with previous research results reporting that children living in overcrowded homes struggle with a lack of personal space and privacy (Lim & Kim, 2020).

Furthermore, it was evident that children in overcrowded homes experience sleep

disturbances. This was due to inadequate rooms, which could result from parents' inability to rent a house with enough rooms because there are limited houses for rent at high prices within the Cape Coast Metropolis. This finding suggests that children in overcrowded homes are deprived of enough sleep, which could result in feeling too sleepy during the day, which in turn may affect their academic work, as postulated by Lim and Lee (2009) and Evans et al. (2001) and Lim, (2010). Also, the finding of this current study is consistent with previous studies, which found that children living in overcrowded homes experience sleep disruption due to inadequate available space (Conley, 2001; Reynolds & Robinson, 2005; Harker, 2006; Kohen, Bougie & Guèvremont, 2015; Clair, 2019).

In addition, as some studies reported that overcrowded homes influence children's academic performance (Lim, 2010; Lim, & Kim, 2020), this study also found that in the Apewosika Community, children in overcrowded homes experienced difficulty studying at home due to the lack of comfortable and quiet space. This implies that the academic performance of these children may be affected as a study conducted in the US found that overcrowding situations at home negatively influenced math and reading test achievement of children (Solari & Mare, 2012).

The data revealed that in overcrowded homes, individuals experienced the spread of communicable diseases among family members. Similar to the findings of this study are the findings of a systematic review conducted by Ali, Foster, and Hall (2018), which reported a positive relationship between crowded homes and the spread of infections and skin infections among home occupants. Also, the finding of this study concurs with the findings of Gwandure (2009), who found that inadequate living space and lack of privacy negatively influenced children's psychological functioning concerning anxiety, depression, and conduct disorder. This finding implies that the children's academics may be affected as they cannot attend school due to diseases.

Conclusion

This study presents empirical evidence about the experiences of children living in overcrowded homes within the Cape Coast Metropolis of Ghana. While these experiences are consistent with findings from other countries, it

was found that children in overcrowded homes in the Apewosika Community, located within the Cape Coast Metropolis, particularly experienced sleep disturbances, lack of privacy, increased spread of diseases, and difficulty studying at home. By providing ample space at home, including individual rooms for children, the spread of infectious diseases among children and their family members could be reduced. This would also promote better sleep, ensure privacy, and foster an environment conducive to studying at home, ultimately resulting in a positive impact on their academic performance.

This study included 10 participants recruited from Apewosika Community in the Cape Coast Metropolis. The small sample size is a limitation for generalising the findings, although qualitative research does not aim for population generalisability. However, a larger sample would have strengthened the findings. Therefore, further studies using a larger sample recruited from other communities in the Cape Coast Metropolis and Ghana should be conducted to generalise results and recommend social policies. I recommend that future research address the poor housing environment and its influence on families in Ghana.

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