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Daytime Sleepiness Status and Family Dysfunctionality of Residents in a Youth Restive Community in Rivers State, Nigeria

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Abstract

The daytime sleepiness and youth dysfunctionality in the youth restive community in Diobu, Rivers State, Nigeria was investigated through EPWORTH and APGAR models. A convenience or purposivesampling technique was used to arrive at the sample size of 28. The youths sampled were those who have resided in the area for 4-20 years and above and engaged in different trades from bunkering to criminal activities. The EPWOTH scale result depicted that 14, 12, and 2 persons representing 50.00%, 42.86%, and 7.14% had normal, mild, and moderate sleep respectively. Furthermore, 50.00% of the residents have undetected or mismanaged sleepiness issues. However, there were no severe sleepiness-related issues. Again, the APGAR scale depicted that 8, 16, and 4 persons representing 28.57%, 57.14%, and 14.29% respectively were highly functional, but moderately dysfunctional, and severely dysfunctional. Thus, suggesting that the majority of the youths sampled were dysfunctional and could not relate well with their family without knowing it. The overall result has shown that the majority of the persons sampled had excessive daytime sleepiness which agreed with the high level of family dysfunctionality observed in the area. This situation, if not properly handled, can lead to behavioural problems, mode changes, and impaired concentration adversely affecting productivity.

Keywords: youth restiveness, Diobu, Epworth and Apgar Models

Introduction

Sleepiness can be viewed as a physiological need or state that encourages the onset of sleep and is reversed by getting insufficient sleep. The desire to sleep is the state of being sleepy. The more time we spend awake, the more likely we are to feel sleepy, which is characterized by a relaxed condition of muscles and a diminished sensitivity to external stimuli. Sleep is a regularly occurring physical and mental condition characterized by altered consciousness, largely restrained voluntary muscular movement, and diminished interactions with the environment. Alcohol consumption and eating foods high in tryptophan can both make you sleepy (Brandon, 2018). There are three types of sleep: sound sleep, moderate, and deep sleep respectively.

In the past few years, the words "youth" and "restiveness" have been used so frequently together that it now looks as though they have a life of their own. There have been numerous instances of youth agitation over the past ten years or more in some local governments in Rivers State, including the Phalga local government, which has resulted in numerous fatalities, the loss of priceless infrastructure, and the destruction of private property. Elegbeleye (2005) described youth restiveness as a persistent protest launched by an organized group of youths to enforce the desired consequence from a constituted authority. It is characterized by violence and interference with legal activity. A sustained protest embarked upon to enforce a desired

outcome from a constituted authority by an organized body of youths, fits the label of youth restiveness. It is also a combination of any action or conduct that constitutes unwholesome, socially unacceptable activities engaged in by the youths in any community.

Furthermore, youth restiveness includes a persistent demonstration that is launched to pressure legitimate authority to take a desired action. Any action or behaviour that constitutes unwholesome, inappropriate behaviour by young people in any community could potentially be included in the mix.It is a phenomenon which in practice has led to a near breakdown of law and order, low productivity due to disruption of production activities, increasing crime rate, intra-ethnic hostilities, harassment of prospective developers and other criminal tendencies.Youth are those between the ages of 18 and 35, according to the National Youth Development Policy.

This scourge has been around for a long time and it looks as though it is defying solutions. Maybe the question that needs to be asked is what is truly responsible for this expression of dissatisfaction by the youth of a community. Have their complaints over the years not been heard or attended to? Is there more to the killings and destruction than just drawing attention to the needs they want to meet? Are the youth trying to draw society's attention to themselves more than the issues they appear to be fronting? In Nigeria for instance, the Niger Delta region, which is unarguably the bedrock of the oil industry in Nigeria permeated the news for a lengthy period as the youths of this region tried various means of getting the government and oil companies to pay attention to their dire conditions of living and alleviate their sufferings since according to them, the resources which are building the nation is flowing from their hand so by that they should also be partakers of its benefits.

This strife led to a rise in the kidnapping and vandalization of oil pipelines as well as other vices that were being perpetrated. After years, the Nigerian government intervened and the Amnesty program was created to help deliver some of the promises which government had made to the youths in these areas. Several studies have identified factors responsible for youth restiveness. Elegbeleye (2005) identified three major factors: The peer-motivated excitement of being a student, the jingoistic pursuit of patriotic ideas, and perceived victimization arising from economic exploitation.

Another study carried out in the Niger Delta region by Ofem and Ajayi (2008), identified a lack of humanitarian and social welfare, lack of good governance, corrupt practices of government officials, inadequate training programmes, unemployment, inadequate recreational facilities and lack of quality education.

In addition, bad governance has been implicated. Good governance is required for the growth and development of any nation. Unfortunately, in Nigeria, bad governance is more common than good; the World Bank identifies the main characteristics of bad governance including Failure to properly distinguish between what is public and what is private leads to private appropriation of otherwise public resources. These and more are the features of most administrations in Nigeria. For instance, Onyekpe (2007) observed that successive administrations in Nigeria have not allowed much to the needs of the youth, and, worst still, the meagre allocation is often diverted by government officials to their private accounts and projects. Thus, youth are restive and agitated when they perceive that resources meant for them are being wasted by those in authority (Fawole et al, 2018).

Again, Quality education has a direct bearing on national prestige, greatness, and cohesion. The knowledge and skills that young people acquire help determine their degree of patriotism and contribution to national integration and progress between 2000 and 2004, about 30 per cent of Nigerian youths between ages 10 and 24 were not enrolled in secondary school (Population Reference Bureau, 2006) perhaps the prohibitive cost of acquiring education is responsible and the after effect of this situation is that thousands of youths roam the streets in

cities in Nigeria. Those who manage to complete secondary school have no opportunities for tertiary education. Having been denied the chance to reach their potential, they are disorientated and readily available for antisocial actions (Onyekpe, 2007).

Worse still, some who struggle to enrol in various educational institutions drop out due to a lack of basic learning facilities. This situation is attributable to the dwindling resources of government at both federal and state government levels as a result of the economic meltdown.

Furthermore, inadequate communication and information flow could be another cause. Communication creates room for sharing information. It helps people express their thoughts and feelings, clarify problems, and consider alternative ways of coping or adapting to their situation such as sharing promotes social cohesion. People must have access to communication facilities, to communicate with the people making the decision that affects them. Sadly, rarely do youth in Phalga in Rivers State, Nigeria participate in decision-making processes on issues that affect their lives (Ifidon & Ahauzu, 2005).

One of the problems in a youth-restive environment is the total breach or breakdown of the existing peace in the community which can dovetail into the following: The downfall and demise of a formerly model town, and the halting of development projects, investment, marriages between the communities and her neighbour, and a careless way of life that becomes out of control. Sadly enough, it can adversely affect the commerce or economy and social life of the people, thus, preventing advancement.

Again, it generates tension and anxiety that make the people sleepless which can attract other illnesses such as high blood pressure and bad memories on the minds of residents, which may lead to work dysfunctionality and insomnia. Furthermore, there is a dearth of information on the use of models to determine the sleepiness and dysfunctionality status of any populace around the Port-Harcourt metropolis in Rivers State, Nigeria.

There is ignorance by the majority of the youth restive populace on the possible health risks associated with their acts which can lead to palpable tension and anxiety. The tension and anxiety could make people sleepless to cause other illnesses like high blood pressure.

Again, apart from insomnia, residents could have low performance or work dysfunctionality. The need to know and identify such problems is the driving force for this study. Furthermore, since there is a dearth or paucity of information on the use of models to determine the sleepiness and dysfunctionality statusof youths in Diobu, Port-Harcourt, there is a serious need to use such models. Moreover, the result obtained could serve as reference material for other scholars. There is, therefore, a need to collate more data using these models.

Methodology

The design used for this study was a descriptive survey design. The sampling technique adopted in the study was a non-probability technique using convenience or purposive method. The researcher judgmentally selected 28 accessible respondents during one of their restiveness periods, who volunteered the necessary information needed for the study by filling out the well-structured questionnaire. Hence, the sample size of the study was 28 respondents. The researcher collected the data from the primary sources using questionnaires. The questionnaires consist of section (A) Demographic data: personal data, age, marital status, gender and religion. Section B with items focused on the determination of daytime levels of sleepiness and dysfunctionalityof persons living in youth restive communities in the Diobu, Port Local Government Area of Rivers State. The well-structured questionnaire was taken to the located area in Diobu and given to the respondents with the necessary instructions for filling the questionnaire. It was retrieved from the respondents after filling and was collated. The data obtained was subjected to the descriptive statistic of the mean and standard error of mean, percentage and frequency distribution and presented in a frequency distribution table. The

Statistical Package for Social Science (SPSS) version 25 and Microsoft Excel 2010 version were used for data tabulation and the generation of descriptive statistics.

Results

Sex Distribution of Respondents

The results obtained from the data collected were presented using simple descriptive statistics such as frequency Tables, percentages, and figures. The result in Table 1 reveals that out of the twenty-eight persons sampled, 14 persons (50.00%) were males and 14 persons (50.00%) were also female. The result further reveals that both females and males had equal representation as depicted by the percentage table.

Table 1: Sex Distribution of Respondents

Sex	No. of Respondents	Percentage
Males	14	50
Females	14	50
	28	**100**

Source: Researcher's Filed Survey, 2024

Age Distribution of Respondents

The age distribution of the respondents was coded and presented in Table 2. The result depicted that the respondents were of different age groups which ranged from less than twenty-one (21) years to forty-six (46) years and above. Furthermore, the age distribution has shown that the no of responses is 3, 15, 7, 1, 1, 1, for age ranges of < 21, 21 – 25, 26 – 30, 36 – 40, 41 -45, and 46 years and above respectively. It also depicted that there were no responses from those within the age range of 31 – 35 years. In terms of percentages, the age range of respondents with ages < 21, 21 – 25, and 26 – 30 years had percentages of 10.71, 53.57 and 25.00% respectively, while the rest age group had equal percentages of 3.57%. However, the age range of 31 -35 had zero percentage since there was no respondent from this age group. The result has shown that most of the respondents are youths between the ages of 21 – 30 with few less than 21 years.

Table 2: Age Distribution of Respondents

Age Range	No of Respondents No. of Respondents	Per cent Percentage
< 21	3	10.71
21 - 25	15	53.57
26 - 30	7	25.00
31 - 35	0	0.00
36 - 40	1	3.57
41 - 45	1	3.57
46 and above	1	3.57
Total	28	100.00

Source: Researcher's Field Survey, 2024

Number of Years of Residence in the Restive Area

The number of years the respondents have lived in the studied restive area revealed that they had lived in that environment for several years before the study was conducted (Table 3). The result showed that 6 people representing 21.43% have lived in the study area for less than 5 years, while 9 people representing 32.14% have lived between 5 and 10 years in the same study area. Furthermore, 8 and 5 people representing 28.57 and 17.86 % had lived in the study area for 15 – 20 years and over 20 years respectively. The overall result depicted that the majority of the respondents have lived in the place over reasonable years and must have good knowledge of the activities of the place.

Table 3: Number of Years of Residence in the Restive Area

Age Range (Years)	No of Respondents	Percentage
< 5	6	21.43
5 - 10	9	32.14
15 - 20	8	28.57
> 20	5	17.86
Total	28	100.00

Source: Researcher's Field Survey, 2024

Health-Related Questions

The result reveals that 25 people representing 89.29% slept well at night while only 3 people representing 10.71% had problems with their sleep at night. When asked if they sleep well in the afternoon, 19 people representing 67.86% were reported to sleep well during the day while 9 representing 32.14% did not sleep well during the day.

The result further reveals that 12 persons representing 42.86% claimed that insecurity is the likely cause of sleeplessness while 16 people representing 57.14% claimed that insecurity is not the likely cause of sleeplessness. However, others claimed that it was noise pollution rather than insecurity that caused their sleeplessness. The result reveals that 19 people representing 67.86% claimed that noise pollution is the likely cause of sleeplessness while 9 persons representing 32.4% claimed that noise pollution is not the likely cause of sleeplessness.

As regards criminal activities in the study area, the present result has shown that 11 persons representing 39.29% claimed that high rates of criminal activities affect their business while 17 persons representing 60.71% claimed that it does not affect their business. Furthermore, 11 persons representing 39.29% claimed that high rates of criminal activity affected their afternoon sleep, while 17 persons representing 60.71% claimed that a high rate of criminal activity did not affect their afternoon sleep. From the result, 13 persons representing 46.43% reported that a high rate of criminal activities affected their nighttime sleep; while 15 persons representing 53.5% reported on the contrary that a high rate of criminal activities did not affect their nighttime sleep in any way.

Another activity that takes place in the study area is bunkering activities. The respondents reported that 17 persons representing 60.71% agreed that noise from bunkering activities at night causes them annoyance; while 11 persons representing 39.29% reported that noise from bunkering activity at night does not cause them annoyance. Yet, others have implicated the smell of crude as a problem. The result showed that 17 persons representing 60.71% agreed that the smell of crude from bunkering activities affected them; while 11 persons representing 39.29% agreed that the smell of crude from bunkering activities did not affect them. The result further revealed that 15 persons representing 53.57% agreed that cult activities affected their sleep; while 13 persons representing 46.63% agreed that cult activities do not affect their sleep.

Table 4: Health-Related Questions

S/N	Questions	Yes	Percentage	No	Percentage
1.	Do you sleep well at night?	25	89.29	3	10.71
2.	Do you sleep well during the day?	19	67.86	9	32.14
3.	What are the likely causes of Sleeplessness?				
a	Insecurity	12	42.86	16	57.14
b	Noise from Gunshot and Transient Noise	19	67.86	9	32.14
4.	**High Rates of Criminal Activities**				
a	Does it affect your Business?	11	39.29	17	60.71
b	Does it affect your Afternoon Sleep?	11	39.29	17	60.71
c	Does it affect your nighttime sleep?	13	46.43	15	53.57
5.	**Bunkering Activities**				
a	Does noise from this Activity at Night, cause you Annoyance	17	60.71	11	39.29
b	Does the Smell of Crude affect you in any way?	17	60.71	11	39.29
6	Does cult Activities affect your Sleep?	15	53.57	13	46.43

Source: Researcher's Field Survey, 2024

Level of Daytime Sleepiness of Respondents

To determine the levels of daytimesleepiness of residents, the Epworth sleepiness scale (ESS) was used. The sleepiness was categorized as normal, mild, moderate and severe, depending on the ESS. The result reveals that 14 persons representing 50.00% had normal sleep, while 12 persons representing 42.86% had mild sleep, and the remaining 2 persons representing 7.14% had moderate sleep respectively. The result also revealed that none of the respondents had severe sleep. The overall result has shown that 50.00% of the residents, who were sampled, had sleep-related issues during the daytime.

Table 5: Level of Sleepiness of Respondents using the Epworth Scale Model

S/N	Sleep Description	Epworth Sleep Scale (ESS)	Responses	Percentage
1	Normal sleep	0-10	14	50.00
2	Mild sleep	11-14	12	42.86
3.	Moderate sleep	15-17	2	7.14
4.	Severe sleep	18 and above	0	0
5.		Total	28	100.00

Source: Researcher's filed Survey, 2024

Dysfunctionality of Respondents in their Family Using APGAR Scale Model

Another model used for this study is the APGAR scale. This model predicts the dysfunctionality of individual respondents. The result depicts that 8 people representing 28.57% can still function well despite the activities in the study area. Furthermore, 16 persons representing 57.14% were moderately functional while 4 persons representing 14.29% were practically dysfunctional at their work their families. The result confirmed that there is a small percentage of dysfunctionalityin 4 persons (14.28%), followed by highly functional 8 (28.57%) and moderately dysfunctional 16 (57. 14%) in the study area respectively. This implies that the majority of people could not relate well with their families in the community.

Table 6: Dysfunctionality of Respondents in their Family

Sleep Description	APGAR SCALE	No of Respondents	Percentage
Highly Functional	8 – 10	8	28.57
Moderately dysfunctional	4 – 7	16	57.14
Dysfunctional	0 – 3	4	14.29
	Total	28	100.00

Source: Researcher's Filed Survey, 2024

Discussion

Level of Sleepiness and Sleep Description of Respondents Using Epworth Scale

The result of the Epworth scale has shown that 14 persons representing 50.00% of the population had normal sleep, while the rest had excessive daytime sleepiness during the day which was scored as 12 representing 42.86% and 2 representing 7.14% for mild and moderate sleep respectively (Table 5). The overall result depicted that 50.00% of the residents sampled had serious or excessive sleepiness-related issues without them knowing. Furthermore, the result has shown that 50.00% of the residents have sleepiness problems which are either undetected or mismanaged, and this is in accord with the report of Meaklim et al (2020) and Grannakopoulos et al (2021), who independently reported that daytime sleepiness had caused behavioural problems, mood changes, memory lapses, impaired concentration and affected productivity. This view was further made by Janssen et al (2017) who reported the effectiveness of the Epworth scale in detecting daytime sleepiness in both adults and children.

The positions of the previous authors are in agreement with the view of Omotoso et al (2022) who studied sleep quality and its correlates among adolescent schooling in North-Central Nigeria. It was further made strong by Jemilohun et al (2022) who determined the sleep quality in the Nigerian community. This result is in agreement with a poll conducted by the American Sleep Foundation, which reported that 18% of respondents reported experiencing excessive sleepiness (John, 2000; Gradisar et al, 2013). However, the percentage could be more than that reported, thus, suggesting that something needs to be done for those who have mild to moderate sleep and fall asleep suddenly during the day, to avoid drifting into severe sleep issues like narcolepsy.

This observed result in this study could be attributed to the number of years the respondents have lived in the study area. Likely, those respondents who have stayed from 5 to 20 years and above in the area have become used to the system, hence their sleep is not disturbed (50.00%) and had normal sleep during the day (Table 5). However, the result has also shown that some have lived less than 5 years and could not be used to the activities in the study area. Hence, the recorded mild (42.86%) to moderate (7.14%) sleep during the daytime

in this present study. This implies that there are excessive sleepiness-related issues with the residents during the daytime.

Again, the higher percentage of normal sleep could be attributed to the ability of the residents to sleep well both at night and day as shown in Table 4. The Table showed that 89.2% and 67.86% slept well at night and day in the affected area. On the other hand, the ones that had mild to moderate sleep during the daytime could be attributed to noise from gunshots and transient noise from cult activities (67.86%) and not necessarily insecurity (42.86%). Furthermore, noise from bunkering activities and the smell of crude could also be implicated. The result showed that bunkering activity and the smell of crude while sleeping at night affected them badly reaching 60.71%. Also, cult activities affected their sleep reaching 53.57%. This has affected the quality of their night sleep which is evident in their daytime sleepiness. The overall result has shown that if something is not done immediately, an emergency of excessive sleepiness during the day is imminent (narcolepsy) which may louse up their social life.

Work Dysfunctionality of Respondents in their Family Using APGAR Model

Another model used was the family APGAR scale to predict the dysfunctionality of individual respondents (Table 6), and showed the distribution in family APGAR scores which can be categorized as "good" (score from 7 to 10), "moderate" dysfunction (score from 4 to 6) and "severe" dysfunction (score from 0 to 3). In the present study, 8 persons representing 28.57% reported good or high family functionality, 16 persons representing 57.14% were moderately dysfunctional and 4 persons representing 14.28% were severely dysfunctional with their families. Thus, suggesting that the majority of the people are dysfunctional and could not relate well with their people unknowingly.

This result is similar to that reported by Takenaka and Ban (2016), who investigated the most important question in the family approach: the potential of the resolve item of the family APGAR in family medicine. Their result showed that 171 (63.3%) patients reported good family function, 77 (28.50%) reported moderate dysfunction and 22 (8.1%) reported severe dysfunction. The overall result depicts that the majority of the residents sampled were dysfunctional with their families unknowingly. This calls for medical attention in this area.

The dysfunctionality could be attributed to noise from bunkering and repeated cult activities at night which prevented them from sleeping (Table 6). Again, the youthfulness of the respondent in terms of age could be implicated. The result has clearly shown that the respondents were between the ages of less than 20 to 20 years and above. These are very active groups who engaged in illegal bunkering and cult-related activities, especially by those who have lived there long ago. Hence, dysfunctionality could be age-related.

Conclusion

The result has clearly shown that the majority of the respondents have excessive daytime sleepiness as shown by the Eporwth scale, which they do not have knowledge about or are mismanaged. The obtained result indicates that if nothing is being done immediately, there is going to be an increase in narcolepsy. Again, the respondents also exhibited dysfunctionality as shown by the family APGAR scale which if not properly handled, can result in serious family issues in the restive environment. Furthermore, the models were able to predict the presence of excessive daytime sleepiness and residents'dysfunctionality with their families, and can therefore, be used or included in prediction models in the country.

Finally, the observed health issues should not be taken with levity, hence, the government and NGOs should educate the people about the imminent danger to be faced by the people if not treated. This will make the respondents or residents participate in the health

programs that will be doled out by the government. Furthermore, activities that encourage the rise of excessive daytimesleepiness should be campaigned against and discouraged in the area. In addition, the necessary medication should be given to the residents as free medical (safe-net) to encourage them to be serious with their treatment.

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