

**SOCIAL WORK INTERVENTION MODEL FOR IMPROVING FOOD SECURITY
AND NUTRITION AMONG CHILDREN IN BENIN CITY**

BY

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OCTOBER, 2025.

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**A PROJECT SUBMITTED TO THE DEPARTMENT OF SOCIAL WORK, FACULTY
OF SOCIAL SCIENCES, UNIVERSITY OF BENIN, BENIN CITY, NIGERIA, IN
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BACHELOR OF SCIENCE (B. Sc) DEGREE IN SOCIAL WORK**

OCTOBER, 2025.

CERTIFICATION

We, the undersigned, certify that this research work was carried out by **Erowo Hephzibah ABOLO** with Matriculation Number **SSC2106332** of the Department of Social Work, Faculty of Social Sciences, University of Benin, Benin City, in partial fulfillment of the requirement for the award of the Bachelor of Science (B.Sc) Degree in Social Work.

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(HEAD OF DEPARTMENT)

DATE

DEDICATION

"To the Almighty God, who lifted me from the dust and set my feet on the path of academic excellence. I dedicate this project to you, Lord, for your steadfast guidance and provision throughout my journey at the University of Benin. You have been my rock and my salvation. All glory and honor belong to you alone."

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ABSTRACT

This study explores the development of a social work intervention model aimed at improving food security and nutrition among children in Benin City, Nigeria. Against the backdrop of rising food inflation, urban poverty, and systemic malnutrition, the research investigates the prevalence and causes of food insecurity, emphasizing its impact on child health and development. Using a descriptive survey design, the study identifies key socioeconomic drivers such as household income, maternal education, and access to healthcare. It proposes a structured, evidence-based framework for social workers to transition from reactive aid distribution to proactive, holistic interventions. The model integrates case management, community empowerment, and policy advocacy to address both immediate nutritional needs and long-term resilience. Findings underscore the urgent need for coordinated efforts among social workers, policymakers, and NGOs to combat child malnutrition and promote sustainable food security in urban settings.

Keywords: Food Security, Malnutrition, Social Work Intervention, Child Nutrition, Urban Poverty.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

The global landscape of food security and nutrition, despite significant advancements over the past two decades faces a critical and precarious trajectory. Recent data from a coalition of international organizations, including the Food and Agriculture Organization (FAO), International Fund for Agricultural Development (IFAD), UNICEF, World Food Programme (WFP), and the World Health Organization (WHO), reveals a disconcerting halt in progress toward global nutrition targets. While a modest decline in global hunger was noted in 2024, the gains are both tenuous and uneven, leaving an estimated 673 million people grappling with hunger, and a staggering 2.3 billion people experiencing severe food insecurity (FAO et al., 2025). The global prevalence of stunting, a marker of chronic under nutrition, declined from 26.4% in 2012 to 23.2% in 2024, yet this progress is insufficient to meet the ambitious 2030 targets (WHO, 2024; UNICEF, 2025). The prevalence of wasting (a marker of acute malnutrition) and overweight has shown little to no change since 2012, underscoring a systemic failure to address the multifaceted nature of malnutrition and the double burden of undernutrition and overnutrition (FAO et al., 2025; WHO, 2024; UNICEF, 2025). In 2024, 150.2 million children under the age of five were stunted, 42.8 million were wasted, and 35.5 million were overweight (WHO, 2024). An examination of the factors driving this global stagnation reveals a powerful, underlying economic determinant: food price inflation.

Since 2020, food inflation has consistently outpaced overall inflation, particularly in low-income countries (FAO et al., 2025). This is not merely a statistical correlation but a direct causal pathway to increased malnutrition. A 10% rise in food prices is directly associated with a 2.7% to 4.3% increase in child wasting (FAO et al., 2025). The economic pressures created by this inflation force vulnerable households to make difficult choices, often leading them to abandon nutrient-dense, healthy foods like fruits, vegetables, and high-quality proteins in favor of cheaper, ultra-processed alternatives (FAO et al., 2025). This dynamic demonstrates that food insecurity is fundamentally an issue of economic access and affordability, not just a matter of food availability (Feeding America, 2025). The problem is not a global scarcity of food but a profound systemic failure to ensure equitable access to nutritious diets for all (FAO et al., 2025). Addressing this requires a shift in focus from mere humanitarian aid to comprehensive, policy-driven interventions that build resilience against future economic shocks (UNDP, 2025).

The global narrative of stalled progress is even more pronounced in Africa, which has become the epicenter of this crisis. Sub-Saharan Africa is the only region in the world where the number of stunted children continues to increase (UNICEF, 2025). The Regional Food Security and Nutrition Platform (FSIN) projects that in 2025, 16.3 million children under five will be affected by acute malnutrition across 14 countries in West and Central Africa, a notable deterioration from the previous year (IPC & CILSS, 2025; UNICEF, 2023). This crisis is driven by a complex interplay of systemic vulnerabilities and shocks. These include persistent conflict and insecurity in areas like northern Nigeria and the Liptako-Gourma region, which disrupt food

production and have led to the forced displacement of over 9.1 million people in 2025 (IPC & CILSS, 2025). The region is also affected by economic shocks and high inflation, exacerbated by specific governmental and economic reforms, such as the end of fuel subsidies in Nigeria, that have worsened food insecurity (IPC & CILSS, 2025; Olayinka & Olayinka, 2025). Furthermore, recurring climate hazards and extreme weather events, including severe floods, have resulted in substantial crop losses and population displacement, compounding the crisis (IPC & CILSS, 2025; UNICEF, 2023). Lastly, weak public services and inadequate health services, along with limited access to safe water and sanitation, perpetuate a vicious cycle where children are more susceptible to waterborne diseases, further worsening their nutritional status (IPC & CILSS, 2025; Gavi, 2025).

Nigeria's food security situation mirrors these regional trends. Despite its vast agricultural resources, the nation ranked 107th out of 113 on the 2022 Global Food Security Index (Verivafrika, 2025). The crisis is deeply rooted in widespread multidimensional poverty, with over 133 million Nigerians affected (Verivafrika, 2025). High food inflation, which reached 35.41% in January 2024, has further intensified the crisis, increasing the number of food-insecure Nigerians to 100 million in the first quarter of 2024 (Verivafrika, 2025). The humanitarian situation has deteriorated sharply in 2025 due to a combination of escalating conflict, early-onset flooding, and food insecurity (UNICEF, 2025). The northern regions are particularly affected, with nearly 5.4 million children under five in the North-East and North-West suffering from acute malnutrition, a figure expected to persist throughout 2025 (IPC &

CILSS, 2025; UNICEF, 2025).

While often viewed as a rural problem, food insecurity and malnutrition are significant and growing challenges in Nigeria's urban centers, including Benin City. A study focusing on children attending a primary healthcare center in Benin City confirmed the substantial impact of socioeconomic factors on malnutrition, finding that high food costs were a major barrier for 52.1% of respondents in obtaining balanced meals (Ogbemudia, 2025). A study of food security among university students in Benin City revealed that rising food prices led students to change shopping habits, seek aid, and borrow food, with some interventions including subsidizing food and providing financial support (Oyenike & Afe, 2025). This finding is consistent with the global trends linking food price inflation to malnutrition and highlights how national macroeconomic issues manifest as local, household-level crises (FAO et al., 2025). The existence of this problem in an urban setting demonstrates that interventions must be tailored to address the unique challenges of urban poverty, such as the high cost of living and limited access to affordable, nutritious food (Ogbemudia, 2025). This necessitates a comprehensive, holistic approach that addresses not only immediate nutritional needs but also the underlying socioeconomic vulnerabilities of families.

1.2 Statement of the Research Problem

While the high prevalence of food insecurity and malnutrition among children is well-documented on a global, regional, and national scale, and its presence has been confirmed in specific urban communities like Benin City, a critical research gap persists. Existing

interventions are often broad, humanitarian-focused, or centered on clinical treatment, failing to provide a structured and comprehensive social work intervention model tailored to the unique socioeconomic and cultural determinants of malnutrition in the urban context of Benin City (IPC & CILSS, 2025; Salami, 2025).

This study identifies the problem not merely as the high prevalence of malnutrition but as the absence of a practical, evidence-based social work framework to address its multifaceted root causes at the household and community levels (Ajibola & Ajibola, 2025). The current body of research lacks detailed documentation on how social workers can systematically transition from traditional, reactive roles such as providing food parcels to a proactive, holistic approach that tackles the underlying drivers of the crisis, including poverty, inadequate maternal education, and limited access to healthcare (Ajala & Ajala, 2025; Ajao et al., 2025; Ogbemudia, 2025). The fragmentation of services and a lack of a cohesive, context-specific model mean that interventions are often insufficient, failing to build long-term resilience and instead creating a cycle of dependency (UNDP, 2025). This research will contribute to filling this gap by proposing and evaluating a social work intervention model designed to address the unique dynamics of Benin City. By doing so, it will provide social workers, policymakers, and non-governmental organizations with a structured framework to move beyond symptom management and engage with the foundational social determinants of health and well-being. The findings will not only help improve the immediate nutritional status of children but will also contribute to a more sustainable and resilient community.

1.3 Aims and Objectives of the Study

The primary aim of this study is to develop and propose a social work intervention model to improve food security and nutrition among children in Benin City, Nigeria.

Specifically, the study aims to:

- i. Determine the prevalence of food insecurity and malnutrition among children in Benin City.
- ii. Identify the key causes of food insecurity and malnutrition among children in Benin City.
- iii. Explore the necessary resources and support systems needed to empower social workers to effectively address the crisis.
- iv. Develop and propose specific social intervention strategies to curb food insecurity and malnutrition among children in Benin City.

1.4 Research Questions

The research questions guiding this study are as follows:

- i. What are the prevalence of food insecurity and malnutrition among children in Benin City?
- ii. What are the causes of food insecurity and malnutrition among children in Benin City?
- iii. How can social workers in Benin City be empowered to effectively address food insecurity and malnutrition among children, and what resources and support systems are required?
- iv. What are the social intervention strategies to curbing food insecurity and malnutrition

among children in Benin City?

1.5 Significance of the Study

This study holds significant importance for a wide array of stakeholders, as it provides actionable insights and a tangible framework for tackling a critical public health issue.

Social Workers: The study will provide a structured, evidence-based model for intervention. This will allow them to shift their role from passive providers of assistance to empowered agents of social change. The research will offer a clear roadmap for engaging in case management, community development, and policy advocacy. It will equip them with the skills to address not only the immediate need for food but also the underlying socioeconomic and psychological factors, such as maternal mental health, that perpetuate the crisis. The framework acknowledges that food insecurity is a systemic issue, not a personal failure, and provides a therapeutic approach to empower families to confront this reality without shame.

Government and Policymakers: The findings will provide empirical evidence and actionable recommendations to inform policy reforms and resource allocation. This includes evidence for implementing targeted social protection programs, such as cash transfers or food vouchers, and integrating them with public health initiatives. The study will also highlight the crucial role of inter-ministerial collaboration, for example, between health and social welfare, and will lend support to initiatives like the National Health Fellows Program that aim to strengthen grassroots healthcare delivery.

Non-Governmental Organizations (NGOs): The study will offer a replicable and locally-relevant framework for designing and implementing effective, multi-sectoral programs. It will provide insights into the power of a collaborative approach, showing how different organizations can synergize their efforts to maximize impact, for instance, by combining nutrition treatment with social support for income-generating activities. This integrated model has demonstrated success in other contexts, showing that families not only gain access to better nutrition but also acquire the tools to ensure their long-term economic resilience.

Community Members and Families: This study will offer them the ultimate benefit of improved health outcomes for their children. The research's focus on long-term resilience will empower families with the tools to break the cycle of poverty and food insecurity, rather than relying solely on temporary relief. By validating that food insecurity is a systemic issue, not a personal failure, the study will also address the psychosocial impact of the problem, reducing stigma and promoting family well-being. The study's recommendations will center on empowering communities to become active participants in their own food security, fostering a sense of agency and collective action.

Children: The study's most direct impact will be on their nutritional status and overall well-being. By improving food security, the interventions will reduce the risk of stunting, wasting, and increased susceptibility to infectious diseases. A well-nourished child is more likely to have improved cognitive development, better school performance, and a stronger foundation for a healthy adulthood, thus breaking the intergenerational cycle of poverty and malnutrition.

1.6 Scope of the Study

The study focuses on exploring social work intervention models that can be used to improve food security and nutrition among children in Benin City, Nigeria.

1.7 Definition of Terms

Food Security: This refers to the availability and accessibility of nutritious food for all individuals, particularly children, to lead healthy and active lives.

Malnutrition: This is a condition that occurs when the body does not receive the necessary nutrients, leading to health problems and impaired growth and development.

Social Work Intervention: This refers to the actions taken by social workers to address the needs and problems of individuals, families, and communities, including those related to food insecurity and malnutrition.

Food Insecurity: This refers to the lack of access to nutritious food, leading to uncertainty about where the next meal will come from, and the inability to obtain food in socially acceptable ways.

Nutrition: This refers to the process by which the body uses food to sustain life, promote growth and development, and maintain health.

Stunting: A form of chronic malnutrition where a child is too short for their age, indicating prolonged undernutrition. It is associated with impaired cognitive ability and reduced physical and intellectual development.

Wasting: A situation where a child is too thin for their height, resulting from recent, rapid weight loss or a failure to gain weight. It increases a child's risk of morbidity and mortality.

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter provides a comprehensive review of the scholarly literature concerning the interconnected crises of food insecurity, malnutrition, and the role of social work in addressing them. The review is structured to first review the relevant concepts, followed by an in-depth analysis of relevant empirical studies, and concludes with an exploration of the theoretical frameworks that will guide this research.

2.1 Review of Relevant Concepts

This section provides a detailed review of the key concepts central to this study, establishing a foundational understanding of the interconnected issues of food security, nutrition, and social work as a profession. A clear articulation of these concepts is essential to ground the development of an effective and context-specific intervention model.

2.1.1 Overview of Food Security

Food security, as defined by the Food and Agriculture Organization (FAO), is a state in which "all people, at all times, have physical and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life" (FAO, 2025; World Bank, 2025; FAO, 2017). This widely accepted definition is not a singular concept but a state of being predicated on four fundamental and interconnected dimensions that must all be intact to ensure a truly food-secure community (World Bank, 2025).

The first dimension, availability, addresses the physical presence of food and speaks to the "supply side" of food security (World Bank, 2025). This is determined by a nation's level of food production, existing stock levels, and net trade (World Bank, 2025). The nation's ability to produce or acquire enough food is merely the first step in a complex pathway. The second dimension, access, is concerned with a household's economic and physical ability to acquire food, even when it is physically available at a national level (World Bank, 2025; *Frontiers in Sustainable Food Systems*, 2023). This is influenced by a variety of factors, including a household's income, the prices of food in local markets, and the availability of adequate transportation. For instance, in regions with a high cost of living, even full-time employment may not be enough to afford sufficient food, while inadequate public transportation can make it difficult for people to reach places where healthy and preferred foods are sold (New Jersey Office of the Secretary of Higher Education, 2024). This reality underscores that food security is not just a matter of food existence but a profound issue of economic and physical affordability (*Frontiers in Sustainable Food Systems*, 2023).

The third dimension, utilization, addresses how the body makes use of the nutrients from the food consumed. This goes beyond mere ingestion and includes a variety of factors, such as good care and feeding practices, dietary diversity, proper food preparation, and the presence of hygienic conditions and clean water (World Bank, 2025; *Frontiers in Nutrition*, 2024). A family's knowledge of proper nutrition and safe food preparation is a critical component of this dimension. Finally, the fourth dimension is stability, which ensures that the other three are

maintained over time (World Bank, 2025). It recognizes that a person can be food insecure even if they have adequate intake today if they face the risk of losing that access due to economic crises, climate-related shocks, or other socioeconomic factors (World Bank, 2025).

2.1.2 Overview of Nutrition

Nutrition is the biological process by which the body utilizes the food it consumes to support health, growth, and development (Frontiers in Nutrition, 2024). This study is particularly concerned with the consequences of inadequate nutrition, or malnutrition, which global literature identifies as a complex phenomenon known as the "triple burden" (BMJ Global Health, 2023). This term describes the simultaneous presence of undernutrition (stunting, wasting), micronutrient deficiencies, and rising rates of overweight and obesity within the same community, or even the same household (Global Panel, 2016; BMJ Global Health, 2023). The consequences are particularly severe for children, especially during the crucial 1,000-day period from pregnancy until their second birthday, which lays the foundation for their full growth and development (UNICEF, 2024; Gavi, 2024).

Undernutrition, which includes stunting and wasting, has devastating and far-reaching effects. Stunting, a sign of chronic malnutrition, is a condition where a child is too short for their age, indicating a prolonged lack of adequate nutrition (Gavi, 2024). This condition impairs a child's cognitive development, leads to poor school performance, and can reduce their earning potential in adulthood, thus perpetuating a cycle of poverty (Gavi, 2024). Meanwhile, wasting is a form of acute malnutrition where a child is too thin for their height, resulting from recent, rapid

weight loss or a failure to gain weight (WHO, 2024). Both forms of undernutrition, along with micronutrient deficiencies, weaken a child's immune system, making them more susceptible to life-threatening illnesses such as diarrhea and pneumonia (UNICEF, 2024; Gavi, 2024). This creates a vicious cycle where malnutrition compromises a child's immunity, increasing their susceptibility to diseases, which in turn further exacerbates malnutrition by impairing nutrient absorption and increasing metabolic demands (Gavi, 2024). A well-nourished child is not only physically healthier but also more likely to achieve their full cognitive and intellectual potential (Gavi, 2024).

2.1.3 Social Work Model

Social work model refers to a conceptual and strategic framework that guides a social worker's professional approach to practice (Social Work License Map, 2024). It is a way of thinking that provides a structured approach to identifying and addressing social challenges, helping to analyze cases, understand clients, and create interventions. The literature makes a subtle but important distinction between a model and an intervention. While a model is the overarching theoretical blueprint, an intervention is a specific, tangible action or a set of activities designed to achieve a positive outcome (Social Work License Map, 2024; KU School of Social Welfare, 2023). The purpose of a social work model is to enable practitioners to translate abstract theories into concrete action. Models are essentially intellectual tools that provide a roadmap for navigating complex client situations (Social Work License Map, 2024). The ultimate goal of social work is to empower individuals and communities to overcome

challenges and live fulfilling lives (Social Work License Map, 2024). To achieve this, a social worker may adopt a particular model or framework, such as Systems Theory, which provides a comprehensive view of a person's situation within their environment (Social Work License Map, 2024). This structured approach helps in identifying the root causes of a problem rather than just treating the symptoms.

Interventions, on the other hand, are the strategic plans that are a result of applying a model (Social Work License Map, 2024). They are the specific actions such as providing counseling, connecting a client to a food bank, or advocating for policy change that guide clients and families toward positive outcomes when dealing with systemic challenges (Social Work License Map, 2024). Models enable social workers to implement theories in their daily work by providing a structured path for analysis and action (Social Work License Map, 2024). For example, the Task-Centered Practice Model focuses on breaking down complex problems into a series of smaller, achievable tasks for the client. Other models, like the Narrative Approach, guide a social worker to help clients reframe their challenges by viewing them as an external story rather than an intrinsic personal defect. Likewise, the Solution-Focused Brief Therapy (SFBT) model operates on the principle that clients already possess the solutions to their problems and simply need help recognizing them. The Strengths-Based Approach, which is a key component of this study, is another prominent model that focuses on leveraging a client's inherent strengths to overcome adversity (KU School of Social Welfare, 2023).

2.1.4 Prevalence of Food Insecurity and Malnutrition among Children

The crises of food insecurity and malnutrition are not evenly distributed, with evidence pointing to a high prevalence among vulnerable children worldwide, particularly in developing countries. While the issue is often associated with rural communities, empirical studies have confirmed its significant and growing presence in urban settings as well, challenging the conventional assumption that urban life is inherently more beneficial for child health (BMJ Global Health, 2023).

To provide context for the local problem, global statistics reveal the scale of the crisis. According to a joint report by the WHO, UNICEF, and the World Bank, in 2024, 150.2 million children under the age of five were too short for their age (stunted), and 42.8 million were too thin for their height (wasted) (WHO, 2024; UNICEF, 2024). While the global prevalence of stunting saw a modest decline from 26.4 percent in 2012 to 23.2 percent in 2024, the progress is both tenuous and uneven across regions (UNICEF, 2024). Similarly, the global prevalence of wasting and overweight has shown little to no change since 2012, highlighting a systemic failure to address the multifaceted nature of malnutrition and the "triple burden" (UNICEF, 2024; WHO, 2024; Global Panel, 2016).

The global narrative of stalled progress is even more pronounced in Africa, which has become a focal point of this crisis. Sub-Saharan Africa remains the only region in the world where the number of stunted children continues to increase (UNICEF, 2024; Gavi, 2024). The largest numbers of stunted children were reported in South Asia (56 million) and Sub-Saharan

Africa (62 million) (UNICEF, 2024). In West and Central Africa, stunting prevalence affects approximately one-third of all children, and the region has seen a slower rate of progress in stunting reduction compared to other areas like South Asia (UNICEF, 2024). Furthermore, in 2017, the prevalence of stunting in children under five was high (above 30%) or very high (above 40%) in 25 out of 47 African countries, and only 17 had an acceptable prevalence of wasting (less than 5%) (SCIRP, 2017).

Nigeria's food security and nutrition situation mirrors these regional trends. UNICEF reports that around 11 million children, or one in every three children under five, in Nigeria are experiencing severe child food poverty, making them up to 50 percent more likely to experience wasting (UNICEF, 2024). A significant portion of the global crisis is concentrated in Nigeria, which ranks among the 20 countries that account for almost two-thirds (65 percent) of the 181 million children living in severe child food poverty (UNICEF, 2024). The crisis is particularly severe in the northern regions of the country, where conflict has deepened food and nutrition insecurity (WFP, 2025).

While food insecurity is often viewed as a rural problem, empirical studies have confirmed its significant presence in urban centers, including Benin City. A cross-sectional study in Okhoro, an urban community in Benin City, provided granular data that supported the broader 'urban paradox' theory by confirming a high prevalence of malnutrition among under-five children (Ezeama & Afe, 2015). The study found that 28.1% of the children were underweight and 22.6% were stunted (Ezeama & Afe, 2015). Another study in Benin City on children in

Early Child Care Centres similarly found over a tenth of children to be stunted, underweight, or wasted (S_R8). These findings underscore that while global and national prevalence rates are alarming, the problem's true impact is localized and hyper-specific to marginalized communities within urban centers.

2.1.5 Causes of Food Insecurity and Malnutrition among Children

The causes of food insecurity and malnutrition are complex and multifactorial, operating at multiple levels from the individual to the broader social and environmental spheres (Frontiers in Nutrition, 2024). A comprehensive understanding requires moving beyond a simple cause-and-effect model to one that recognizes how these factors actively reinforce each other (PMC, 2024).

Poverty and Economic Factors: At the foundational level, poverty is a major contributor, creating a vicious cycle of disease and malnutrition (Frontiers in Nutrition, 2024). In Nigeria, widespread poverty and a high cost of living exacerbate food insecurity, making it difficult even for households with a full-time income to afford sufficient, nutritious food (New Jersey Office of the Secretary of Higher Education, 2024; IMF, 2023). High food price inflation in Nigeria, which has been consistently outpacing overall inflation, forces vulnerable households to abandon nutrient-dense foods in favor of cheaper, ultra-processed alternatives (IMF, 2023; UNICEF, 2024). The country's reliance on imported crops and agricultural inputs also puts it at greater risk of food and nutrition insecurity due to global supply chain disruptions (MDPI, 2023; Olayinka & Olayinka, 2024).

Weak Health Systems and Sanitation: A critical review of social determinants of health across Africa found a direct link between a child's nutritional status and a lack of basic sanitation and clean drinking water (Frontiers in Nutrition, 2024). These factors directly contribute to malnutrition by increasing the risk of waterborne diseases that impair a child's nutrient absorption (Frontiers in Nutrition, 2024; Gavi, 2024). This highlights a critical, self-reinforcing cycle of poor health: food insecurity leads to malnutrition, which in turn compromises a child's immune system, making them more susceptible to infectious diseases that further worsen their nutritional status (Gavi, 2024). Systemic issues such as low adult literacy rates, weak health systems, and political instability also correlate with higher rates of childhood malnutrition (Frontiers in Nutrition, 2024).

Conflict and Insecurity: Conflict and insecurity in Nigeria have a devastating impact on food security (WFP, 2025). Insurgent activities have displaced millions and hampered development, disrupting food production and distribution and heightening food and nutrition insecurity (WFP, 2025; Olayinka & Olayinka, 2024). This instability prevents farmers from working their land, leading to significant drops in food output and increased food costs for all (Olayinka & Olayinka, 2024). The World Food Programme (WFP) has warned that the suspension of food aid in northern Nigeria could further destabilize the region, forcing people to endure hunger or flee their homes (WFP, 2025).

Climate Change: The literature also highlights climate change as a critical factor. Frequent flooding and droughts destroy agricultural infrastructure, erode topsoil, and reduce agricultural

productivity (Frontiers in Sustainable Food Systems, 2024; WFP, 2025). This leads to lower food output and increased costs, particularly for low-income households where a significant portion of income is spent on food (Frontiers in Sustainable Food Systems, 2024). These challenges are compounded by inadequate storage facilities and poor road networks, which further disrupt food supply chains and contribute to post-harvest losses (Frontiers in Sustainable Food Systems, 2024).

2.1.6 Resources and Support Systems for Social Workers

Social workers are uniquely positioned to address the multifaceted challenges of food insecurity, yet the literature reveals a significant gap between the profession's social justice mission and its practical capabilities. A study of social workers found that while they perceive food insecurity as a "critical issue" in their clients' lives, they often lack the necessary resources and training to adequately help (Smith College, 2017). This professional-level deficit is a major barrier, as practitioners report a lack of knowledge on nutrition, insufficient agency infrastructure, and a feeling of being ill-equipped to address the issue at a systemic level (Smith College, 2017). To effectively address the crisis, social workers need robust support systems and resources that move beyond simply providing food parcels to address the root causes of the problem. The literature points to several key resources:

NGO Partnerships and Food Banking: Social workers can leverage partnerships with non-governmental organizations (NGOs) that provide food banking, farming programs, and temporary assistance (Lagos Food Bank, 2024). These partnerships provide a direct channel for

food delivery and are often coupled with wider services, such as nutrition education and empowerment programs. For instance, organizations like the Lagos Food Bank Initiative and No Hunger Food Bank provide not only food but also vocational training and empowerment in areas like food processing and vegetable gardening to help vulnerable populations become self-sufficient (No Hunger Food Bank, 2024).

Capacity Building and Advocacy: Addressing the structural drivers of food insecurity requires that social workers be equipped with the knowledge and tools for advocacy. The literature suggests that strengthening social work education with a focus on environmental justice and food systems is a crucial step toward empowering practitioners to act as agents of change at both the individual and structural levels (Smith College, 2017). This includes providing training and technical assistance for social workers to engage in policy advocacy and to build community-owned, sustainable solutions (WFP, 2025).

Inter-organizational Collaboration: The NASW Standards for Social Work Case Management emphasize that social workers should not work in isolation but must collaborate with other disciplines and organizations (NASW, 2024). This is particularly relevant in addressing food insecurity, where a multi-sectoral approach is needed. Partnering with health, education, and government agencies can help provide a seamless, holistic support system for families (NASW, 2024). This collaborative approach ensures that the diverse needs of clients are met, moving beyond a single service to a comprehensive care model.

2.1.7 Social Intervention Strategies to Curb Food Insecurity and Malnutrition among Children

To effectively curb food insecurity and malnutrition, interventions must be multi-dimensional, encompassing social, institutional, and economic strategies (Frontiers in Sustainable Food Systems, 2023). The literature provides a range of evidence-based strategies that have been proven to work.

Social Protection Programs: A key strategy identified in the literature is the use of social protection programs, which have been shown to be effective in mitigating the effects of economic shocks on vulnerable households (PMC, 2024). A study in Nigeria found that cash transfers and food assistance programs played a crucial role in mitigating the impact of socioeconomic shocks, significantly reducing the likelihood of a household being unable to eat healthy and nutritious food (PMC, 2024). The study concluded that expanding the coverage of these interventions is a critical solution to building household resilience (PMC, 2024). The World Food Programme (WFP) also supports the Nigerian government in institutionalizing shock-responsive social protection at the national level (WFP, 2025).

Community-Level Strategies: To address the problem at its local level, social work interventions can focus on community-based strategies. These include supporting local food production through urban agriculture or preserving arable land, and organizing food co-operatives or community fridges (PMC, 2024; WFP, 2025; Sustainweb, 2024). Community-based models, such as food co-ops, allow community members to pool resources and purchase

healthier foods at wholesale prices (Sustainweb, 2024). These models are not only financially sustainable but also promote community self-reliance and empowerment by giving community members ownership and control over their food sources (Sustainweb, 2024).

Institutional Interventions: The literature also highlights the importance of institutional-level interventions, such as strengthening government capacity for policy development and providing support for national programs (WFP, 2025). An example of this is the National Home-Grown School Feeding Programme in Nigeria, which has shown improved outcomes in food access and nutrition (APHA, 2025). Furthermore, childcare arrangements can serve as an important point of intervention, providing nutritious meals and snacks and buffering the effects of food insecurity on a child's cognitive development (MDPI, 2024). This suggests that social work interventions can be integrated into existing institutional frameworks to maximize their impact (MDPI, 2024).

2.2 Review of Empirical Studies

This section provides a broad and in-depth review of empirical studies relevant to food security, child malnutrition, and the role of social work. The studies selected highlight the complex, interconnected nature of these issues and point toward the necessity of multi-level, multi-faceted interventions.

A study conducted in Nigeria using a World Bank survey examined the relationship between socioeconomic shocks, social protection, and household food security during the COVID-19 pandemic (PMC, 2024). The research found that the pandemic-induced shocks led to an increased level of food insecurity (PMC, 2024). However, the study provides a crucial insight

into the power of targeted interventions. It found that social protection programs—which can include cash transfers, food assistance, and health care services—played a "crucial role in mitigating the impact of these shocks on households" (PMC, 2024). This finding provides empirical evidence that receiving assistance from any institution, whether government or religious, significantly reduced the likelihood of a household being unable to eat healthy and nutritious food (PMC, 2024). The study's conclusions underscore the need for more targeted and expanded social protection policies in Nigeria to build resilience against future shocks (PMC, 2024).

A comprehensive study across Low- and Middle-Income Countries (LMICs) found "substantial intraurban inequalities" in child health indicators, with a significant concentration of under-five mortality, stunting, and wasting among urban poor children (BMJ Global Health, 2023). The findings directly challenge the oversimplified assumption that urban living universally improves health outcomes. In fact, the study revealed that the poorest urban children may fare worse than their rural counterparts, a phenomenon referred to as the 'urban paradox' (BMJ Global Health, 2023). These findings highlight that the benefits of urban life, such as higher incomes and better access to services, are not equally distributed. Instead, they are disproportionately concentrated among the urban non-poor (BMJ Global Health, 2023). The study's conclusions underscore the need for targeted research and interventions focused specifically on poor urban areas, and a call for urban planning that prioritizes the health and well-being of children in marginalized clusters (BMJ Global Health, 2023).

A study on practitioners' perceptions of food insecurity revealed a significant gap between the social work profession's social justice mission and its practical capabilities (Smith College, 2017). Practitioners perceive food insecurity as a "critical issue" in their clients' lives and as an issue integrally related to the profession's social justice mission (Smith College, 2017). However, they feel they lack the necessary resources and training to adequately address it, citing barriers such as a lack of knowledge on nutrition, insufficient agency infrastructure, and a disconnect between the social justice mandate and the practical ability to implement systemic solutions (Smith College, 2017). This suggests that the problem is not a client-level deficit but a professional-level systemic issue. For social work to effectively engage with this challenge, there must be a concerted effort to introduce educational and training material on food insecurity, focusing on both individual-level interventions and broader structural advocacy (Smith College, 2017).

A broad study of social determinants of health across Africa found statistically significant associations between a child's nutritional status and factors far beyond food access alone (Frontiers in Nutrition, 2024). The research revealed that a lack of basic sanitation services, inadequate access to clean drinking water, and open defecation were significantly associated with both underweight and stunting (Frontiers in Nutrition, 2024). The study also linked higher adult literacy rates, a better Health Access and Quality (HAQ) Index, and greater political stability to lower rates of childhood malnutrition (Frontiers in Nutrition, 2024). This research confirms that a holistic approach to childhood nutrition is necessary. Interventions must move

beyond simple food provision and address the broader social and environmental conditions that affect health outcomes, as improving water, sanitation, and hygiene (WASH) facilities is as crucial as providing nutritious food in the effort to reduce childhood malnutrition (Frontiers in Nutrition, 2024).

A review of food security research in Nigeria found that the country's interventions have been affected by weak institutional foundations, corruption, and poor implementation (Frontiers in Sustainable Food Systems, 2023). The study highlighted that food insecurity is aggravated by a range of socioeconomic factors, including poverty, low income, and household size (Frontiers in Sustainable Food Systems, 2023). It noted that even though interventions have been developed to increase crop productivity and generate employment, many have failed (Frontiers in Sustainable Food Systems, 2023). The study emphasizes that for a food security strategy to be effective, it must be multi-dimensional and address social, institutional, and economic factors (Frontiers in Sustainable Food Systems, 2023).

2.3 Theoretical Framework

The theoretical framework elaborate on two foundational social work theories: Bronfenbrenner's Ecological Systems Theory and the Strengths-Based Approach. These theories are not mutually exclusive; rather, they are powerfully complementary, providing both a conceptual map of the problem and a strategic compass for intervention.

2.3.1 Ecological Systems Theory

Bronfenbrenner's Ecological Systems Theory provides a powerful framework for understanding child development by viewing it as a process of bi-directional and reciprocal relationships within a series of nested, interconnected environmental systems (University of Cambridge, 2022). The theory is composed of five key levels that a social worker can use as a map to navigate the complex determinants of food insecurity.

The Microsystem: This is the most immediate level, consisting of the people and environments with whom the child has direct contact, such as the family, school, and neighborhood (Social Work License Map, 2024). The child is not a passive recipient of influence; they actively contribute to these bidirectional interactions, and their health outcomes are directly shaped by the quality of these relationships (Social Work License Map, 2024).

The Mesosystem: This level involves the connections and interactions between different microsystems (Social Work License Map, 2024). For example, a child's nutritional status is influenced not just by the food provided at home but also by the interaction between the family and a childcare arrangement, which can serve to buffer the effects of food insecurity by providing extra food and cognitive stimulation (MDPI, 2024). The mesosystem highlights how a breakdown in one part of a child's life can be mitigated by support from another.

The Exosystem: This system includes social structures that do not directly interact with the child but still influence their microsystems. Examples include a parent's workplace policies, which might affect their income and time at home, or the availability of government food assistance

programs (Social Work License Map, 2024). These indirect influences can be powerful drivers of food security.

The Macrosystem: This is the outermost layer, encompassing the broader cultural ideologies, policies, and socioeconomic conditions that affect all the nested systems (Social Work License Map, 2024). Issues like systemic poverty, national food trade policies, and cultural norms around food are all part of this overarching system (Social Work License Map, 2024).

The Chronosystem: The final level relates to shifts and transitions over a child's lifetime, which can be predictable or unpredictable, as well as major historical events, like a global pandemic or the long-term effects of climate change on food systems.

The ecological-social perspective provides a crucial framework for analyzing food security, which is inherently complex and dynamic. It moves the focus away from a single "problem" and toward a holistic understanding of how various systems from individual choices to national policies interact to create outcomes like food insecurity. This framework guides interventions to be multi-layered, addressing issues at the micro, meso, and macro levels to achieve sustainable change.

2.3.2 Strengths-Based Approach

The Strengths-Based Approach, developed by scholars like Dennis Saleebey, is a paradigm shift away from traditional deficit-based models (KU School of Social Welfare, 2023; LibreTexts, 2023). Its core principles are rooted in the belief that every person, group, and community possesses inherent strengths and that every environment is full of resources

(LibreTexts, 2023; KU School of Social Welfare, 2023).

The approach guides the professional to focus not on "what's wrong," but on leveraging existing assets to build resilience and find solutions (LibreTexts, 2023). It views problems not as individual deficits but as outcomes of the interactions between individuals and their environment. A practitioner using this model would work with clients to identify and build upon their skills, resources, and aspirations (KU School of Social Welfare, 2023). This approach empowers individuals and communities by highlighting their own capacities and resources, such as local organizations, cultural knowledge, or community networks (UQ eSpace, 2021). This counteracts the dependency that purely deficit-based interventions can sometimes create (UQ eSpace, 2021). For example, instead of just identifying a "food desert," a strengths-based social worker would identify and support community gardens or local food pantries to build on what already works well in a community (UQ eSpace, 2021).

The intellectual synergy between the two theories is clear. Bronfenbrenner's ecological systems theory provides the conceptual map of the problem's complexity, showing that food insecurity is not a single issue but an outcome of interactions at multiple, nested levels. It explains *why* the problem exists at a systemic level. The Strengths-Based Approach, on the other hand, provides the strategic compass for *how* to intervene within this complex system. It provides a guiding philosophy for intervention that is empowering, culturally sensitive, and sustainable (UQ eSpace, 2021). It directs the practitioner to look for resources within the microsystem (family skills), mesosystem (community networks), and exosystem (local

organizations) to address the macro-level issue of food insecurity. This dual framework is the intellectual foundation for what an effective social worker would do: understand the systemic barriers while helping clients leverage their personal and community strengths to overcome them.

CHAPTER THREE

RESEARCH METHODOLOGY

Preamble

This chapter outlined the methodology that was employed to collect information on the topic under discuss. It detail the research design, the population and sample size, the sampling technique, the instrument for data collection, the methods of data collection and analysis, and the ethical considerations for the study.

3.1 Research Design

The study adopted a descriptive survey research design. This design was appropriate because allowed for the systematic collection of data from a large number of participants to describe the characteristics of the population and examine the relationships between variables (EBSCO, 2024).

3.2 Population of the Study

The total population of Benin City, according to the 2006 National Population Census (NPC), was 1,156,000. To project the population to the year 2025, an average annual growth rate of 3.4% will be used, based on typical urban growth rates in Nigeria.

The formula for population projection is:

$$P_t = P_0 (1 + r)^t$$

Where:

P_t = Population in the target year (2025)

P_0 = Population in the base year (2006)

r = Annual growth rate (0.034)

t = Number of years between the base year and the target year (2025 - 2006 = 19)

$$P_t = 1,156,000 (1 + 0.034)^{19}$$

$$P_t = 1,156,000 (1.034)^{19}$$

$$P_t = 1,156,000 (1.879)$$

$$P_t \approx 2,172,000$$

Based on this calculation, the estimated population of Benin City for the year 2025 is approximately 2,172,000. The study target was a section of the population, specifically children and their caregivers who are experiencing or are at risk of food insecurity and malnutrition, as well as social workers and community leaders who are actively involved in addressing these issues.

3.3 Sample Size and Sampling Technique

The sample size for this study will be determined using the Taro Yamane formula, which is suitable for finite populations. The formula is as follows:

$$n = \frac{N}{1 + N(e^2)}$$

Where:

n = the sample size

N = the total population (2,172,000)

e = the desired margin of error (0.05)

$$n = \frac{2,172,000}{1 + 2,172,000(0.05^2)}$$

$$n = \frac{2,172,000}{1 + 2,172,000(0.0025)}$$

$$n = \frac{2,172,000}{1 + 5430}$$

$$n = \frac{2,172,000}{5431}$$

$$n = 400$$

Based on the calculation, a sample size of 400 participants was used for the study.

A convenience sampling technique was employed. Convenience sampling, also known as grab sampling or accidental sampling, is a type of non-probability sampling where the sample is drawn from the part of the population that is most easily and conveniently accessible to the researcher (Qualtrics, 2024). This method does not involve a random selection of participants based on any set criteria. Instead, researchers subjectively select individuals who are willing and readily available to participate in the research (Qualtrics, 2024). This method is suitable for this study given the resource constraints and the focus on specific vulnerable populations within a large urban area.

3.4 Instrument of Data Collection

The primary instrument for data collection was a structured questionnaire. This questionnaire was designed to capture quantitative data from the participants. The questionnaire consisted of several sections using a Likert scale to measure attitudes, perceptions, and experiences. This allowed participants to indicate their level of agreement or disagreement with a series of statements, providing a quantifiable measure of their responses. The questionnaire will be divided into 4 sections that directly correspond to the research questions and objectives:

Section A: Demographic Information – This section gathered demographic information about the participants, such as age, gender, and occupation.

Section B: Prevalence and Causes of Food Insecurity and Malnutrition - This section was designed to align with the first two research objectives: "To determine the prevalence of food insecurity and malnutrition among children in Benin City" and "To identify the key causes of food insecurity and malnutrition among children in Benin City."

Section C: Challenges and Support Systems for Social Workers - This section directly addresses the third research objective: "To explore the necessary resources and support systems needed to empower social workers to effectively address the crisis."

Section D: Social Work Intervention Strategies - This section corresponds to the fourth and final objective of the study: "To develop and propose specific social intervention strategies to curb food insecurity and malnutrition among children in Benin City."

3.5 Method of Data Collection

The research team administered the questionnaires to the selected participant by visiting the communities and relevant social work organizations to distribute the questionnaires. Before administering the questionnaires, the purpose and significance of the study was clearly explained to the participants. They were given sufficient time to complete the questionnaire. The research team was also available to provide clarification on any questions and will collect the completed forms immediately to ensure a high response rate.

3.6 Validity and Reliability of the Instrument

To ensure the validity of the research instrument, the questionnaire was reviewed solely by the project supervisor. Feedback was incorporated to ensure that the questions are clear, relevant, and effectively measure the concepts under investigation. A pilot study was also conducted with a small group of participants who are not part of the main sample to identify any ambiguities or issues with the questionnaire.

For reliability, the instrument will be tested using the test-retest method. The questionnaire was administered to a small group of individuals and then re-administered after a short period.

3.7 Method of Data Analysis

The data collected from the questionnaires was analyzed using descriptive statistics. The Statistical Package for the Social Sciences (SPSS) software was also used to organize and analyze the data. Descriptive statistics, such as frequency counts, percentages, mean, and standard deviation were employed to summarize the data and to present a clear picture of the prevalence of food insecurity and malnutrition, the effectiveness of various interventions, and the challenges faced by social workers.

3.8 Ethical Considerations

All participants were informed of the purpose of the study and were assured of the confidentiality and anonymity of their responses. Participation was voluntary, and informed consent was obtained from all participants. For children, consent was obtained from their caregivers. Participants were free to withdraw from the study at any time without any circumstances.

CHAPTER FOUR

DATA PRESENTATION AND ANALYSIS

Preamble

This chapter presents and analyzes the data collected from the field which consist of the demographic characteristics of the respondents, followed by the presentation and statistical analysis of the data gathered to address the research questions of this study. The findings are presented in tables, and descriptive statistics such as frequencies, percentages, mean, and standard deviation are used to interpret the results.

4.1 Demographic Characteristics of Respondents

This section presents the demographic information of the respondents who participated in the study. The data is summarized in Table 4.1, which provides an overview of the respondents' gender, age, employment status, marital status, religion, and highest level of education.

Table 4.1: Socio-Demographic Characteristics of Respondents

Variables	Category	Frequency (N)	Percentage (%)
Gender	Male	165	41.25%
	Female	235	58.75%
	Total	400	100%
Age	12-22 years	60	15.0%
	23-33 years	120	30.0%
	34-44 years	145	36.25%
	45-55 years	65	16.25%
	56 years and above	10	2.5%

	Total	400	100%
Employment Status	Employed	115	28.75%
	Self-employed	190	47.5%
	Unemployed	60	15.0%
	Student	35	8.75%
	Total	400	100%
Variables	Category	Frequency (N)	Percentage (%)
Marital Status	Single	100	25.0%
	Married	250	62.5%
	Divorced	25	6.25%
	Widowed	20	5.0%
	Separated	5	1.25%
	Total	400	100%
Religion	Christianity	355	88.75%
	Islam	40	10.0%
	Traditional Religion	5	1.25%
	Total	400	100%
Highest Level of Education	No formal education	25	6.25%
	Primary education	60	15.0%
	Secondary education	120	30.0%
	Tertiary education	140	35.0%
	Postgraduate degree	55	13.75%
	Total	400	100%

Source: Author's field work (2025).

Table 4.1 shows that the majority of the respondents were female (58.75%), while 41.25% were male. In terms of age, the highest percentage of respondents were between 34-44 years (36.25%), followed by the 23-33 years age bracket (30.0%). This indicates that the study's participants were predominantly adults within a working age. A significant portion of the respondents were self-employed (47.5%), with 28.75% being employed, which reflects the informal economy prevalent in the region. The marital status data shows that most respondents were married (62.5%), suggesting that many of the participants are likely heads of households. Religiously, the study's respondents were overwhelmingly Christian (88.75%). Finally, the highest level of education was fairly distributed, with the majority having a tertiary education (35.0%) or secondary education (30.0%), indicating a relatively well-educated sample.

4.2 Analysis of Research Questions

This section presents the analysis of data in relation to the research questions. A mean score is calculated for each item, with the interpretation based on a Likert scale where a mean score of 3.0 and above indicates agreement or a positive perception, and a score below 3.0 indicates disagreement or a negative perception.

4.2.1 Analysis of the Prevalence and Causes of Food Insecurity and Malnutrition

This section analyzes the data to address research question one: "What are the prevalence and causes of food insecurity and malnutrition among children in Benin City?" and research question two: "What are the causes of food insecurity and malnutrition among children in Benin City?"

Table 4.2: Prevalence and Causes of Food Insecurity and Malnutrition

S/N	Statement	Strongly Disagree (1)	Disagree (2)	Undecided (3)	Agree (4)	Strongly Agree (5)	Total (N)	Mean (X)	Standard Deviation (SD)
7	Food insecurity is a major problem among children in my community.	10 (2.5%)	15 (3.75%)	25 (6.25%)	150 (37.5%)	200 (50.0%)	400 (100)	4.29	0.87
8	Malnutrition, such as stunted growth, is common among children here.	20 (5.0%)	30 (7.5%)	50 (12.5%)	160 (40.0%)	140 (35.0%)	400 (100)	3.92	1.10
9	Poverty and unemployment are the main causes of food insecurity for children.	5 (1.25%)	10 (2.5%)	15 (3.75%)	180 (45.0%)	190 (47.5%)	400 (100)	4.35	0.78
10	High cost of food makes it difficult for families to provide balanced meals for their children.	0 (0.0%)	5 (1.25%)	10 (2.5%)	125 (31.25%)	260 (65.0%)	400 (100)	4.60	0.55
11	Inadequate access to healthcare and nutrition services contributes to poor child nutrition.	10 (2.5%)	20 (5.0%)	30 (7.5%)	170 (42.5%)	170 (42.5%)	400 (100)	4.17	0.95

Source: Author's field work (2025).

Table 4.2 presents the perceptions of respondents regarding the prevalence and causes of food insecurity and malnutrition. The findings indicate a strong agreement that food insecurity is a major problem among children in Benin City, with a high mean score of 4.29. A combined 87.5% of respondents either agreed or strongly agreed with this statement. Similarly, the statement that malnutrition, such as stunted growth, is common also had a high mean score of 3.92, with 75.0% of respondents agreeing or strongly agreeing. Regarding the causes, the respondents overwhelmingly identified poverty and unemployment as the main drivers, with a mean score of 4.35. A combined 92.5% of participants agreed or strongly agreed with this statement. The high cost of food was also identified as a significant barrier to providing balanced meals for children, with a mean score of 4.60, the highest score in this section. This indicates that most respondents perceive food prices as a critical factor in child nutrition. Additionally, respondents agreed that inadequate access to healthcare and nutrition services contributes to poor child nutrition, with a mean score of 4.17. Overall, the data suggests that food insecurity and malnutrition are significant issues in Benin City, primarily driven by economic factors such as poverty and high food prices, along with limited access to essential services.

4.2.2 Analysis of the Challenges and Support Systems for Social Workers

This section analyzes the data collected to address research question three: "How can social workers in Benin City be empowered to effectively address food insecurity and malnutrition among children, and what resources and support systems are required?"

Table 4.3: Challenges and Support Systems for Social Workers

S/N	Statement	Strongly Disagree (1)	Disagree (2)	Undecided (3)	Agree (4)	Strongly Agree (5)	Total (N)	Mean (X)	Standard Deviation (SD)
12	Social workers in Benin City have enough resources to effectively address food insecurity.	120 (30.0%)	200 (50.0%)	40 (10.0%)	30 (7.5%)	10 (2.5%)	400 (100)	1.95	0.98
13	Social workers need more government support to address food insecurity among children.	10 (2.5%)	10 (2.5%)	20 (5.0%)	170 (42.5%)	190 (47.5%)	400 (100)	4.29	0.86
14	Lack of collaboration among NGOs, government agencies, and social workers hinders effective intervention.	5 (1.25%)	10 (2.5%)	25 (6.25%)	150 (37.5%)	210 (52.5%)	400 (100)	4.37	0.78
15	Limited training and skills are major barriers for social workers in this field.	15 (3.75%)	20 (5.0%)	35 (8.75%)	180 (45.0%)	150 (37.5%)	400 (100)	4.07	0.94

16	Insufficient funding is a major barrier to implementing social work interventions.	5 (1.25%)	15 (3.75%)	20 (5.0%)	160 (40.0%)	200 (50.0%)	400 (100)	4.33	0.84
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Source: Author's field work (2025).

Table 4.3 shows the respondents' perceptions of the challenges and support systems for social workers. The data reveals a strong consensus that social workers do not have enough resources, with a very low mean score of 1.95. A combined 80.0% of respondents disagreed or strongly disagreed with the statement that social workers have sufficient resources. The results further indicate a strong demand for more government support, as reflected by a high mean score of 4.29. A significant 90.0% of respondents agreed or strongly agreed that this support is needed. The respondents also strongly agreed that lack of collaboration among key stakeholders is a major hindrance to effective intervention, with a mean score of 4.37. Furthermore, a combined 82.5% of respondents agreed or strongly agreed that limited training and skills are significant barriers, resulting in a mean score of 4.07. The issue of insufficient funding was also highlighted as a major barrier, with a high mean score of 4.33, and 90.0% of respondents agreeing or strongly agreeing. The findings collectively suggest that to empower social workers, there's a critical need for increased government support, better collaboration, enhanced training, and, most importantly, adequate funding.

4.2.3 Analysis of Social Work Intervention Strategies

This section presents the data analysis for research question four: "What are the social work intervention strategies to curbing food insecurity and malnutrition among children in Benin City?" The data is presented in the table below, followed by a descriptive analysis.

Table 4.4: Effectiveness of Social Work Intervention Strategies

S/N	Statement	Strongly Disagree (1)	Disagree (2)	Undecided (3)	Agree (4)	Strongly Agree (5)	Total (N)	Mean (X)	Standard Deviation (SD)
17	Providing direct food assistance is an effective strategy.	5 (1.25%)	10 (2.5%)	15 (3.75%)	160 (40.0%)	210 (52.5%)	400 (100)	4.40	0.80
18	Nutrition education and counseling for caregivers can significantly improve children's nutrition.	10 (2.5%)	10 (2.5%)	20 (5.0%)	160 (40.0%)	200 (50.0%)	400 (100)	4.35	0.89
19	Community-based initiatives like community gardens are effective in addressing food insecurity.	15 (3.75%)	25 (6.25%)	40 (10.0%)	160 (40.0%)	160 (40.0%)	400 (100)	4.06	1.01

20	Advocating for policies like food subsidies and social protection programs is a crucial intervention.	10 (2.5%)	15 (3.75%)	35 (8.75%)	150 (37.5%)	190 (47.5%)	400 (100)	4.24	0.94
21	Cash transfer programs for vulnerable families would be a very effective intervention.	10 (2.5%)	5 (1.25%)	15 (3.75%)	160 (40.0%)	210 (52.5%)	400 (100)	4.38	0.85

Source: Author’s field work (2025).

Table 4.4 presents the data on the perceived effectiveness of various social work intervention strategies. The results show a high level of agreement on the effectiveness of all proposed strategies. Providing direct food assistance was viewed as a highly effective strategy, with a mean score of 4.40, and a combined 92.5% of respondents agreeing or strongly agreeing. This suggests that direct relief is seen as a necessary immediate measure. Similarly, nutrition education and counseling for caregivers were considered very effective, with a mean score of 4.35. A combined 90.0% of respondents agreed or strongly agreed that this approach can significantly improve child nutrition. Community-based initiatives, such as community gardens, were also seen as effective, with a mean score of 4.06, and a combined 80.0% agreement. This indicates a recognition of the value of grassroots, community-led solutions. The data further

highlights the importance of broader, systemic interventions. Advocating for policies like food subsidies and social protection programs was seen as a crucial intervention, with a mean score of 4.24. A combined 85.0% of respondents agreed or strongly agreed with this statement. The idea of cash transfer programs for vulnerable families was also viewed as a very effective intervention, with a high mean score of 4.38, and a combined 92.5% of respondents agreeing or strongly agreeing. The findings collectively suggest a multi-faceted approach is needed, combining direct assistance and education with systemic, policy-level changes.

4.3 Discussion of Findings

The findings of this study provide a clear picture of the prevalence and primary drivers of food insecurity and malnutrition among children in Benin City. The high mean scores for statements regarding the prevalence of both food insecurity ($X=4.29$) and malnutrition ($X=3.92$) confirm the dire situation described in the literature by scholars like Egbon & Idemudia (2014) and Black et al. (2013). This strong consensus among respondents, who are direct witnesses and often victims of the problem, validates the theoretical and empirical claims that this is not an isolated issue but a widespread systemic challenge. The data supports the notion that Benin City, despite being an urban center, is heavily impacted by these issues, reinforcing the arguments made by Ogunlesi & Akinyinka (2017) regarding the pressures of rapid urbanization on food resources.

More specifically, the analysis of the causes reveals that economic factors are the central determinants of food insecurity. The overwhelming agreement that poverty and unemployment ($X=4.35$) are the main causes, coupled with the highest mean score recorded for the high cost of food ($X=4.60$), directly links the problem to household financial capacity. These findings align perfectly with the Systems Theory and Ecological Systems Theory guiding this research. The high cost of food represents a major stressor from the exosystem (economic policies and market forces), which directly impacts the microsystem (the family's ability to provide food). This validates the literature's focus on poverty as a key determinant (FAO, 2018; Horton & Steckel, 2013). The finding that inadequate access to healthcare and nutrition services also contributes to poor child nutrition ($X=4.17$) further reinforces the multi-faceted nature of the problem, demonstrating how issues within a child's microsystem (lack of care) can be compounded by external exosystem factors (limited public health infrastructure).

The study's findings reveal that social workers in Benin City face significant institutional and systemic barriers. The overwhelmingly low mean score ($X=1.95$) indicating a lack of resources for social workers provides a critical counterpoint to the idea that these professionals are adequately equipped to handle the crisis. This supports Tripodi & Laurelle's (2013) assertion that social workers in the Nigerian context often lack the necessary tools and support. The data strongly suggests that the empowerment of social workers is contingent on external support systems. The high mean scores for the need for more government support ($X=4.29$), improved collaboration among stakeholders ($X=4.37$), and sufficient funding ($X=4.33$) highlight a crucial

deficit in the exosystem of social work practice. This mirrors Kessler's (2018) argument that the capacity of social workers is often hindered by a lack of institutional backing. The finding on the lack of collaboration is particularly significant as it points to a breakdown in the mesosystem the interaction between different microsystems (NGOs, government, and community organizations). This indicates that even when resources exist, their fragmented nature prevents them from being effectively leveraged to address the complex problem of food insecurity. The perception of limited training ($X=4.07$) also indicates a gap in capacity building at a professional level.

The findings on intervention strategies reinforce the need for a multi-pronged approach to social work intervention in Benin City. The high level of agreement on the effectiveness of direct food assistance ($X=4.40$) suggests that immediate relief is perceived as a necessary and impactful intervention. This aligns with the humanitarian-focused literature on addressing immediate hunger (FAO, 2018). The high endorsement of nutrition education and counseling ($X=4.35$) also validates the importance of empowering caregivers with knowledge, as highlighted by Contento (2015). This strategy is a perfect example of a social work intervention that strengthens a child's microsystem by building capacity within the family unit itself.

Furthermore, the study confirms that sustainable, long-term solutions are highly valued. The positive perception of community-based initiatives like gardens ($X=4.06$) demonstrates a belief in the power of local-level, self-sustaining solutions, a finding supported by Alaimo et al. (2010). Most significantly, the strong endorsement of both policy advocacy ($X=4.24$) and cash transfer programs ($X=4.38$) shows that respondents understand the need to address the root

causes of food insecurity at the macrosystem level. This is a critical finding, as it moves beyond a focus on individual-level interventions to a broader, systemic perspective. It suggests that for social work to be truly effective, it must operate across all levels of Bronfenbrenner's Ecological Systems Theory, from direct support to influencing national policy, a point of view advocated by the World Bank (2019) and other global bodies.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.1 Summary

This research explored the socioeconomic determinants of food insecurity and malnutrition among children in Benin City and the potential for a social work intervention model to mitigate these challenges. Grounded in the theoretical frameworks of Systems Theory and the Ecological Systems Theory, the study posited that the problem of child malnutrition is not an isolated phenomenon but rather a product of interconnected failures across multiple systems from the immediate family unit to the broader political and economic environment. This scholarly pursuit was designed to provide a foundational understanding of the issue and to generate empirical evidence that could inform a more holistic and sustainable approach to social work practice. The study employed a descriptive survey design, utilizing a structured questionnaire administered to a purposive sample of 400 respondents. The empirical data corroborated the qualitative assertions from the literature, confirming that food insecurity and malnutrition are profoundly prevalent in the region. The findings quantitatively established that the primary drivers are rooted in the high cost of food and systemic poverty, underscoring the critical influence of macroeconomic forces on household-level well-being. Furthermore, the analysis revealed that the professional capacity of social workers is severely constrained by a dearth of institutional resources, insufficient funding, and fragmented inter-agency collaboration, thereby impeding effective intervention.

However, the research also yielded a strategic roadmap for future action. The findings provided a compelling consensus on the efficacy of a multi-faceted intervention model that concurrently addresses different levels of the problem. Respondents overwhelmingly endorsed not only direct, immediate measures like food assistance and nutritional education but also long-term, structural solutions such as policy advocacy and the implementation of cash transfer programs. This integrated approach, validated by the data, offers a robust framework for developing an evidence-based social work model that is both responsive to immediate crises and capable of affecting lasting, systemic change within the unique context of Benin City.

5.2 Conclusion

The findings of this study lead to the unambiguous conclusion that food insecurity and child malnutrition are systemic and deeply entrenched problems in Benin City, Nigeria. The research established that these issues are not isolated, but are primarily driven by socioeconomic factors such as poverty, unemployment, and the high cost of living. These economic stressors, operating at the macro- and exosystem levels, directly compromise a family's ability to provide adequate nutrition, thereby impacting the child's health and development at the microsystem level. Furthermore, the study concludes that the capacity of social workers to effectively intervene is severely limited by a critical lack of resources, funding, and collaboration. These institutional and systemic deficiencies create a major barrier to effective practice.

Despite these challenges, the research concludes that a robust and effective social work intervention model is not only possible but urgently needed. The study's findings collectively

validate a multi-pronged intervention model that integrates immediate, direct assistance with long-term, systemic change. It is concluded that for social work to make a sustainable impact, it must move beyond providing a simple safety net and actively engage in policy advocacy and the development of sustainable, community-level programs. The findings provide a clear mandate for social work to operate across all levels of the ecological system to truly address the root causes of child food insecurity and malnutrition in Benin City.

5.3 Recommendations

Based on the findings and conclusions of this study, the following recommendations are proposed to address the root causes of food insecurity and malnutrition and to strengthen the capacity for effective social work intervention.

1. **Policy and Advocacy-Level Interventions:** The Government should urgently expand its social protection programs to include food subsidies and cash transfers for vulnerable households. Additionally, social workers and advocacy groups must proactively lobby for economic policies aimed at job creation and stabilizing the high cost of food, which the study identified as a primary driver of the problem.
2. **Community-Based Initiatives:** Social work practitioners must prioritize empowering communities to develop their own sustainable food systems. This includes initiating and supporting local projects such as community gardens, which can improve access to nutritious food while also fostering community resilience and self-reliance.

3. **Enhanced Professional Capacity:** Academic institutions in the region should revamp their social work curricula to include specialized training on food security, nutrition, and poverty alleviation strategies. This will equip the next generation of social workers with the skills necessary to address these complex issues effectively.
4. **Strengthened Collaborative Networks:** It is imperative that government ministries, NGOs, and community organizations establish formal frameworks for collaboration. Creating a central platform for resource sharing and coordinated action will eliminate redundancies and ensure that intervention efforts are both efficient and impactful.
5. **Funding and Resource Mobilization:** To overcome the significant barriers identified, the state government must allocate a sufficient budget for social welfare and food security programs. Simultaneously, social work organizations should actively forge public-private partnerships to secure the long-term funding required to transition from temporary aid to permanent solutions.

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**APPENDIX
QUESTIONNAIRE
DEPARTMENT OF SOCIAL WORK
FACULTY OF SOCIAL SCIENCE
UNIVERSITY OF BENIN
BENIN CITY.**

Dear Participant,

My name is Erowo Hephzibah ABOLO, and I am a student in the Department of Social Work, Faculty of Social Science, at the University of Benin. I am conducting a research study on **“SOCIAL WORK INTERVENTION MODELS FOR IMPROVING FOOD SECURITY AND NUTRITION AMONG CHILDREN IN BENIN CITY”**.

The purpose of this questionnaire is to gather your valuable insights and experiences regarding food security, nutrition, and social work interventions in our community. Your participation in this study is completely voluntary, and all information you provide will be kept strictly confidential. Your name will not be attached to your responses, and the data will only be used for the purpose of this research. There are no known risks associated with participating in this study. You have the right to withdraw from the study at any time without any negative consequences. Please answer the questions as honestly and accurately as possible. Your responses will be a crucial part of developing effective social work intervention models to help children in Benin City.

Thank you for your time and cooperation.

Yours Sincerely,

**Erowo Hephzibah ABOLO
Researcher**

Questionnaire on Social Work Intervention Models for Improving Food Security and Nutrition among Children in Benin City

Section A: Demographic Information

Please tick the appropriate option or fill in the blank.

1. Gender: () Male, () Female
2. Age: () 12-22 years, () 23-33 years, () 34-44 years, () 45-55 years, () 56 years and above
3. Employment Status: () Employed, () Self-employed, () Unemployed, () Student, Other (Please specify): _____
4. Marital Status: () Single, () Married, () Divorced, () Widowed, () Separated, Other (Please specify): _____
5. Religion: () Christianity, () Islam, () Traditional Religion, Other (Please specify): _____
6. Highest Level of Education: () No formal education, () Primary education, () Secondary education, () Tertiary education, () Postgraduate degree, Other (Please specify): _____

Section B: Prevalence and Causes of Food Insecurity and Malnutrition

This section seeks to understand your perception of food insecurity and its causes among children in Benin City. Please indicate your level of agreement with the following statements using the scale below.

Scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree, 5 = Strongly Agree

S/N	Statement	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
7	Food insecurity is a major problem among children in my community.					
8	Malnutrition, such as stunted growth, is					

S/N	Statement	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
	common among children here.					
9	Poverty and unemployment are the main causes of food insecurity for children.					
10	High cost of food makes it difficult for families to provide balanced meals for their children.					
11	Inadequate access to healthcare and nutrition services contributes to poor child nutrition.					

Section C: Challenges and Support Systems for Social Workers

This section focuses on the challenges social workers face and the resources they need to address food insecurity. Please indicate your level of agreement with the following statements using the scale below.

Scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree, 5 = Strongly Agree

S/N	Statement	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
12	Social workers in Benin City have enough resources to effectively address food insecurity.					
13	Social workers need more government support to address food insecurity among children.					
14	Lack of collaboration among NGOs, government agencies, and social workers hinders effective intervention.					
15	Limited training and skills are major barriers for social workers in this field.					
16	Insufficient funding is a major barrier to implementing social work interventions.					

Section D: Social Work Intervention Strategies

This section explores the effectiveness of various social work intervention strategies. Please indicate your level of agreement with the following statements using the scale below.

Scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree, 5 = Strongly Agree

S/N	Statement	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
17	Providing direct food assistance is an effective strategy.					
18	Nutrition education and counseling for caregivers can significantly improve children's nutrition.					
19	Community-based initiatives like community gardens are effective in addressing food insecurity.					
20	Advocating for policies like food subsidies and social protection programs is a crucial intervention.					
21	Cash transfer programs for vulnerable families would be a very effective intervention.					

Thank you for your time and thoughtful responses.