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THE STATE OF CLINICAL SOCIOLOGY IN NIGERIA: PROSPECTS AND CHALLENGES

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ABSTRACT

Clinical Sociology is an applied sub-discipline of sociology that focuses on studying social problems and developing interventions at various levels, including individual, group, organisational, and community. It merges sociological theory and practice to address complex human issues, such as mental health, family conflict, substance abuse, violence, and organisational dysfunction. While Clinical Sociology has gained considerable recognition worldwide, it is not well established or widely known in Nigeria. Sociology was introduced to Nigerian universities in the mid-20th century, primarily as a theoretical discipline, with little emphasis on its application to real-world problems. The concept of Clinical Sociology evolved gradually and is sometimes associated with social work, counselling, or medical sociology. Currently, no institution in Nigeria formally trains or certifies clinical sociologists. However, there are some areas of practice in family counselling, education, and non-governmental interventions related to mental health and gender-based violence. Despite existing constraints, the future of Clinical Sociology in Nigeria looks promising. The increasing emphasis on mental health, social justice, public health, and psychosocial well-being in policy and development discussions presents an opportunity for its integration. Nevertheless, challenges remain, including low awareness, a lack of institutional support, and competition from psychology and psychiatry, which hinder its growth. This paper reviews the development of Clinical Sociology in Nigeria, assesses its current state and applications, explores its potential to address pressing social issues, and identifies the challenges that impede its progress.

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INTRODUCTION

Clinical Sociology is the applied use of sociological theories, methods, and interventions to improve the health of people, families, organisations, and communities. It is a practice-oriented field that focuses on the evaluation, analysis and solutions to social problems and social dysfunctions from a sociological perspective (Fritz, 2008; International Sociological Association [ISA], 2020). A clinical sociologist can be found in a variety of contexts, such as health care, educational, correctional, family counselling, and community development programmes.

It is particularly noteworthy that Clinical Sociology is highly relevant due to its multiple applications. Clinical sociologists assist in solving problems related to mental illness, coping with chronic illness, and patient-caregiver relationships in health care (Fritz, 2008). In family and educational settings, they help resolve conflicts, change behaviours, and adjust to the social world. Clinical sociologists can be used in correctional services for rehabilitation, reintegration and for assessing the social causes of deviance. They also work interprofessionally with professionals in fields such as psychology and social work, but have a unique sociological outlook that focuses on structural and systemic concerns.

Clinical Sociology in Nigeria is still an emerging and mostly underdeveloped discipline. Sociology is taught in most Nigerian universities, and in most cases, it is taught theoretically with little or no interest in applied or clinical sociology. However, Nigeria is beset with several social problems, including a rising incidence of mental health problems, family disintegration, delinquency among the youths, gender-based violence and social exclusion, where Clinical Sociology can have a transformative impact (Adetola et al., 2025).

This study was motivated by the need to examine the possibility of bringing Clinical Sociology into the sociological and professional arena in Nigeria as a way of solving pressing social problems. In view of the increasing need for community and social-based interventions in social and health services, this paper seeks to situate Clinical Sociology as a relevant and practical discipline in the development discourse in Nigeria.

Historical Development of Clinical Sociology in Nigeria

Clinical Sociology arose in the early 20th century from a burgeoning interest among sociologists in applying their knowledge in the real world outside the classroom. It is based on the belief that sociological understanding is not only important for understanding society, but also has the capacity to influence personal, organisational and community issues directly. It was institutionalised by scholars such as Louis Wirth, Elizabeth Briant Lee and other institutions, including the International Sociological Association (ISA), which established Clinical Sociology as a separate field through its Research Committee 46 (RC46) (ISA, 2023). It is a field that has been influenced by the symbolic interactionist tradition and systems theory, which focuses on collaboration, empowerment, and systemic change (Fritz, 2008).

The introduction of Sociology into Nigerian Universities

Nathaniel Akinremi Fadipe, PhD, was the first Nigerian to be awarded a doctorate degree in Sociology in 1939 at the University of London. Although the University of Ibadan was established in 1948, it was not until 1960 that a sub-department of Sociology was created from the Department of Economics and Social Studies. On the other hand, the University of Nigeria, Nsukka, was established in 1960 and at the same time, it started off with a full-fledged Department of Sociology and Anthropology in October 1960. Thus, the University of Nigeria, Nsukka, can be said to be the first University in Nigeria to have its full department of sociology. Other first-generation universities, such as the University of Ife (now Obafemi Awolowo University), established in 1961; Ahmadu Bello University, Zaria, established in 1962; University of Lagos, established in 1962, and University of Benin, established in 1970, also

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started their various departments of Sociology. However, the Sociology courses at this time were to a very large extent Western-oriented (Ogundipe & Edewor, 2012).

Since the 1980s and 1990s, Nigeria's applied sociology has been brought to the forefront as a discipline with the emergence of a growing number of scholars and practitioners who saw the need to apply sociological tools to address real-world problems. But, in the Nigerian academic sphere, Clinical Sociology, which is one of its specialised interventionist fields, has remained poorly developed. The majority of the Sociology syllabuses taught in Nigerian educational institutions still focus on general, theoretical knowledge, as there is no formal training or course in Clinical Sociology (Ogundipe & Edewor, 2012; Adetola et al., 2025). In the fields where practice-oriented work is found, it is more commonly classified as social work, counselling, or development sociology instead of under the clinical sociology category.

Although the field of Clinical Sociology is not widely recognised academically, the practice of Clinical Sociology has been indirectly influenced by the health, development and humanitarian sectors in Nigeria. The clinical sociological approach has been applied by international organisations in Nigeria, like UNICEF, WHO, UNAIDS, etc. with projects on mental health advocacy, community-based interventions, etc., but these projects are often led by psychologists or social workers, instead of sociologists (Wada et al., 2021; WHO, 2021). With the increasing importance of social determinants of health, gender-based violence and psychosocial support in these areas, there is a space for clinical sociologists.

Although Clinical Sociology has not yet gained institutional recognition in Nigeria, some academics and practitioners have been calling for the application of sociology in Nigeria. Nigerian scholars have similarly called for the fuller application of sociological knowledge to the country’s development problems (Ogundipe & Edewor, 2012; Adetola et al., 2025). Other associations, such as the Nigerian Anthropological and Sociological Practitioners Association (NASA), have also facilitated applied sociological research. The Association has a sub-scientific committee on Medical Sociology. However, there still needs to be some recognised leaders in this particular field.

The lack of recognition of clinical sociology is partly due to the rigid structures within Nigerian academia, the dominance of biomedical models in discussions of health and development, and the absence of clear professional pathways for clinical sociologists. Consequently, many sociology graduates who are interested in intervention work often shift towards social work, psychology, or development studies to find practical engagement (Ogundipe & Edewor, 2012).

Scope and Applications of Clinical Sociology in Nigeria

Although not yet institutionalised in Nigeria, Clinical Sociology has come to play a greater role in tackling multi-faceted social issues in Nigeria. The following sub-sections discuss the expanding arena of Clinical Sociology in Nigeria:

Mental Health Interventions: Nigeria faces a significant mental health burden, with estimates suggesting that approximately 20–30% of the population may experience mental health disorders (Africa Polling Institute & EpiAFRIC, 2020). Despite this burden, the mental health workforce remains inadequate, with fewer than 300 psychiatrists serving a population exceeding 200 million people (Wada et al., 2021). A clinical sociologist can help the mental health field by conducting psychosocial evaluations, educating the public and providing culturally sensitive interventions. For instance, some organisations, such as Mentally Aware Nigeria Initiative (MANI) and She Writes Woman, apply the sociological strategies of consciousness-raising and participatory therapy to engage in community outreach, storytelling and support groups to reduce stigma and increase early intervention (Wada et al., 2021; MANI, 2023; She Writes Woman, 2022). Post-trauma sociological interventions have been applied to internally displaced persons (IDPs) impacted

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by insurgency in Northern Nigeria, where social reintegration and coping with trauma are facilitated through community healing circles and narrative therapy, which are also common in clinical sociology. Similar interventions are increasingly needed in the Niger Delta, where displaced households have been found to face compounded food insecurity and health challenges long after displacement itself (Uzobo & Akhuetie, 2018), and where health insecurity among IDPs across Bayelsa, Delta, and Rivers States has been linked less to the trauma of displacement than to the loss of stable housing, income, and social support that clinical sociological intervention could help restore (Tonye-Scent & Uzobo, 2020).

Family and Marriage Counselling: In Nigeria, family dynamics are changing as a result of increased urbanisation, economic pressures and changing gender norms. Clinical sociologists assist families in coping with these changes by diagnosing social stressors and conducting family therapy. Family counselling clinics, for example, in Lagos and Abuja, use sociological principles to discuss issues of role conflict, parenting styles and socio-economic pressure (Alabi & Olonade, 2022). Prominent among these is the intervention work in Makurdi in Benue State, in which sociologists facilitated intervention with NGOs in family conflicts between flood-displaced households, leading to reconciliation and support. This kind of research can help Clinical Sociology to align cultural values with therapeutic dialogue, thereby reconciling familial harmony. Cultural cosmologies around gender also shape how family authority and caregiving roles are negotiated in many Nigerian communities; among the Ijaw people of the Niger Delta, for instance, the feminisation of the Supreme Being in traditional religious thought has been linked to a comparatively elevated social and economic status for women within the household, illustrating the kind of indigenous gender belief system that clinical sociologists must understand when mediating family conflict (Uzobo, Ogbanga, & Jack, 2014).

Correctional and Rehabilitative Services: Nigeria's prisons are overcrowded, underfunded and have high recidivism rates. Joseph et al. (2021) report that Nigerian correctional facilities are severely overcrowded, with the majority of inmates held while awaiting trial and rehabilitation programmes remaining minimal. Clinical sociologists provide other, non-punitive approaches in examining inmates' socio-economic backgrounds and in formulating reintegration programmes. For instance, the Prisoners Rehabilitation and Welfare Action (PRAWA) has used rehabilitation projects in Enugu and Rivers States to tackle issues of societal reintegration, family reconciliation and stigma reduction. Clinical sociologists working within these programmes study the effects of poverty, peer pressure, and urban dislocation on deviance and help both prevent and rehabilitate deviant children.

Workplace Conflict Resolution: Interpersonal conflict is not uncommon in the Nigerian corporate and public sector, and may stem from ethnic bias, communication gaps, nepotism, or an autocratic leadership style (Fajana & Shadare, 2012). Clinical sociologists are being increasingly engaged as mediators and consultants to help identify systemic organisational dysfunction. In other multinational firms in the oil and gas industry at Port Harcourt, sociologists have been hired to conduct training for conflict resolution, team dynamics assessment, and to lower stress-related productivity concerns. They can involve conducting organisational climate assessments, inclusion audits and personalised workshops, which are based on the systems theory of clinical sociology.

School and Youth Counselling: Dropout, cultism, drug abuse and mental health issues among the youths are some of the challenges the education system is facing in Nigeria. Clinical sociologists working with schools help tackle these issues by facilitating peer support groups, conducting behavioural research, and mediating student-family-school relationships. Adeniyi and Omigbodun (2016) demonstrated that a structured classroom-based intervention delivered in a Southwest Nigerian school significantly improved pupils’ social skills, showing how school-based psychosocial

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programmes can help reduce behavioural difficulties among students. Clinical sociology was demonstrated in one instance where a "Youth Sociotherapy Circle" was hosted in a secondary school in Owerri, where students were able to discuss matters related to trauma and social pressures in a safe environment.

Health Promotion and Community-Based Initiatives: In rural Nigeria, sanitation, hygiene and the availability of maternal care remain a major public health challenge with limited access to safe drinking water and sanitation. Community mobilisation for solving these problems is done by clinical sociologists through participatory approaches. They develop health campaigns, facilitate focus group discussions and promote behaviour change with culturally relevant resources. In oil-producing communities of Bayelsa State, a study by Olalekan et al. (2018) revealed that clinical sociological approaches (community mapping and household interviews) were effective in identifying sanitation gaps and influencing local hygiene practices. These interventions not only raised awareness but also fostered community ownership and sustainability of health solutions. Community health promotion in the Niger Delta also has to reckon with indigenous therapeutic practice already embedded in local life; scarification and body marking, for example, have long functioned as therapeutic and prophylactic interventions administered by traditional healers among the peoples of Bayelsa State, underscoring that clinical sociological practice in the region operates alongside, rather than in place of, an existing indigenous system of health belief (Uzobo, Olomu, & Ayinmoro, 2014).

NGOs, Development Agencies and Government Programmes: A huge number of international and local NGOs in Nigeria, including UNICEF, ActionAid, UNFPA, etc., conduct psychosocial and social protection programmes which are related to the objectives of Clinical Sociology. In Borno and Yobe States, UNICEF's Child Protection programmes use child sociology-trained caseworkers to address children's trauma due to the insurgency (UNICEF Nigeria, 2023). The Nigerian Ministry of Humanitarian Affairs works with development sociologists and social workers to deliver trauma counselling and rebuild communities in conflict areas in Plateau State. These programmes are models for the interdisciplinary and sociologically-based practice of medicine in the context of development.

Prospects of Clinical Sociology in Nigeria

Rising demand for Health and Psychosocial Services: The need for integrated psychosocial services in healthcare institutions has been increasing in Nigeria. As mental health problems, chronic diseases and social disruptions from insecurity and poverty are increasing, Clinical Sociology has the potential to address important gaps in the provision of services. The WHO (2022) explains that sociologists who are trained in therapeutic engagement and systems intervention can help to provide comprehensive care to hospital teams, rather than just medical care. There is also an increasing need for clinical sociological input in communities affected by disaster or conflict that require psychosocial care.

Recognition of Mental Health, Gender Based Violence and Trauma Interventions: The growing awareness of mental health problems and gender-based violence has provided some room for interdisciplinary interventions. Clinical Sociologists can participate in psychosocial assessment, trauma-informed care and post-violence recovery programmes (Federal Ministry of Health [FMoH], 2021). For instance, the "Standing Together to End GBV" project by UNFPA Nigeria provided a space for the sociologist to collaborate with other stakeholders on trauma support services and survivors' advocacy (UNFPA Nigeria, 2022).

Development of Interdisciplinary Research and Collaboration: As interdisciplinary research has gained momentum in Nigerian academic institutions, crossover of ideas between psychology, public health, social work and sociology has occurred. The applied and interventionist perspective of Clinical Sociology is suitable for contributions to research on social behaviour, community intervention, and public mental health. The integration of multidisciplinary

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methodologies into post-graduate research is being adopted by institutions such as the University of Ibadan and the University of Lagos, where Clinical Sociologists can be a leader or a contributor (Adetola et al., 2025). Social gerontology is one such emerging interdisciplinary strand: research on older adults in Bayelsa State has shown that socio-cultural and lifestyle factors, rather than biology alone, substantially explain the well-documented gap in longevity between older men and women, pointing to a genuinely clinical sociological contribution to family counselling and lifestyle-focused psychosocial support for Nigeria's ageing population (Uzobo & Mustafa-Shaibu, 2019).

Public Health and Social Policy Reform (PHSW): Growth As more attention is paid to social determinants of health in the national health policies, clinical sociologists will likely have relevance in the design and delivery of public health interventions. The National Mental Health Act, signed into law in 2023, is a legislative framework for mental health services and encourages psychosocial support as part of mental healthcare (FMoH, 2023). This development is a unique opportunity for Clinical Sociology to be formally placed in the national health planning and implementation.

Opportunities in Education, Social Work, and NGO Partnerships: The increasing overlap of sociology and social work course curricula and the rising importance of community-based clinical interventions by NGOs open the door to Clinical Sociology practice. Sociologists with clinical skills have been able to venture into advocacy, psychosocial support and public sensitisation through NGOs like Mentally Aware Nigeria Initiative (MANI) and She Writes Woman. Furthermore, some universities are starting to offer elective courses in applied or interventionist sociology that may develop into clinical sociology studies in the future (MANI, 2023; She Writes Woman, 2022).

The incorporation of prospective patients into national healthcare systems: In Nigeria, the national health system is increasingly aware of the importance of allied health professionals as they strive to achieve Universal Health Coverage (UHC). Clinical Sociology can be incorporated into multi-disciplinary teams in hospitals, community health centres and rehabilitation programmes, if appropriate advocacy and regulatory frameworks are put in place. The work of Clinical Sociologists might be institutionalised in mental health hospitals, family health units and correctional facilities, similar to the situation in South Africa, the US and Canada, where clinical sociology is already integrated into social systems (International Sociological Association [ISA], 2023).

Challenges Facing Clinical Sociology in Nigeria

Low Awareness and Recognition of Policymakers and Professionals: Clinical Sociology is still an unknown entity in Nigeria. There is a lack of awareness among most policymakers, health workers, and institutional leaders of its relevance and how clinical sociologists can be involved in solving social and psychological problems (Fritz, 2008). This unawareness frequently leads to the underutilisation of sociological expertise in policy, programme and intervention development and planning. This means that clinical sociology tends to be eclipsed by psychology, psychiatry, and social work.

Training Programmes and Certification Pathways: There is a lack of specialised training programmes and pathways in Nigerian universities for clinical sociology. In contrast to other professions like clinical psychology, social work, and counselling psychology, for instance, there are no formal curricula, professional associations, and certification/licensing routes for clinical sociology (Ogundipe & Edewor, 2012). When there's no institutional training, the number of professionals is limited, and the growth of the discipline is stunted. Clinical sociologists are rarely employed in hospitals, rehabilitation centres, schools and correctional institutions in Nigeria, due to limited awareness and training. Where social problems are encountered that dovetail with the field's skills (e.g., family disintegration, substance abuse, youth deviance), clinical sociological approaches are seldom considered (Adetola et al., 2025).

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Competition of Psychology, Psychiatry and Social Work: In Nigeria, other subjects such as psychology and social work have greater visibility and acceptance in academic and clinical settings. These occupations have more defined career structures, licensing requirements and a better fit within government organisations. This leaves clinical sociology as an under-resourced and under-respected discipline, which hinders its recognition as a discipline and collaboration with other disciplines (Ogundipe & Edewor, 2012).

Poor funding of sociological research and interventions: Government and funding agencies tend to favour STEM disciplines and medical sciences over the social sciences. This funding deficit is a threat to sociological research, including applied and clinical studies that might have yielded policy and community interventions (Egbetokun et al., 2022). Furthermore, NGOs and donor agencies are more likely to sponsor mental health or psychosocial support programmes based on a psychological approach than a sociological one.

Therapy, Counselling and Mental Health Stigmas in Nigeria: In Nigeria, there is a stigma attached to mental health, counselling and therapy as people think that the person is weak or insane. The tendency for people not to ask for psychological or social support can impact the visibility and demand for clinical sociologists' services (Wada et al., 2021). This stigma has also influenced academic interest and public support for the field, rooted in religious and traditional beliefs.

Strategies for Advancement of Clinical Sociology in Nigeria

Policy advocacy for recognition and regulation: This is a critical first step in advancing the discipline in Nigeria's health and social service framework. This includes interacting with legislators, ministries (including Health and Education) and regulatory agencies like the National Universities Commission (NUC) and the Medical and Dental Council of Nigeria (MDCN). Advocacy groups can advocate for the inclusion of clinical sociology in national development policy because it brings special attention to the social determinants of health, family dynamics, and behavioural challenges (Adetola et al., 2025).

Curriculum Development in Nigerian Universities: Nigerian universities should develop undergraduate and postgraduate courses specifically geared towards the discipline of clinical sociology to build a pipeline of clinical sociologists. This curriculum should contain units on sociological diagnosis, therapeutic techniques, models of intervention, and field practicum. Academic programmes like this have already been established in other countries, such as Canada and the United States (Fritz, 2008) and could be implemented in Nigeria to provide students with practical experiences of using the sociological perspective in clinical and community settings.

Professional Associations or Chapters (e.g. Clinical Sociology Society of Nigeria, CSSN): A professional association (e.g. Clinical Sociology Society of Nigeria, CSSN) can be a key driver for standard-setting, accreditation, networking, and advocacy. It can arrange for annual conferences, peer-reviewed journals and Continuing Professional Development Courses. There are models of this kind around the world, such as the Association for Applied and Clinical Sociology (AACS) in the U.S. and the Research Committee on Clinical Sociology (RC46) of the International Sociological Association (ISA), which provide plans for structure and governance (ISA, 2022).

Strategic partnerships with international clinical sociology networks (ISA, RC46): Mentorship, academic exchange, and resource sharing with other international clinical sociology networks can be helpful. For example, Nigeria can benefit from curriculum design support from the ISA's RC46, research funding and faculty development. The partnerships can also assist Nigerian sociologists to publish their articles in international journals and attend international conferences, thereby enhancing visibility and credibility (RC46, 2021).

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Public Education Campaigns: To tackle the misconceptions and lack of awareness about clinical sociology, targeted campaigns in the media are required. These may be radio or television broadcasts, community workshops or school outreach programmes on topics such as drug abuse, domestic violence, youth delinquency, family conflict and the role of the clinical sociologist in these areas. Social media can also be used as a cheap medium to attract young people and interest the general public in the field (Wada et al., 2021).

Capacity Building through Workshops, Training and Certification Programmes: Capacity building of existing sociologists, counsellors, and social workers with clinical sociology competencies can be achieved through short-term professional development programmes like certificate courses, workshops, seminars, etc. Such programmes can be implemented in cooperation with universities, NGOs and international partners. Examples of training topics include crisis intervention, sociotherapy, group facilitation, and family systems analysis (Fritz, 2008). These would also help to gradually formalise and professionalise the practice in Nigeria.

CONCLUSION

The evolution of the study of Clinical Sociology in Nigeria shows that the discipline is still in its infancy, with rich sociological traditions brought to Nigeria through the Nigerian universities, influenced by local social realities. Although not formally recognised, Clinical Sociology has had a natural impact on mental health interventions, family counselling, correctional services and community development. This development mirrors the slow but promising process of the incorporation of sociological understanding into problem-solving in the multifaceted socio-cultural environment of Nigeria.

The relevance of Clinical Sociology is more pronounced than ever in today's changing environment, characterised by increased urbanisation, mental health issues, gender-based violence and changing family structures. It provides important skills and knowledge to help explain and resolve social determinants of health, social and interpersonal conflict resolution, and to foster psychosocial well-being across various levels.

However, in order to achieve its full potential, a coordinated multi-sectoral approach to Clinical Sociology is needed, with actors such as policy makers, academia, health care, NGOs and community actors all playing their part. Nigeria can leverage the special ability of Clinical Sociology to facilitate social healing, resilience and sustainable development by mainstreaming it through policy recognition, academic development, professionalisation, and public engagement.

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