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Assessment of health risks associated with contaminants in groundwater in the catchment area of selected dumpsites in Abuja north central Nigeria

A. O. Omali¹ · J. T. Arogundade¹ · D. Snow²

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Abstract

The human health risk assessment associated with heavy metals contained in sources of drinking water within the catchment area of some dumpsites in FCT Abuja were carried out. Surface and groundwater samples collected within the catchment area of the selected dumpsites were subjected to inductively coupled plasma mass spectrometry (ICP-MS) in order to obtain the required analytes for the assessment. Parameters like Hazard Quotient (HQ), Hazard Index (HI) and Carcinogenic Risk Index (CR) that are needed for the assessment were computed. HQ and HI were computed for non-carcinogenic risk assessment while (CR) was computed for carcinogenic risk assessment. The estimated HI for adults via ingestion across all the investigated dumpsites, ranges from 2.38 to 11.6 which is considered unacceptable. The estimated HI value for adults via dermal absorption across all the investigated dumpsites, ranges from 0.026 to 0.07, which is interpreted to be acceptable. The estimated HI for children via ingestion across all the investigated dumpsites, ranges from 8.051 to 29.868, which is interpreted to be unacceptable. The estimated HI value for Children via dermal absorption across all the investigated dumpsites, ranges from 0.3820 to 1.237 in which about 80% are considered acceptable. The CR ranges from 0.0021 to 0.0109 and 0.004940 to 0.026 for adults and children respectively. This results according to USEPA indicate that both children and adults taking the investigated water via ingestion, are at high risk of contracting cancer.

Keywords Carcinogenic risk index · Non-carcinogenic risk assessment · Health risk index · Hazard quotient · Dumpsites · Solid wastes

1 Introduction

One of the disadvantages associated with industrialization and urbanization in developing countries like Nigeria is the uncontrolled discharge of hazardous substances into the environment [1, 2]. These hazardous substances are contained in industrial effluents, municipal wastes and chemicals from agricultural activities such as herbicides and insecticides. Exposure to these hazardous contaminants can have negative impact on human health and persistence in surface water can affect health of aquatic organisms [3, 4].

The relocation of the Federal Capital Territory (FCT) of Nigeria from Lagos to Abuja in 1991 brought about a geometric increase in the population of the people living in the area. People from different parts of the country moved to the new FCT in search of job opportunities and improved standards of living. However, the rapid expansion of the FCT Abuja has

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exceeded what was anticipated in the Master Plan, as the population now exceeds the original design capacity. In 1991 the population of the FCT was 378,671, and this had increased to 5,724,205 by 2001 [5]. Projected population figure for this area is about ten (10) million people by 2026 [6, 7].

One problem associated with increased population in the study area is a poorly developed waste management system. Open and uncontrolled dumping which is capable of subjecting ambient air and groundwater resources to contamination, are the waste disposal strategies adopted in this area [8]. These waste disposal sites were not designed due to their low capital investment, thus allowing for environmental pollution in this area. Wastes generated in this area contain hazardous trace elements and heavy metals which can pose serious health risks to the residents [9].

International Agency for Research on Cancer (IARC) carried out evaluation of carcinogenicity of substances and classifies them into different categories based on the strength of evidence. They classified several inorganic substances including asbestos, arsenic, cadmium, chromium, and nickel as carcinogenic to humans, [10]. The U.S. Environmental Protection Agency (USEPA) assessed the risks involved in the exposure of human to environmental pollutants and provides guidelines for safe exposure levels. They established maximum contaminant levels for several inorganic substances, including arsenic, cadmium, chromium, and lead [11]. Also, the National Toxicology Program (NTP) evaluates the carcinogenicity of substances and came up with hazard identification and risk assessment reports. They classified several inorganic substances as known or suspected human carcinogens, including asbestos, arsenic, cadmium, chromium, and nickel [12].

Studies have shown that chronic exposure to these hazardous trace element and metals can result in health effects such as cancer [1, 13–15]. The continued exposure to hazardous elements like Cadmium (Cd), Arsenic (As), Chromium (Cr) and Nickel (Ni) can also cause agonistic and antagonistic effects on hormones and enzymes [16]. According to (IARC) and (USEPA), human exposure to carcinogens such as Arsenic and other inorganic carcinogens can occur through ingestion and dermal absorption of contaminated water [17]. In view of the aforementioned, the aim of this research is to measure the concentration of the contaminants in the drinking water sources and assess the potential health risks associated with the ingestion and dermal absorption within the catchment area of several dumpsites in FCT, Abuja.

2 Methods

2.1 Site description

The study area is located near Abuja at the geographic centre of Nigeria as shown in Fig. 1 [18]. The study area covers part of FCT Abuja and falls within Latitudes N8°10' and N9°45' and Longitudes E6°30' and E7°45'E, with an approximate area of 120km². The Federal Capital Territory of Nigeria has six (6) local councils, which are: Abuja Municipal, Abaji, Bwari, Gwagwalada, Kuje and Kwali [19]. The seven dumpsites under investigation include Gosa, Karshi, Gwagwalada, Kubwa, Bwari, Azhata and Kuje.

2.2 Geology of the study area

The study area is underlain by Basement Complex consisting of Precambrian to Lower Paleozoic bedrock, including Precambrian igneous granite and high grade metamorphic schist, gneiss and migmatite [20–23] (Fig. 2). Groundwater occurrence in this area is controlled by geologic features such as depth of weathering (thickness and continuity of the regolith) and the intensity of fracturing.

2.3 Water sampling and analytical method

A total of twenty seven (27) of both surface and groundwater samples were collected directly using 100 ml polythene bottles (Fig. 3). Bottles were soaked in 10% HNO₃ for 24 h and rinsed several times with deionised water, prior to sample collection for trace elements and cations [24, 25]. Bottles were also rinsed with aliquots of the sampled water at the time of collection to avoid carryover of contaminants that may compromise the quality of the results [26]. The groundwater samples were collected from hand-dug wells and water boreholes in the vicinity of the study area. Upon arrival at the laboratory, samples were stored in the refrigerator until the day of the analysis. This was done to preserve the integrity of the samples.

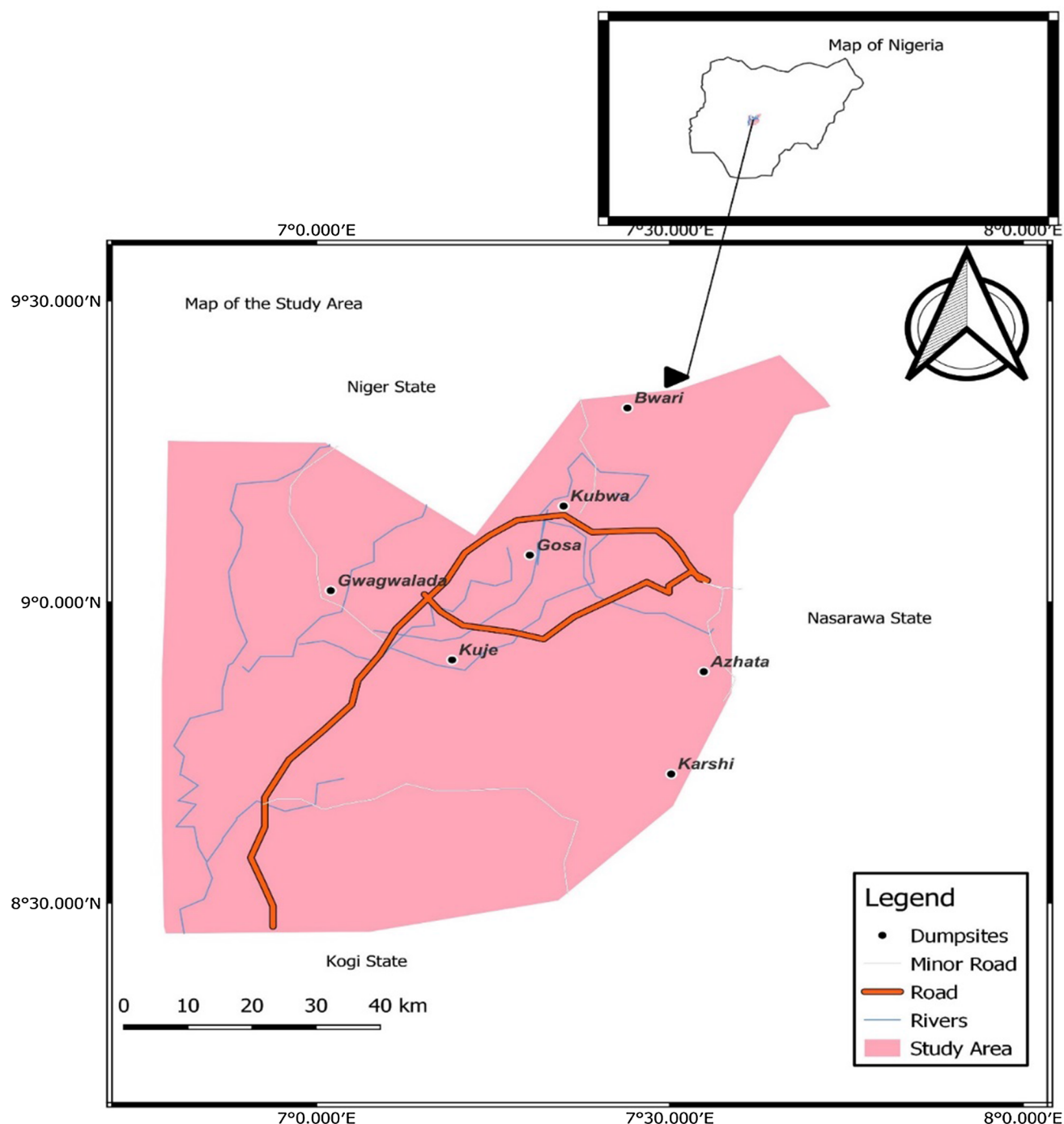


Fig. 1 Map of FCT, Abuja showing the dumpsites

All samples were filtered (using 0.45 μm pore size membrane) and analysed for dissolved trace elements, including cadmium, arsenic, lead, copper, zinc, and nickel, on a Thermo ICAP-RQ inductivity coupled plasma mass spectrometer at the University of Nebraska Water Sciences Laboratory (Lincoln, Nebraska USA). Reagent blanks, laboratory duplicates, and fortified blanks were prepared and used to monitor quality of laboratory measurements. Instrument detection limits are listed with analytical results.

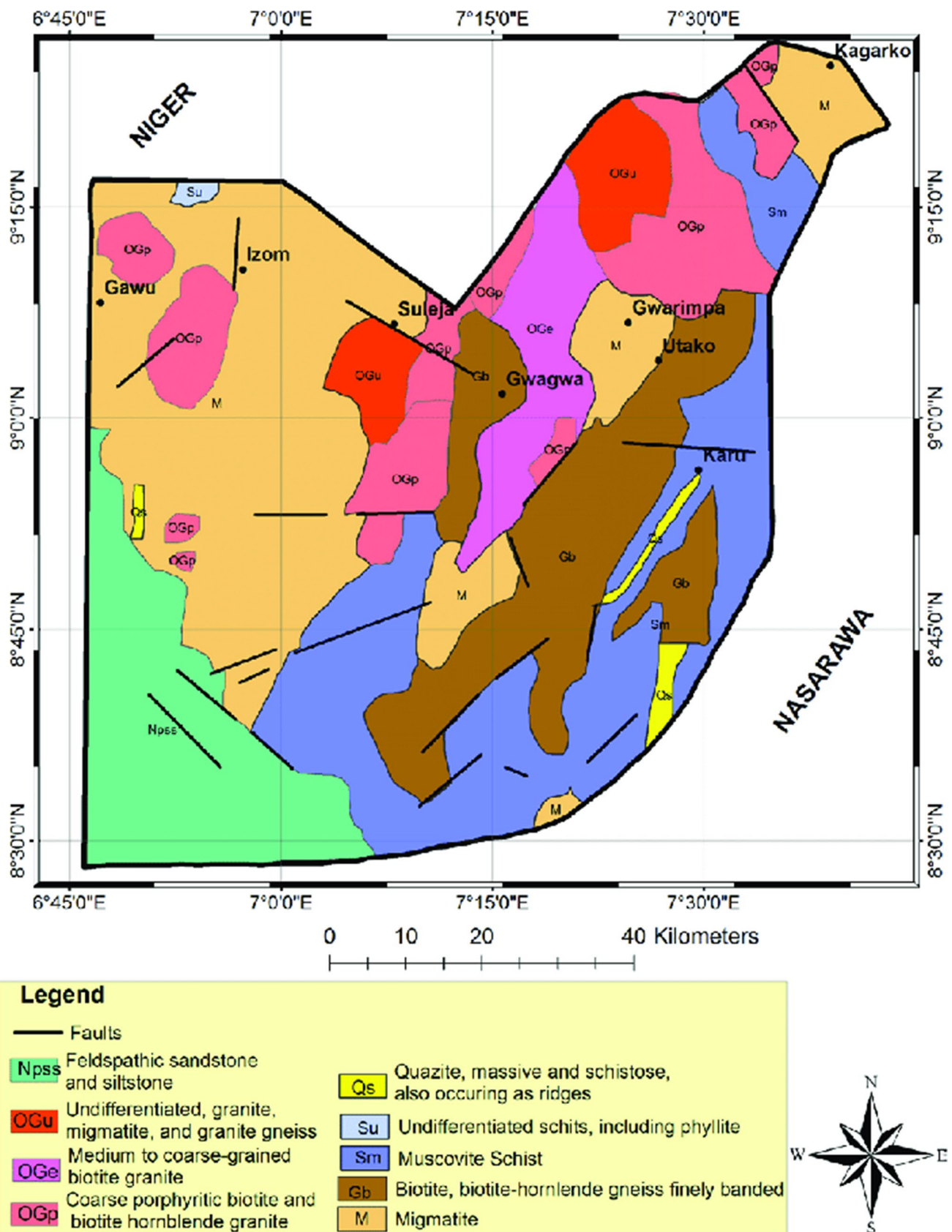


Fig. 2 Geological Map of the study area

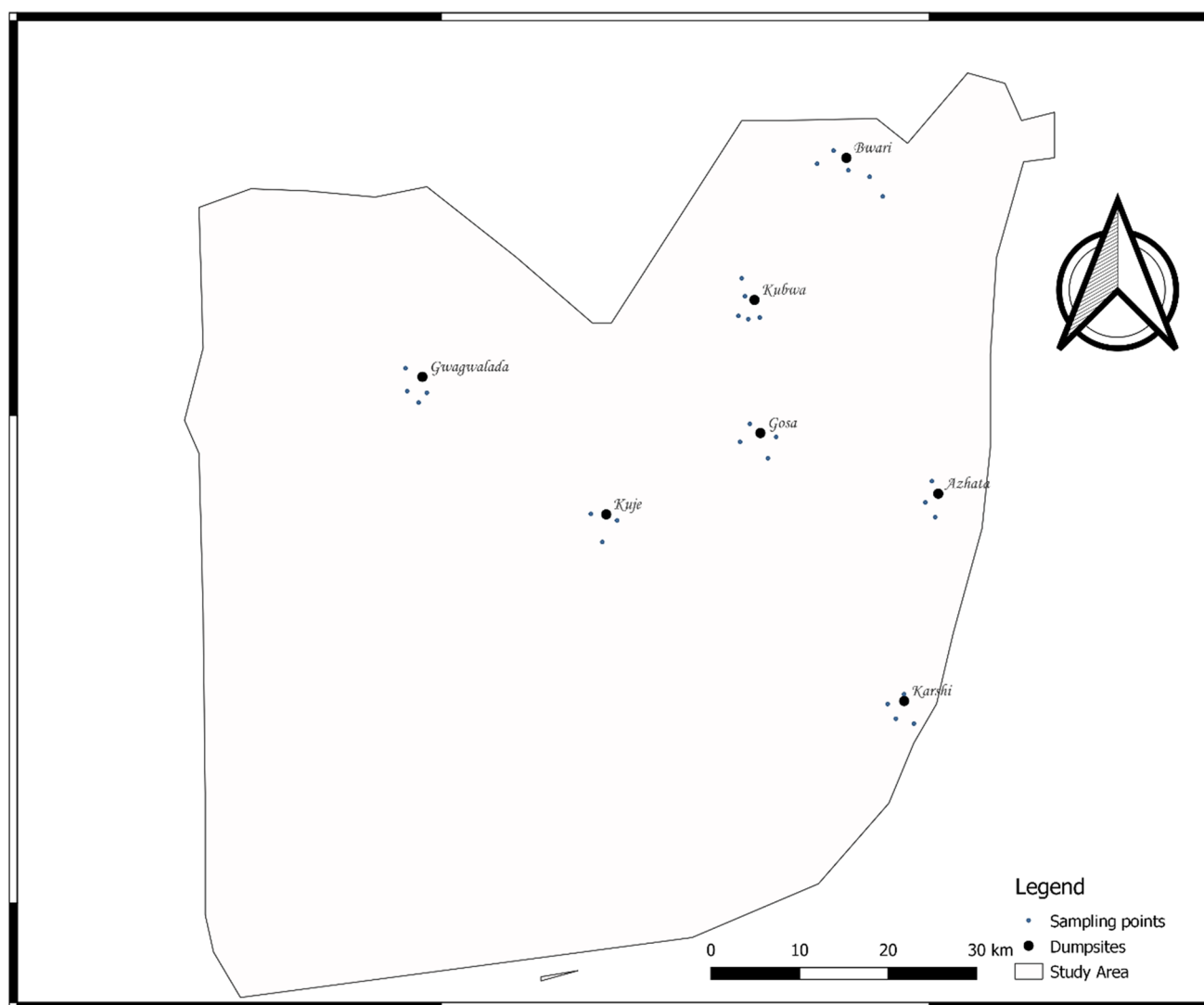


Fig. 3 Map of the study area showing the sampling points

Samples were subjected to microwave assisted acid digestion before they were analysed using ICP-MS. Microwave extraction is designed to mimic extraction using convectional heating with nitric acid (HNO_3) or alternatively nitric acid and hydrochloric acid (HCL).

2.4 Reagents and standards

Thermo, THERMO-4AREV.

Thermo, THERMO-4AREV.

Nitric Acid, trace metal grade (Fisher, A509-P212).

Hydrochloric acid, trace metal grade (Fisher, A509-P212).

Distilled deionized water (DDW).

Copper Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ CLCU2-2Y).

Manganese Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ PLMN2-2Y).

Arsenic Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ CLAS2-2Y).

Iron Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ PLFE2-2Y).

Nickel Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ PLN12-2Y).

Zinc Standard Solution 1000 $\mu\text{g/mL}$, 125 mL (SPEX Certiprep™ CLZN2-2Y).

Table 1 Some of the Parameters used for health risk assessment [31–34]

Metals	RfD_ingestion (mg /kg/ day)	RfD_dermal(mg /kg/ day)	CSF_ingestion(mg /kg/ day)
Cr	3	0.075	0.5
Mn	24	0.96	
Fe	700	140	
Ni	20	0.8	1.7
Cu	40	8	
Zn	300	60	
As	0.3	0.285	1.5
Cd	0.5	0.025	6.1
Pb	1.4	0.42	

Table 2 Standard for health risk Assessment [23, 31]

Parameter	Adult	Children	Units
Ingestion Rate (IR)	1.5	0.7	L/d
Exposure Frequency (EF)	365	365	d
Exposure Duration (ED)	30	12	an
Average Body Weight (BW)	70	15	Kg
Average Exposure Time (AET)	10,950	4380	d
Constant Duration (t)	0.4	0.4	h/d
Skin Permeability coefficient (Kp)	0.001	0.001	cm/h
Conversion factor (CF)	0.001	0.001	
Average Height (H)	165	153	cm

Cadmium Standard Solution 1000µgmL, 125 mL (SPEX Certiprep™ CLCD2-2Y).

Chromium Standard Solution 1000µgmL, 125 mL (SPEX Certiprep™ PLCR2-2Y).

Lead Standard Solution 1000µgmL, 125 mL (SPEX Certiprep™ CLPB2-2Y).

2.5 Quality assurance

To verify the accuracy of the measurement in this study, standard reference solutions (spiked solutions) with known concentrations of the heavy metals were used as control samples. For the measurements of heavy metals by ICP-MS, certified reference materials (CRMs) and standard reference solutions with known concentrations of elements were recognized as an essential tool for ensuring the quality and establishing the accuracy of the results [27].

Two types of Blanks that were used for the analysis include calibration Blank and rinse Blank. The calibration Blank was used to establish the calibration curve while the rinse Blank was used to flush the system between samples and standards. The sample preparation procedures that were used for samples was also used for the Blanks. All reagents used were of analytical grade. The reliability and reproducibility of the measurements were ensured by calibrating the instruments used and procedural blanks determined.

2.6 Health risk assessment

The carcinogenic and non-carcinogenic health risks associated with the ingestion/dermal absorption of water that is contaminated with toxic heavy metals were assessed using hazard quotient (HQ), Hazard index (HI) and carcinogenic health risk (CR) [28].

Table 3 Levels and values of assessment standards for carcinogenic health risk [35]

Risk grades	Ranges of risk value	Acceptability
Grade I (Extremely low risk)	$< 10^{-4}$	Completely acceptable
Grade II (Low risk)	10^{-6} to 10^{-5}	Not willing to care about risk
Grade III (Low-medium risk)	10^{-5} to 5×10^{-5}	Do not mind about the risk
Grade IV (Medium risk)	5×10^{-5} to 10^{-4}	Care about the risk
Grade V (Medium-high)	10^{-4} to 5×10^{-4}	Care about the risk and willing to invest
Grade VI (High risk)	5×10^{-4} to 10^{-3}	Pay attention to the risk and take action to solve it
Grade VII (Extremely high risk)	$> 10^{-3}$	Reject the risk and must solve it

Table 4 Concentration of dissolved trace elements measured in the water samples

Sample	Label	Cu (ug/g)	Cd (ug/g)	As (ug/g)	Zn (ug/g)	Pb (ug/g)	Mn (ug/g)	Ni (ug/g)	Fe (ug/g)	Cr (ug/g)
BWw1	Bwari	4.310	0.005	0.015	9.850	0.026	0.521	0.071	0.525	0.062
BWw2	Bwari	2.080	0.001	0.052	4.660	0.015	0.640	0.043	1.104	0.077
BWw3	Bwari	2.080	0.008	0.017	8.370	0.013	0.930	0.150	0.433	0.109
BWw4	Bwari	1.560	0.001	0.018	12.300	0.019	0.739	0.055	0.106	0.014
GWv1	Gwagwalada	2.540	0.010	0.051	6.860	0.130	1.037	0.045	0.941	0.096
GWv2	Gwagwalada	1.150	0.000	0.007	4.750	0.011	0.899	0.075	0.289	0.010
GWv3	Gwagwalada	2.820	0.001	0.034	8.240	0.018	0.410	0.037	0.268	0.089
GWv4	Gwagwalada	1.080	0.002	0.011	1.650	0.019	0.744	0.086	0.139	0.019
KWw1	Kubwa	0.240	0.002	0.067	4.720	0.011	1.106	0.000	1.086	0.079
KWw2	Kubwa	0.640	0.001	0.019	9.530	0.014	1.020	0.022	1.015	0.098
KWw3	Kubwa	4.460	0.000	0.025	3.620	0.017	0.238	0.047	0.522	0.034
KWw4	Kubwa	0.700	0.002	0.019	7.060	0.024	0.680	0.075	0.604	0.017
KWw5	Kubwa	1.600	0.002	0.016	5.930	0.042	0.190	0.017	0.278	0.030
KRSw1	Karshi	1.280	0.001	0.018	9.560	0.024	0.250	0.024	0.136	0.095
KRSw2	Karshi	5.620	0.002	0.022	2.080	0.019	0.712	0.089	0.587	0.011
KRSw3	Karshi	2.080	0.001	0.015	4.660	0.025	0.640	0.043	0.146	0.057
KRSw4	Karshi	1.980	0.005	0.017	8.370	0.030	0.930	0.015	0.433	0.011
GOw1	Gosa	1.560	0.001	0.078	12.300	0.022	0.739	0.051	0.106	0.038
GOw2	Gosa	2.540	0.001	0.011	6.860	0.013	0.770	0.042	0.941	0.096
GOw3	Gosa	1.150	0.013	0.007	4.750	0.011	0.899	0.075	0.289	0.015
GOw4	Gosa	2.820	0.001	0.013	8.240	0.018	0.459	0.030	0.255	0.089
AZHw1	Azhata	1.080	0.003	0.011	16.500	0.013	0.744	0.086	1.090	0.011
AZHw2	Azhata	0.240	0.001	0.015	4.720	0.021	0.646	0.000	1.000	0.091
AZHw3	Azhata	1.560	0.001	0.011	12.300	0.090	0.739	0.051	0.106	0.010
KUJw1	Kuje	2.540	0.002	0.019	6.860	0.013	0.437	0.045	0.941	0.096
KUJw2	Kuje	1.150	0.001	0.007	4.750	0.018	0.850	0.075	0.289	0.012
KUJw3	Kuje	2.820	0.002	0.034	8.240	0.018	1.010	0.034	0.210	0.089

Table 5 Statistical analysis of the measured concentration for the analytes

	Cu (ug/g)	Cd (ug/g)	As (ug/g)	Zn (ug/g)	Pb (ug/g)	Mn (ug/g)	Ni (ug/g)	Fe (ug/g)	Cr (ug/g)
Mean	1.98815	0.00259	0.0233	7.32333	0.0257	0.70293	0.05122	0.51256	0.05389
Max	5.62	0.013	0.078	16.5	0.13	1.106	0.15	1.104	0.109
Min	0.24	0	0.007	1.65	0.011	0.19	0	0.106	0.01

Table 6 Hazard quotient and health risk index for adult through ingestion of the contaminated water

Sample	Label	HQ_Pb	HQ_Zn	HQ_Mn	HQ_Cd	HQ_Cr	HQ_Fe	HQ_Ni	HQ_As	HQ_Cu	HI_I_Adult	Interpretation
BWw1	Bwari	0.531	0.938	0.006	0.286	0.590	0.021	0.102	1.429	3.079	6.981	Unacceptable
BWw2	Bwari	0.306	0.444	0.001	0.057	0.733	0.045	0.061	4.952	1.486	8.086	Unacceptable
BWw3	Bwari	0.265	0.797	0.010	0.457	1.038	0.018	0.214	1.619	1.486	5.904	Unacceptable
BWw4	Bwari	0.388	1.171	0.001	0.063	0.131	0.004	0.079	1.695	1.114	4.647	Unacceptable
GWv1	Gwagwalada	2.653	0.653	0.012	0.571	0.914	0.038	0.064	4.857	1.814	11.578	Unacceptable
GWv2	Gwagwalada	0.224	0.452	0.000	0.000	0.096	0.012	0.107	0.667	0.821	2.380	Unacceptable
GWv3	Gwagwalada	0.367	0.785	0.002	0.074	0.848	0.011	0.053	3.238	2.014	7.392	Unacceptable
GWv4	Gwagwalada	0.380	0.157	0.002	0.086	0.181	0.006	0.123	1.048	0.771	2.753	Unacceptable
KWw1	Kubwa	0.224	0.450	0.002	0.091	0.752	0.044	0.000	6.381	0.171	8.116	Unacceptable
KWw2	Kubwa	0.286	0.908	0.002	0.080	0.933	0.041	0.031	1.810	0.457	4.548	Unacceptable
KWw3	Kubwa	0.347	0.345	0.000	0.000	0.324	0.021	0.067	2.381	3.186	6.670	Unacceptable
KWw4	Kubwa	0.490	0.672	0.002	0.086	0.162	0.025	0.106	1.810	0.500	3.852	Unacceptable
KWw5	Kubwa	0.857	0.565	0.002	0.091	0.286	0.011	0.024	1.524	1.143	4.503	Unacceptable
KRSw1	Karshi	0.480	0.910	0.001	0.057	0.905	0.006	0.034	1.714	0.914	5.022	Unacceptable
KRSw2	Karshi	0.388	0.198	0.002	0.086	0.107	0.024	0.127	2.095	4.014	7.041	Unacceptable
KRSw3	Karshi	0.510	0.444	0.001	0.057	0.543	0.006	0.061	1.448	1.486	4.556	Unacceptable
KRSw4	Karshi	0.061	0.797	0.006	0.286	0.104	0.018	0.021	1.619	1.414	4.326	Unacceptable
GOW1	Gosa	0.449	1.171	0.001	0.057	0.362	0.004	0.072	7.429	1.114	10.660	Unacceptable
GOW2	Gosa	0.265	0.653	0.001	0.063	0.914	0.038	0.059	1.048	1.814	4.857	Unacceptable
GOW3	Gosa	0.224	0.452	0.015	0.743	0.143	0.012	0.107	0.667	0.821	3.185	Unacceptable
GOW4	Gosa	0.367	0.785	0.001	0.057	0.848	0.010	0.043	1.276	2.014	5.402	Unacceptable
AZHw1	Azhata	0.257	1.571	0.004	0.171	0.104	0.044	0.123	1.048	0.771	4.094	Unacceptable
AZHw2	Azhata	0.429	0.450	0.001	0.057	0.867	0.041	0.000	1.429	0.171	3.444	Unacceptable
AZHw3	Azhata	0.184	1.171	0.001	0.063	0.095	0.004	0.073	1.029	1.114	3.735	Unacceptable
KUJw1	Kuje	0.265	0.653	0.002	0.091	0.914	0.038	0.064	1.819	1.814	5.662	Unacceptable
KUJw2	Kuje	0.367	0.452	0.002	0.074	0.113	0.012	0.107	0.667	0.821	2.616	Unacceptable
KUJw3	Kuje	0.367	0.785	0.003	0.120	0.848	0.009	0.049	3.238	2.014	7.432	Unacceptable

2.6.1 The non-carcinogenic health risk index

The non-carcinogenic hazard index was determined using the formula in Eq. 1 [29]

$$HI = \sum_{i=1}^n HQ \quad (1)$$

The hazard quotient (HQ) was used to assess the potential for non-carcinogenic health risk for all the heavy metals that were encountered in the water samples. The health quotient of each metal was determined using the formula in Eq. 2 [29]

$$HQ = \frac{ADD}{RfD} \quad (2)$$

2.6.2 ADD is the average daily dose

RfD is the oral reference dose for each of the metals in mg/Kg/day [29].

The average daily dose (ADD) through ingestion and dermal absorption were calculated using the formula in Eqs. 3 and 4 below.

$$ADD_{\text{ingestion}} = \frac{C \times I \times R \times E \times F}{BW \times AT} \quad (3)$$

Table 7 Hazard quotient and health risk index for adult through dermal absorption of the contaminated water

Sample	Label	HQ_Pb	HQ_Zn	HQ_Ni	HQ_Mn	HQ_Fe	HQ_Cu	HQ_Cr	HQ_Cd	HQ_As	HI_d_adult	interpretation
BWw1	Bwari	0.00096	0.01520	0.00274	0.00837	0.00006	0.00831	0.01275	0.00309	0.00081	0.05229	Acceptable
BWw2	Bwari	0.00055	0.00719	0.00166	0.01029	0.00012	0.00401	0.01584	0.00062	0.00282	0.04309	Acceptable
BWw3	Bwari	0.00048	0.01291	0.00579	0.01495	0.00005	0.00401	0.02242	0.00494	0.00092	0.06646	Acceptable
BWw4	Bwari	0.00070	0.01898	0.00212	0.01188	0.00001	0.00301	0.00284	0.00068	0.00096	0.04117	Acceptable
GWv1	Gwagwalada	0.00478	0.01058	0.00174	0.01667	0.00010	0.00490	0.01975	0.00617	0.00276	0.06744	Acceptable
GWv2	Gwagwalada	0.00040	0.00733	0.00289	0.01445	0.00003	0.00222	0.00208	0.00000	0.00038	0.02978	Acceptable
GWv3	Gwagwalada	0.00066	0.01271	0.00144	0.00659	0.00003	0.00544	0.01831	0.00080	0.00184	0.04783	Acceptable
GWv4	Gwagwalada	0.00068	0.00255	0.00332	0.01196	0.00002	0.00208	0.00391	0.00093	0.00060	0.02603	Acceptable
KWw1	Kubwa	0.00040	0.00728	0.00000	0.01778	0.00012	0.00046	0.01625	0.00099	0.00363	0.04691	Acceptable
KWw2	Kubwa	0.00051	0.01470	0.00085	0.01639	0.00011	0.00123	0.02016	0.00086	0.00103	0.05586	Acceptable
KWw3	Kubwa	0.00062	0.00559	0.00180	0.00383	0.00006	0.00860	0.00699	0.00000	0.00135	0.02884	Acceptable
KWw4	Kubwa	0.00088	0.01089	0.00287	0.01093	0.00007	0.00135	0.00350	0.00093	0.00103	0.03244	Acceptable
KWw5	Kubwa	0.00154	0.00915	0.00066	0.00305	0.00003	0.00309	0.00617	0.00099	0.00087	0.02554	Acceptable
KRSw1	Karshi	0.00086	0.01475	0.00093	0.00402	0.00001	0.00247	0.01954	0.00062	0.00097	0.04417	Acceptable
KRSw2	Karshi	0.00070	0.00321	0.00343	0.01144	0.00006	0.01084	0.00230	0.00093	0.00119	0.03411	Acceptable
KRSw3	Karshi	0.00092	0.00719	0.00166	0.01029	0.00002	0.00401	0.01173	0.00062	0.00082	0.03725	Acceptable
KRSw4	Karshi	0.00011	0.01291	0.00058	0.01495	0.00005	0.00382	0.00224	0.00309	0.00092	0.03866	Acceptable
GOW1	Gosa	0.00081	0.01898	0.00195	0.01188	0.00001	0.00301	0.00782	0.00062	0.00422	0.04929	Acceptable
GOW2	Gosa	0.00048	0.01058	0.00160	0.01238	0.00010	0.00490	0.01975	0.00068	0.00060	0.05106	Acceptable
GOW3	Gosa	0.00040	0.00733	0.00289	0.01445	0.00003	0.00222	0.00309	0.00802	0.00038	0.03881	Acceptable
GOW4	Gosa	0.00066	0.01271	0.00117	0.00738	0.00003	0.00544	0.01831	0.00062	0.00073	0.04704	Acceptable
AZHw1	Azhata	0.00046	0.02546	0.00332	0.01196	0.00012	0.00208	0.00224	0.00185	0.00060	0.04809	Acceptable
AZHw2	Azhata	0.00077	0.00728	0.00000	0.01038	0.00011	0.00046	0.01872	0.00062	0.00081	0.03916	Acceptable
AZHw3	Azhata	0.00033	0.01898	0.00197	0.01188	0.00001	0.00301	0.00206	0.00068	0.00058	0.03949	Acceptable
KUJw1	Kuje	0.00048	0.01058	0.00174	0.00702	0.00010	0.00490	0.01975	0.00099	0.00103	0.04659	Acceptable
KUJw2	Kuje	0.00066	0.00733	0.00289	0.01366	0.00003	0.00222	0.00245	0.00080	0.00038	0.03042	Acceptable
KUJw3	Kuje	0.00066	0.01271	0.00132	0.01623	0.00002	0.00544	0.01831	0.00130	0.00184	0.05783	Acceptable

$$\text{ADD}_{\text{dermal}} = \frac{C \times S \times K_p \times E \times T \times E F \times C F}{B W \times A T} \quad (4)$$

C is the concentration of heavy metals in drinking water

IR is the daily exposure rate (1/day)

ED is the exposure duration (years)

EF is the exposure frequency (365 days/year)

SA is the exposure area of the skin [(6600 cm², children), (18,000 cm², Adult)]

K_p is the dermal permeability coefficient in water (cm/h);

BW is the average body weight (kg)

AT is the average lifetime of human exposure

For non-carcinogenic health risk estimation, *AT* = *ED* × 365

For carcinogenic health risk estimation, *AT* = 55 × 365 (Life expectancy in Nigeria is 55 years)

There would be an adverse effects on adults or children consuming water contaminated with the identified heavy metals through ingestion and dermal contact if HI, HQ > 1 but there would be no cause for concern if the computed HI < 1 [30].

2.7 The carcinogenic health risk Index (CR)

The carcinogenic health risk index is a measure or risk involved by being exposed to a carcinogens (As, Cd, Cr etc.) for lifetime. CR of the water samples were determined using the formula in Eq. 5 [36]

Table 8 Hazard quotient and health risk index for children through ingestion in the study area

Sample	Label	HQ_Cu	HQ_Ni	HQ_Mn	HQ_Cd	HQ_Fe	HQ_Cr	HQ_Pb	HQ_Zn	HQ_As	Hi_i_child	Interpretation
BWw1	Bwari	7.183	0.237	1.447	0.667	0.050	1.378	1.238	2.189	3.333	17.722	Unacceptable
BWw2	Bwari	3.467	0.143	1.778	0.133	0.105	1.711	0.714	1.036	11.556	20.643	Unacceptable
BWw3	Bwari	3.467	0.500	2.583	1.067	0.041	2.422	0.619	1.860	3.778	16.337	Unacceptable
BWw4	Bwari	2.600	0.183	2.053	0.147	0.010	0.307	0.905	2.733	3.956	12.893	Unacceptable
GWv1	Gwagwalada	4.233	0.150	2.881	1.333	0.090	2.133	6.190	1.524	11.333	29.868	Unacceptable
GWv2	Gwagwalada	1.917	0.250	2.497	0.000	0.028	0.224	0.524	1.056	1.556	8.051	Unacceptable
GWv3	Gwagwalada	4.700	0.125	1.139	0.173	0.026	1.978	0.857	1.831	7.556	18.384	Unacceptable
GWv4	Gwagwalada	1.800	0.287	2.067	0.200	0.013	0.422	0.886	0.367	2.444	8.486	Unacceptable
KWw1	Kubwa	0.400	0.000	3.072	0.213	0.103	1.756	0.524	1.049	14.889	22.006	Unacceptable
KWw2	Kubwa	1.067	0.073	2.833	0.187	0.097	2.178	0.667	2.118	4.222	13.441	Unacceptable
KWw3	Kubwa	7.433	0.155	0.661	0.000	0.050	0.756	0.810	0.804	5.556	16.225	Unacceptable
KWw4	Kubwa	1.167	0.248	1.889	0.200	0.058	0.378	1.143	1.569	4.222	10.873	Unacceptable
KWw5	Kubwa	2.667	0.057	0.528	0.213	0.026	0.667	2.000	1.318	3.556	11.031	Unacceptable
KRSw1	Karshi	2.133	0.080	0.694	0.133	0.013	2.111	1.119	2.124	4.000	12.409	Unacceptable
KRSw2	Karshi	9.367	0.297	1.978	0.200	0.056	0.249	0.905	0.462	4.889	18.402	Unacceptable
KRSw3	Karshi	3.467	0.143	1.778	0.133	0.014	1.267	1.190	1.036	3.378	12.405	Unacceptable
KRSw4	Karshi	3.300	0.050	2.583	0.667	0.041	0.242	0.143	1.860	3.778	12.664	Unacceptable
GOw1	Gosa	2.600	0.168	2.053	0.133	0.010	0.844	1.048	2.733	17.333	26.923	Unacceptable
GOw2	Gosa	4.233	0.138	2.139	0.147	0.090	2.133	0.619	1.524	2.444	13.468	Unacceptable
GOw3	Gosa	1.917	0.250	2.497	1.733	0.028	0.333	0.524	1.056	1.556	9.893	Unacceptable
GOw4	Gosa	4.700	0.101	1.275	0.133	0.024	1.978	0.857	1.831	2.978	13.878	Unacceptable
AZHw1	Azhata	1.800	0.287	2.067	0.400	0.104	0.242	0.600	3.667	2.444	11.610	Unacceptable
AZHw2	Azhata	0.400	0.000	1.794	0.133	0.095	2.022	1.000	1.049	3.333	9.827	Unacceptable
AZHw3	Azhata	2.600	0.170	2.053	0.147	0.010	0.222	0.429	2.733	2.400	10.764	Unacceptable
KUJw1	Kuje	4.233	0.150	1.214	0.213	0.090	2.133	0.619	1.524	4.244	14.421	Unacceptable
KUJw2	Kuje	1.917	0.250	2.361	0.173	0.028	0.264	0.857	1.056	1.556	8.461	Unacceptable
KUJw3	Kuje	4.700	0.114	2.806	0.280	0.020	1.978	0.857	1.831	7.556	20.141	Unacceptable

$$CR = ADD \times CSF \quad (5)$$

ADD = Average daily dose

CSF = Cancer slope factor

3 Results and discussion

The parameters in Tables 1, 2, 3 and 4 above were used for the computation of results shown in Tables 5, 6, 7, 8, 9, 10 and 11

Table 6 contains the data, results and interpretations for the non-carcinogenic HQ and HI. The assessment is for the risk involved for adults in the use of the water within the catchment area of the investigated dumpsites through ingestion. The results revealed that the risk involved for an adult using all the investigated water bodies is unacceptable [30]. This result suggests that the daily intake of the examined heavy metal is higher than the level of concern (i.e. HQ, HI > 1); therefore the non-carcinogenic health risk from heavy metals through ingestion of the investigated water is not in safe range for adult population of the study area. This result agrees with [37–40].

Table 7 contains the data, results and interpretations for the non-carcinogenic HQ and HI for adult population through dermal absorption. The results revealed that the risk involved for an adult using all the investigated water bodies through

Table 9 Hazard quotient and health risk index for children through dermal absorption in the study area

Sample	Label	HQ_As	HQ_Cd	HQ_Cu	HQ_Fe	HQ_Mn	HQ_Cr	HQ_Ni	HQ_Pb	HQ_Zn	HI_d_child	Interpretation
BWw1	Bwari	0.0132	0.0440	0.1896	0.0010	0.1433	0.4365	0.0047	0.0016	0.0260	0.8599	Acceptable
BWw2	Bwari	0.0458	0.0088	0.0915	0.0021	0.1760	0.5421	0.0028	0.0009	0.0123	0.8823	Acceptable
BWw3	Bwari	0.0150	0.0704	0.0915	0.0008	0.2558	0.7674	0.0099	0.0008	0.0221	1.2336	Unacceptable
BWw4	Bwari	0.0157	0.0097	0.0686	0.0002	0.2032	0.0972	0.0036	0.0012	0.0325	0.4319	Acceptable
GWv1	Gwagwalada	0.0449	0.0880	0.1118	0.0018	0.2852	0.6758	0.0030	0.0082	0.0181	1.2367	Unacceptable
GWv2	Gwagwalada	0.0062	0.0000	0.0506	0.0005	0.2472	0.0711	0.0050	0.0007	0.0125	0.3938	Acceptable
GWv3	Gwagwalada	0.0299	0.0114	0.1241	0.0005	0.1128	0.6266	0.0025	0.0011	0.0218	0.9306	Acceptable
GWv4	Gwagwalada	0.0097	0.0132	0.0475	0.0003	0.2046	0.1338	0.0057	0.0012	0.0044	0.4202	Acceptable
KWw1	Kubwa	0.0590	0.0141	0.0106	0.0020	0.3042	0.5562	0.0000	0.0007	0.0125	0.9591	Acceptable
KWw2	Kubwa	0.0167	0.0123	0.0282	0.0019	0.2805	0.6899	0.0015	0.0009	0.0252	1.0570	Unacceptable
KWw3	Kubwa	0.0220	0.0000	0.1962	0.0010	0.0655	0.2394	0.0031	0.0011	0.0096	0.5377	Acceptable
KWw4	Kubwa	0.0167	0.0132	0.0308	0.0011	0.1870	0.1197	0.0049	0.0015	0.0186	0.3936	Acceptable
KWw5	Kubwa	0.0141	0.0141	0.0704	0.0005	0.0523	0.2112	0.0011	0.0026	0.0157	0.3820	Acceptable
KRSw1	Karshi	0.0158	0.0088	0.0563	0.0003	0.0688	0.6688	0.0016	0.0015	0.0252	0.8471	Acceptable
KRSw2	Karshi	0.0194	0.0132	0.2473	0.0011	0.1958	0.0788	0.0059	0.0012	0.0055	0.5682	Acceptable
KRSw3	Karshi	0.0134	0.0088	0.0915	0.0003	0.1760	0.4013	0.0028	0.0016	0.0123	0.7080	Acceptable
KRSw4	Karshi	0.0150	0.0440	0.0871	0.0008	0.2558	0.0767	0.0010	0.0002	0.0221	0.5027	Acceptable
GOw1	Gosa	0.0686	0.0088	0.0686	0.0002	0.2032	0.2675	0.0033	0.0014	0.0325	0.6542	Acceptable
GOw2	Gosa	0.0097	0.0097	0.1118	0.0018	0.2118	0.6758	0.0027	0.0008	0.0181	1.0422	Unacceptable
GOw3	Gosa	0.0062	0.1144	0.0506	0.0005	0.2472	0.1056	0.0050	0.0007	0.0125	0.5427	Acceptable
GOw4	Gosa	0.0118	0.0088	0.1241	0.0005	0.1262	0.6266	0.0020	0.0011	0.0218	0.9228	Acceptable
AZHw1	Azhata	0.0097	0.0264	0.0475	0.0021	0.2046	0.0767	0.0057	0.0008	0.0436	0.4170	Acceptable
AZHw2	Azhata	0.0132	0.0088	0.0106	0.0019	0.1777	0.6406	0.0000	0.0013	0.0125	0.8665	Acceptable
AZHw3	Azhata	0.0095	0.0097	0.0686	0.0002	0.2032	0.0704	0.0034	0.0006	0.0325	0.3981	Acceptable
KUJw1	Kuje	0.0168	0.0141	0.1118	0.0018	0.1202	0.6758	0.0030	0.0008	0.0181	0.9623	Acceptable
KUJw2	Kuje	0.0062	0.0114	0.0506	0.0005	0.2338	0.0838	0.0050	0.0011	0.0125	0.4049	Acceptable
KUJw3	Kuje	0.0299	0.0185	0.1241	0.0004	0.2778	0.6266	0.0023	0.0011	0.0218	1.1023	Unacceptable

dermal absorption is acceptable [30]. In the case of dermal absorption, the computed HQ and HI computed for adult population in the area are below level of concern ($HQ, HI < 1$). This result is in concordance with [32, 37].

Table 8 contains the data, results and interpretations for the non-carcinogenic HQ and HI for the non-adult population in the study area. The assessment is for the risk involved for children in the use of the investigated water through ingestion. The computed HQ and HI across the investigated dumpsites for the children population shows that the non-carcinogenic risk via ingestion of the examined heavy metals is higher than the level of concern (i.e. $HQ, HI > 1$) [30]. The result agrees with [36]. According to World Health Organization report, children are a vulnerable population to health risks via ingestion because they drink more water, consume more food, and breathe more air in proportion to their weight. Children's immune, digestive, reproductive, and nervous systems are still growing. At the early part of development, exposure to toxic elements causes irreversible damage [37].

Table 9 contains the data, results and interpretations for the non-carcinogenic HQ and HI for non-adult population in the study area through dermal absorption of the investigated water. The result suggests that the dermal absorption of the examined heavy metal is lower than the level of concern (i.e. $HQ, HI < 1$) for about 80% of the samples; therefore the non-carcinogenic health risk from heavy metals through dermal absorption of the investigated water is in safe range for children population of the study area except for few samples representing about 20% of the total samples from Kuje, Gosa, Gwagwalada and Bwari dumpsites that are unacceptable [30]. This result agrees with [36–39].

Table 10 contains the data, results and interpretations for carcinogenic risk index. The assessment is about the risk involved for an adult to contract cancer using the investigated water via ingestion. The estimated $CR_{\text{ingestion}}$ for all the toxic elements (inorganic carcinogens that were discovered in the samples) are in the range of 0.0021 to 0.0109 for adult population in the area [39, 40]. The results when compared with USEPA and other regulatory guidelines, suggest that the probability of carcinogenic risk via ingestion is 1 in 1000 [42–46]. Also, when the results are compared with the

Table 10 Carcinogenic risk (CR) for adult through ingestion in the study area

Sample	Label	CR _{As}	CR _{Cd}	CR _{Cr}	CR _{Ni}	Σ CR	Risk grade
BWw1	Bwari	0.000351	0.000475	0.000483	0.0018837	0.0031928	GradeVI
BWw2	Bwari	0.001216	9.51E-05	0.0006	0.0011392	0.0030499	GradeVI
BWw3	Bwari	0.000397	0.000761	0.000849	0.003974	0.0059813	GradeVI
BWw4	Bwari	0.000416	0.000105	0.000108	0.0014571	0.0020854	GradeVI
GWv1	Gwagwalada	0.001192	0.000951	0.000748	0.0011922	0.0040831	GradeVI
GWv2	Gwagwalada	0.000164	0	7.87E-05	0.001987	0.0022294	GradeVI
GWv3	Gwagwalada	0.000795	0.000124	0.000694	0.0009909	0.0026028	GradeVI
GWv4	Gwagwalada	0.000257	0.000143	0.000148	0.0022784	0.0028262	GradeVI
KWw1	Kubwa	0.001566	0.000152	0.000616	0	0.0023339	GradeVI
KWw2	Kubwa	0.000444	0.000133	0.000764	0.0005829	0.0019237	GradeVI
KWw3	Kubwa	0.000584	0	0.000265	0.0012346	0.0020839	GradeVI
KWw4	Kubwa	0.000444	0.000143	0.000132	0.0019738	0.002693	GradeVI
KWw5	Kubwa	0.000374	0.000152	0.000234	0.0004504	0.0012103	GradeVI
KRSw1	Karshi	0.000421	9.51E-05	0.00074	0.0006358	0.0018919	GradeVI
KRSw2	Karshi	0.000514	0.000143	8.73E-05	0.0023579	0.0031021	GradeVI
KRSw3	Karshi	0.000355	9.51E-05	0.000444	0.0011392	0.0020338	GradeVI
KRSw4	Karshi	0.000397	0.000475	8.49E-05	0.0003974	0.0013551	GradeVI
GOw1	Gosa	0.001823	9.51E-05	0.000296	0.0013379	0.0035525	GradeVI
GOw2	Gosa	0.000257	0.000105	0.000748	0.0010995	0.0022092	GradeVI
GOw3	Gosa	0.000164	0.001236	0.000117	0.001987	0.0035034	GradeVI
GOw4	Gosa	0.000313	9.51E-05	0.000694	0.0008054	0.0019072	GradeVI
AZHw1	Azhata	0.000257	0.000285	8.49E-05	0.0022784	0.0029057	GradeVI
AZHw2	Azhata	0.000351	9.51E-05	0.000709	0	0.0011548	GradeVI
AZHw3	Azhata	0.000252	0.000105	7.79E-05	0.0013512	0.0017861	GradeVI
KUJw1	Kuje	0.000446	0.000152	0.000748	0.0011922	0.0025389	GradeVI
KUJw2	Kuje	0.000164	0.000124	9.27E-05	0.001987	0.002367	GradeVI
KUJw3	Kuje	0.000795	0.0002	0.000694	0.0009034	0.0025914	GradeVI

standards in Table 4, it can be seen that they belong to Grade VI which means one out of every one thousand adults that take from any of the sampled water via ingestion is at a very high risk of contracting cancer [34]. The results obtained is in tandem with the findings of [41, 42].

Table 11 contains the data, results and interpretations for carcinogenic risk index. The assessment is about the risk involved for children population of the study area to contract cancer using the investigated water via ingestion. When the results were compared with the USEPA and other regulatory guidelines, it revealed that the risk involved for children in the study area to contract cancer, calls for serious concern [42–47]. When compared with the standard in Table 4, the results fall under Grade V which means one out of every ten thousand Children that take from any of the sampled waters is at risk of contracting cancer [35]. The results obtained are also in tandem with the findings of [40, 41].

4 Conclusion

The hazard quotient via ingestion (HQ ingestion), hazard quotient via dermal absorption (HQ dermal), and health risk index (HI) were used for non-carcinogenic risk involved in the in-take of analysed heavy metals for both children and adult population of the study area. The carcinogenic risk (CR) for both children and adults were estimated using the concentration of heavy metals that were analysed in the water samples. Results indicated that there is low to high metal contamination in the water bodies within the catchment area of the investigated dumpsites and that the intake of the water poses high risk for both Children adult population of the study area. These indices were used because it has been observed that evaluations that involve just benchmarking the metal concentrations against regulatory standards, does not give a clear idea about serious health danger, the toxic heavy metals poses to man.

Table 11 Carcinogenic risk (CR) for children through ingestion in the study area

Sample	Label	CR_Ni	CR_Cr	CR_Cd	CR_As	Σ _CR	Risk grade
BWw1	Bwari	0.0008791	0.0002255	0.0002218	0.0001636	0.00149	Grade VI
BWw2	Bwari	0.0005316	0.00028	4.436E-05	0.0005673	0.0014233	Grade VI
BWw3	Bwari	0.0018545	0.0003964	0.0003549	0.0001855	0.0027913	Grade VI
BWw4	Bwari	0.00068	5.018E-05	0.0000488	0.0001942	0.0009732	Grade VI
GWv1	Gwagwalada	0.0005564	0.0003491	0.0004436	0.0005564	0.0019055	Grade VI
GWv2	Gwagwalada	0.0009273	3.673E-05	0	7.636E-05	0.0010404	Grade VI
GWv3	Gwagwalada	0.0004624	0.0003236	5.767E-05	0.0003709	0.0012146	Grade VI
GWv4	Gwagwalada	0.0010633	6.909E-05	6.655E-05	0.00012	0.0013189	Grade VI
KWw1	Kubwa	0	0.0002873	7.098E-05	0.0007309	0.0010892	Grade VI
KWw2	Kubwa	0.000272	0.0003564	6.211E-05	0.0002073	0.0008977	Grade V
KWw3	Kubwa	0.0005761	0.0001236	0	0.0002727	0.0009725	Grade V
KWw4	Kubwa	0.0009211	6.182E-05	6.655E-05	0.0002073	0.0012567	Grade VI
KWw5	Kubwa	0.0002102	0.0001091	7.098E-05	0.0001745	0.0005648	Grade V
KRSw1	Karshi	0.0002967	0.0003455	4.436E-05	0.0001964	0.0008829	Grade V
KRSw2	Karshi	0.0011004	4.073E-05	6.655E-05	0.00024	0.0014476	Grade VI
KRSw3	Karshi	0.0005316	0.0002073	4.436E-05	0.0001658	0.0009491	Grade V
KRSw4	Karshi	0.0001855	3.964E-05	0.0002218	0.0001855	0.0006324	Grade VI
GOw1	Gosa	0.0006244	0.0001382	4.436E-05	0.0008509	0.0016578	Grade VI
GOw2	Gosa	0.0005131	0.0003491	0.0000488	0.00012	0.001031	Grade VI
GOw3	Gosa	0.0009273	5.455E-05	0.0005767	7.636E-05	0.0016349	Grade VI
GOw4	Gosa	0.0003759	0.0003236	4.436E-05	0.0001462	0.00089	Grade V
AZHw1	Azhata	0.0010633	3.964E-05	0.0001331	0.00012	0.001356	Grade VI
AZHw2	Azhata	0	0.0003309	4.436E-05	0.0001636	0.0005389	Grade V
AZHw3	Azhata	0.0006305	3.636E-05	0.0000488	0.0001178	0.0008335	Grade V
KUJw1	Kuje	0.0005564	0.0003491	7.098E-05	0.0002084	0.0011848	Grade VI
KUJw2	Kuje	0.0009273	4.327E-05	5.767E-05	7.636E-05	0.0011046	Grade VI
KUJw3	Kuje	0.0004216	0.0003236	9.316E-05	0.0003709	0.0012093	Grade VI

5 Recommendation

Engineered landfilling that will protect the surrounding soil and water against contamination is highly recommended. Integrated solid waste management as against what is currently adopted, is also highly recommended to reduce the impacts of solid waste on human health.

Author contributions Omali Aurelius and Arogundade Johnson wrote the main manuscript text Omali Aurelius and Arogundade Johnson prepared tables and figures. Daniel Snow carried out the Laboratory analysis. All authors reviewed the Manuscript.

Data availability The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request.

Declarations

Competing interests The authors declare no competing interests.

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References

1. Victor UO, Daniel OO, Valentine IO, Eucheria NN, Patrick L O (2021) Pollution investigation and risk assessment of polycyclic aromatic hydrocarbons in soil and water from selected dumpsite locations in rivers and Bayelsa State, Nigeria. *Environ Anal Health Toxicol.* 2021;36(4):e2021023.
2. Onwukeme VI, Okechukwu VU. Leaching matrix of selected heavy metals from soil to ground water sources in active dumpsites: a case study of Southern Nigeria. *IOSR J Environ Sci, Toxicol Food Technol.* 2021;15(4):1–18.
3. Ojaniyi OF, Okoye PAC, Omokpariola DO. Heavy metals analysis and health risk assessment of three fish species, surface water and sediment samples in Ogbaru axis of river niger, Anambra State. *Nigeria Asian J Appl Chem Res.* 2021;9(1):64–81.
4. Prasanna MV, Praveena SM, Chidambaram S, Nagarajan R, Elayaraja A. Evaluation of water quality pollution indices for heavy metal contamination monitoring: a case study from Curtin Lake, Miri City, East Malaysia. *Environ Earth Sci.* 2012;57:295–304.
5. AEPB (Abuja Environmental Protection Board), (2012). Federal Capital Territory, Nigeria.
6. Federal Ministry of Environment Report, LAGA International, (2004). Integrated waste management facility study for Abuja.
7. Imam A, Mohammed B, Wilson DC, Cheeseman CR. Solid waste management in Abuja, Nigeria. *Waste Manage.* 2008;28(2):468–72.
8. Sawyerr HO, Adeolu AT, Afolabi AS, Salami OO, Badmos BK. Impact of dumpsites on the quality of soil and groundwater in satellite towns of the federal capital territory, Abuja. *Nigeria J Health Poll.* 2017;7(14):15–22.
9. Aderaju OM, Guer DA. Municipal solid waste characterization as a measure towards sustainable waste management in Abuja, Nigeria. *J Environ Sci Public Health.* 2020;4(2):43–60.
10. International Agency for Research on Cancer. IARC Monographs on the Evaluation of Carcinogenic Risks to Humans. Volume 100C: Arsenic, Metals, Fibres, and Dusts. Lyon, France: World Health Organization, 2021.
11. U.S. Environmental Protection Agency. Drinking Water Contaminants – Standards and Regulations. Retrieved from <https://www.epa.gov/dwstandardsregulations/drinking-water-contaminants-standards-and-regulations> (2021)
12. National Toxicology Program. Report on Carcinogens. Fourteenth Edition. Research Triangle Park, NC: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health, 2021.
13. Bulut Y, Baysal,. Removal of Pb (II) from wastewater using Wheat Bran. *J Environ Manag.* 2006;78(2):107–13.
14. Maddock BG, Taylor D, The acute toxicity and bioaccumulation of some lead compound in marine animals. In: Lead in the Marine Environmental Proceeding of the International Experts Discussion on Lead Occurrence, Fate and Pollution in the Marine. Environment, Rovinj, Yugoslavia, 18–22 October, 233–261. (1977)
15. US EPA, Drinking Water Contaminants – Standards and Regulations, Available at: [https://doi.org/EPA\(2017\)](https://doi.org/EPA(2017))
16. Somani M, Amini N, Sadeghian B, Wang D, Fang L. Heavy metals and their source identification in particulate matter (PM_{2.5}) in Isfahan City. *Iran J Environ Sci.* 2018;72:166–75.
17. US Environmental Protection Agency (USEPA, 2020). Regional Screening levels (RSLs) Table; Assessed on May 1, 2020. <https://www.epa.gov/risk/regional-screening-levels-rsls-generic-tables> .
18. Adama O, Governing from above: Solid waste management in Nigeria's new capital city of Abuja. Ph.D. Thesis, Stockholm University, Sweden, 2007.
19. Ezeah C, Roberts CL, Watkin GD, Philips PS, Odunfa A, Analysis of barriers affecting the adoption of a sustainable municipal solid waste management system in Nigeria. In: the proceedings of the 24th International Conference on Solid Waste Technology and Management, 12 - 15 March, 2009. Widener University, Philadelphia, P.A, USA, 2009; pp. 1556–1564.
20. Dada SS, Proterozoic evolution of Nigeria. In: Oshin, O. (ed.). The Basement Complex of Nigeria and its mineral resources. Ibadan, Nigeria, Akin Jinad & Co. 2006.
21. McCurry P, The geology of the Precambrian to Lower Palaeozoic Rocks of Northern Nigeria – A Review. In: 1976.
22. Oyawoye MO. The geology of the basement complex. *J Nigeria Mining, Geol Metall.* 1964;1:87–102.
23. Rahaman MA, Lancelot JR, Continental crustal evolution in S.W.Nigeria: constraints from U-Pb dating of Pre Pan African gneisses. Report de Centre geophysique de Montpellier 1984.
24. Edet AE, Okereke C. Contribution to the development of groundwater resources in the Precambrian Oban Massif, south-eastern Nigeria, based on geo-electrical and hydrochemical data. In: Krasny J, Hrkal Z, Bruthans J, editors. Groundwater in fractured rocks. Czech Republic: Prague; 2003. p. 249–50.
25. Elueze AA, Ekwere AS, Nton ME. Geo-environmental assessment of the environs of the aluminium smelting company in Ikot Abasi, south-eastern Nigeria. *J Min Geol.* 2009;45(2):115–29.
26. Duce RA, Quinn JG, Olney CE, Poitrowicz SR, Ray SJ, Wade TL. Enrichment of heavy metals and organic compounds in the surface micro layer of Narragansett Bay, Rhode Island. *Science.* 1972;176:161–3.
27. USEPA. Edition of the Drinking Water Standards and Health Advisories: EPA 822-S-12-001. Washington, DC: Office of Water U.S. Environmental Protection Agency, 2012.
28. Ayenuddin HA, Sayed J, Papia S. Assessment of physicochemical and bacteriological parameters in surface water of Padma River, Bangladesh. *Appl Water Sci.* 2018;9:10. <https://doi.org/10.1007/s13201-018-0885-5>.
29. U.S. Environmental Protection Agency, Risk Assessment Guidance for Superfund, Vol. 1, Human Health Evaluation Manual (Part A), Washington, DC. 1989.
30. Yang Y, Wei L, Cui L, Zhang M, Wang J. Profile and risk assessment of heavy metals in great Rift Lake Kenya. *Clean Soil Air Water.* 2017;45:1600825.
31. US EPA, Drinking Water Contaminants – Standards and Regulations, (2011). Available at: <https://doi.org/EPA..>
32. Ustaoglu JF, Islam MS. Potential toxic elements in sediment of some rivers at Giresun, Northeast Turkey: a preliminary assessment for Eco-toxicological status and health risk. *Ecol Indic.* 2020;113:106–237.
33. Moses OE, Obinna CA, Emmanuel OE. Interpretation of hydrochemical data using various geochemical models: a case study of Enyigba mining district of Abakaliki, Ebonyi State, SE Nigeria. *Sustain Water Resour Manag.* 2022;8:33. <https://doi.org/10.1007/s40899-022-00613-4>.

34. Wang Y, Hu J, Xiong K, Huang X, Duan S. Distribution of heavy metals in core sediments from Baihua Lake. *Procedia Environ Sci.* 2012;16:51–8.
35. Li C, Chen Q, Zhang X, Snyder SA, Gong Z, Lam SH. An Integrated Approach with the Zebra-fish model for bio-monitoring of municipal wastewater effluent and receiving waters. *Water Res.* 2017;131:33–44.
36. US EPA, Drinking Water Contaminants – Standards and Regulations, Available at: <https://doi.org/EPA> 2004.
37. Hosein A, Seyedeh B Tavakoly S, Batoul Z G O, Tafaghodi M Hosein S and Maryam F (2019) Health risk assessments of arsenic and toxic heavy metal exposure in drinking water in Northeast Iran. *Environ Health Prev Med.* 2019;24:59.
38. Ahmad N, Jaafar MS, Alsaffar MS. Study of radon concentration and toxic elements in drinking and irrigated water and its implications in Sungai Petani, Kedah, Malaysia. *J Radiation Res Appl Sci.* 2015;8(3):294–9.
39. Muhammad S, Shah MT, Khan S. Health risk assessment of heavy metals and their source apportionment in drinking water of Kohistan region, northern Pakistan. *Microchem J.* 2011;98(2):334–43.
40. Saleh H, Panahande M, Yousefi M, Asghari FB, Oliveri Conti G, Talaee EAA, Mohammadi AA. Carcinogenic and noncarcinogenic risk assessment of heavy metals in groundwater wells in Neyshabur Plain, Iran. *Biol Trace Elem Res.* 2018;190:251–61.
41. Akakuru OC, Adakwa CB, Ikoro DO, Eyankware MO, Opara AI, Njoku AO, Iheme KO, Usman A. Application of artificial neural network and multi-linear regression techniques in groundwater quality and health risk assessment around Egbema, Southeastern Nigeria. *Environ Earth Sci.* 2023;82:77.
42. Akoto O, Gyimah E, Zhan Z, Xu H, Nimako C. Evaluation of health risks associated with trace metal exposure in water from the Barekese reservoir in Kumasi, Ghana. *Hum Ecol Risk Assess.* 2019;26:1–1.
43. Agency for Toxic Substances and Disease Registry, Toxicological Profiles. Retrieved from <https://www.atsdr.cdc.gov/toxprofiles/index.asp> 2021.
44. Occupational Safety and Health Administration, Chemical Sampling Information. Retrieved from <https://www.osha.gov/chemicalsamplingdata/> 2021.
45. World Health Organization. Guidelines for drinking-water quality. 4th ed. Geneva, Switzerland: World Health Organization; 2019.
46. European Chemicals Agency. Classification, Labelling and Packaging of Substances and Mixtures. Retrieved from <https://echa.europa.eu/regulations/clp>. 2021.
47. American Conference of Governmental Industrial Hygienists. Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices. Cincinnati, OH: American Conference of Governmental Industrial Hygienists 2021.

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