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Editorial Comment

Articles published in Ibadan Journal of Educational Studies cut across various fields in Education and allied disciplines. The current edition (Volume 15) consists of articles published in January and June 2018 respectfully. Therefore, No 1 of the current edition (January publications) is made up of twenty (20) articles -lost of which are empirical studies:

They are: Sexual culture and practices among married female students of Distance Learning Programme .it University of Ibadan; Copyright violation and combating Mechanisms in selected Publishing Houses in Ibadan, Oyo State, Nigeria; Relationship between Socio-economic status and well-being of Elderly persons with Arthritis in Ibadan, Nigeria; Input Indicators as correlates of students Achievement in Senior Secondary Mathematics in UDU, L. G. A. Delta State; Analysis of Differential Item Functioning on Computer Studies Multiple choice Questions in WAEC Senior School Certificate Examination; Impact of Non-Governmental Organizations (NGOs) Intervention Programmes on the Psycho-social Well-being of Orphans and Vulnerable Children from selected NGOs in Ogun State; Challenges of combining Teaching Practice with Counseling Practicum among Counsellor-trainees of University of Ibadan, Nigeria; The Media and Diffusion of Technology for Educational Development in the 21st Century; Fun-Rigor Theory of child Development; Repositioning Childrearing and Childhood Education Practice in Africa; Capacity Building and Material Resources as Determinants of practitioners' Effectiveness in Delivering Health Education for poverty Alleviation and Sustainable Development in Oyo State. The January publications also consist of the following articles among which are: Monetary Incentives as Determinants of Job Performance of Employees in the Bursary Department of Ekiti State University, Ado-Ekiti, Nigeria; Analysing the Factors that influence Undergraduates choice of Nigerian Universities: The Case Study of University of Benin; Mathematics Teachers' Perceptions of Quality Assurance Strategies on Teachers' Productivity in Osun State, Nigeria; School Facilities and Teacher Competence as Predictors of Pupils' Achievement in English Language in Primary Schools in Lagos State, Nigeria; Attitude and School Type on Academic Achievements of Senior Secondary Schools' Students of Christian Religious Studies in Ibadan, Nigeria; Employee Involvement, Reinforcement, Job Satisfaction and Job Performance of Employees in Selected Workplaces in Ibadan, Oyo State, Nigeria; Raising the Bar of Achievement in Poetic Literature: Implications for Senior Secondary Students Vocabulary Knowledge, Attitude to Poetry and Teaching Strategies in Osun State; African Values of Extended Families: Past, Present and Future as Viewed by Irosun Oyeku in Ifa Divination System; Entrepreneurship in Nigeria Universities and Graduate Participation in the Labour Market in Rivers State.

No 2 of the current edition (June Publications) comprises eighteen (18) articles most of which are scientific studies. They are: Availability and utilization of Educational Technology Laboratory Gadgets in Higher Education for Life Long Learning in Basic Science and Technology; Influence of Management Styles and Job Stress on Job Performance of Records Management personnel in Selected Ministries in Rivers State Civil Service, Nigeria; Differential Adjustment of Students with Congenital and Acquired Blindness in Oyo State and Lagos States, Nigeria; The Role of Administrators in Strategic Planning for Effective University Education in Nigeria; Unpleasant Life Occurrences as Determinants of Mental Health Status Among Undergraduates of University of Ibadan; Conscientiousness, Self-efficacy, Social support and Health Information Seeking Behaviour of Senior Secondary School Adolescents in Ibadan North Local Government Area of Oyo State; The New Connectivities in the Digitization of Education and Their Implications for Teacher Education and Learning; Teachers' Effectiveness and Instructional Materials as Determinants of Students' Performance in Mathematics among Secondary Students in Ibadan Nigeria; Guided Practice on Occupational Health and Safety Competencies of Workers in the Construction Industry in Oyo State, Nigeria; Karl Marx Historical Dialectics, Cultural Education and Nigeria's Economic Goals. The June publications also consist of the following articles; Effects of Occupational Therapy on Socio-Economic Wellbeing of Mentally III patients in selected Hospitals in Oyo and Ogun States; School Health Modifier of the causes and Effects of Nonconsensual Sexual Habits among Undergraduates Students of the University of Benin, Edo State; Influence of Self-efficacy Antecedents on Career Decision-making among Business Educating Students in Federal Universities in South Southern Nigeria; Status of School Feeding Service in selected Boarding Secondary Schools in Edo State: Implication for School Health; Awareness and utilization of E-Commerce Competencies among Small Scale Business owners in Edo and Delta State, Nigeria; Text Selection, Utilization and preparation for Examination and Students' Achievement in Literature-in-English in Selected Secondary Schools in Ibadan Metropolis; The Roles of Finance on Teaching and Learning of Physical Education in Secondary Schools in Kogi State; Symptomatic Experience of Peri and Post Menopausal Women Attending Out Patient Clinics of University College Hospital (UCH) Ibadan, Nigeria.

GUIDELINES FOR SUBMISSION OF ARTICLES FOR IBADAN JOURNAL OF EDUCATIONAL STUDIES (IJES)

The editorial board of Ibadan Journal of Educational Studies (IJES) is seeking articles for the next edition of the journal. The guidelines for submission of research and position based article in all areas of education would be as follows:

1. The manuscript should be precise and not more than 12-15 typewritten pages in double space A4 white paper and should include quoted materials and references.
2. The article must be preceded by an abstract of not more than 150 words typed single-line spaced.
3. Separate cover paper should indicate author's/authors' name, status and contact address.
4. Table and figures should be closed and logically presented and be included within the 12-15 pages A4 paper.
5. The reference should be APA (American Psychological Association) format e.g.
 - Ogundele B.O. and Folarotimi A.A. (2008). Effectiveness of Health Education Intervention on Knowledge of Strategies for Student Nurses in Lagos State. Ibadan Journal of Educational Studies. 5(1), 1-17.
 - Hameed, T.A. and Adebukola, K.T. (2008). Psychological Risk Factors as Predictors of Youth Violence among in-Secondary Students. Journal of Educational Studies 5(2): 1-27
6. Titles of Journals should not be abbreviated.
7. Materials submitted for publication in IJES should not be submitted to another journal.
8. Articles which do not conform with the above specification will be returned to the authors).
9. Submitted articles must be accompanied with a sum of **Five Thousand Naira (#5,000.00)** as assessment fee.

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10. Articles are accepted throughout the year but published twice a year - January and June.

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Conscientiousness, Self-efficacy, Social support and Health Information-Seeking Behaviour of Senior Secondary School Adolescents in Ibadan North Local Government Area of Oyo State

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Abstract

In recent times, it has been observed that poor knowledge on health state and status has led to high morbidity and mortality. There is prevalence in poor health-information knowledge, ignorance, increased STIS, HIV/AIDS, risky health behaviour, abortion and the like. The danger posed by poor health knowledge motivated an investigation of the health information-seeking behaviour of adolescents using conscientiousness, self-efficacy and social support as predictors.

The study adopted a correlational study with a sample of 200 adolescents randomly sampled from Ibadan North local Government Area of Oyo State. Four reliable measuring instruments were used to collect data. Three research questions raised analysed were using Pearson product moment correlation and multiple regression analysis.

The result showed that conscientiousness, self-efficacy and social support positively correlated with health information-seeking behaviour. The regression analysis showed that the three factors jointly accounted for 42.2% of the total variance in adolescent information-seeking behaviour. Social support was found to be the strongest predictor followed by self-efficacy and conscientiousness.

Among others recommendations, parents, teachers and significant individuals are enjoined to help students out with their demand to know much about their health status. School counsellors are admonished to help students to build their self-efficacy to help them to be bold enough to seek for health information. The government should also employ school counselors who will assist students to build their personality (conscientiousness) to enhance self-control on their health issues. This might go a long way in reducing self-prescription and misuse of drug

Keywords: Information-seeking Behaviour, Conscientiousness, Self-efficacy and Social support

Introduction

The future of any nation has a direct relationship with the health of her people. The health of the people is an asset for the growth and development of the nation. Health depends on the perception of individuals because the definitions of well-being by individuals vary. Agbeko (2010) defines health as an optimal personal fitness for full fruitful creative living. Health is maintained and improved, not only through the advancement and application of health science but also through the efforts and intelligent behavioural choices of individuals and society. Health is shaped by factors that are not entirely medical. Health is, therefore, not something that medical doctors provide for people; rather, it is something an individual and a community achieve by themselves. People's attitudes to health often affect personal and societal concepts which are based on experiences and views on well-being. It is important for people to modify their lifestyles.

There is a strong public health basis to directly prioritize and invest in adolescents. Globally, each year, an estimated 1.4 million adolescents die from preventable causes, particularly road traffic injuries, violence, suicide, HIV and pregnancy-related complications (WHO, 2014). Investing in adolescents' healthy living can also improve the health and well-being of many

millions of adolescents who experience health challenges, such as depression, anaemia, or HIV infection. Adolescence represents a critical life stage to promote the adoption of healthy behaviours for lifelong health. Laying that foundation helps prevent health-related problems that occur later in life, such as cardiovascular diseases resulting from physical inactivity and lung cancer from tobacco use initiated during adolescence. In essence, investing in adolescent health can help avert problems for the next generation, such as premature and low birth weight in infants born to very young mothers. Prioritizing adolescent health simply is essential to end preventable deaths. On this premise, making health information available for adolescents becomes very essential (WHO, 2013; 2014).

Health information-seeking behaviour is a process by which an individual acts or seeks to obtain the ideas needed to maintain the state of physical fitness and well-being that enables man to manage the physical, social and biological environments to his/her own satisfaction. Shehu (2005) describes health behaviour as a pattern of choices constituting what one does and what one fails to do that affects fitness level and health status. Examples of such behaviour are physical activities, drug abuse, proper nutrition, alcoholism and

indiscriminate sexual practices. Health seeking behaviour are acts of making choices from the alternatives that are available and the ease with which people are able to choose certain ones over others (Shehu. 2005). In this study, it was assumed that the effectiveness of applying health behaviour for well-being depends largely on factors such as social support, conscientiousness and self-efficacy.

Social support is one of the factors that can influence adolescent health information-seeking. It is the assistance an adolescent receives from his social networks like family, peers, college-mates and staff, cultural sports, social organisations and groups, and online networks, that influence their behaviour. A link between teachers' support and students' well-being has been established above family and friends' support (Cattley, 2004). Adolescents with adequate social support might not be starved of health information, because their social network will provide most health information needed for their daily survival.

However, adolescent with low social support might suffer a lot of setback on issues of poor health such as depression, disease attack, HIV/AIDS infection, suicide ideation and death, because they might not have sufficient information to survive the health challenges they are facing at the moment. Social supporters provide simple information that is capable of preserving lives when the need arises. At times, adolescents trust the support from friends than parents. This is because they spend a lot of time together sharing experiences and information obtained in their immediate environment. According to Aisenon, Battle, Legaspi, Polastri and Valenzuela (2007), adolescents feel freer to talk about their problems with peers than parents.

Social support has long been a concept of interest in explaining and predicting health-promoting behaviours in women (Obboh, Ekpebu and Odeh, 2010). Health promotion programmes have used social support to change behaviours, such as breast self-examination and mammography among women (Mullet, Lazreg, Candela, and Neto, 2005; Obboh, Ekpebu and Odeh, 2010). For example, older African American women have used their social support networks for source of information regarding breast health (Takahashi, Edmonds, Jackson, and Roberts, 2013). Although studies have reported beneficial effects of social support on an individual's health and well-being (Mullet, Lazreg, Candela and Neto, 2005), little research has been conducted to determine whether or not social support is important in promoting health behaviours during the course of life, especially among adolescents.

Self-efficacy is another important variable. It can be referred to as adolescents' belief in their ability to achieve a goal on their own. Self-efficacy is an essential tool for human survival but application to life varies. Most prominent health behaviour theories include self-efficacy (or similar constructs). Self-efficacy is a proximal and direct predictor of intention and of behaviour. According to **social cognitive theory** (Bandura, 1997), a sense of control facilitates a change of health behaviour. Self-efficacy pertains to a **sense-control over one's environment and behaviour**. Self-efficacy beliefs are cognitions that determine whether health behaviour change will be initiated, how much effort will be expended, and how long will be sustained in the face of obstacles and failure. Self-efficacy influences the effort one puts forth to change risky behaviour and the persistence; continue striving despite barriers and setbacks that may undermine motivation. The information-seeking behaviour of an adolescent could be boosted by their level of self-efficacy because such would strive to obtain all health needs they have on their own (Cattley, 2004).

Self-efficacy is directly related to health behaviour, but it also affects health behaviour indirectly through its impact on goals. Self-efficacy influences the challenges that people take on as well as how high they set their goals ("I intend to reduce my smoking," or "I intend to quit smoking altogether"). Individuals with strong self-efficacy select more challenging goals (DeVellis and DeVellis, 2000). They focus on opportunities, not on obstacles. Adolescents can be over-efficacious which could reduce their tendency of seeking information on their health issue. However, this assertion has not been verified. Adolescents are over-efficacious of their ability to handle health challenges on their own without consulting the medical practitioners for check-up. To be over-efficacious could attract self-prescription, self-drug administration and drug abuse, which might result in negative health feedbacks among adolescents.

Conscientiousness can be referred to as the ability or conscious effort of an adolescent to put his/herself under control. Conscientious adolescent often live good lifestyle and are law-abiding. One of the reasons conscientiousness predicts health status and longevity is that conscientious individuals engage in healthy behaviours and avoid unhealthy ones (Bogg and Roberts. 2004). A conscientious adolescent would seek information on health status from the appropriate quarters, adhere to medical

advice and complete ail drugs administered to them. To be less conscientious is to be careless and without giving regard to expert health advice or seeking health information on health needs.

The foregoing discussion revealed that there is a gap in the literature on information-seeking behavior of adolescents. Various studies have revolved around risk health behaviours of adolescents .In a situation where adolescents are not engaging in health-risk behaviours but lack adequate information to survive in their health lifestyle there is also likelihood of health challenges. Therefore, this study investigated

conscientiousness, self-efficacy and social support as predictors of health information-seeking behaviour among adolescents selected in secondary in Ibadan North Local Government Area of Oyo State.

Purpose of the Study

The general purpose of this study was to investigate conscientiousness, self-efficacy and social support as predictors of adolescent health information seeking behaviour. Specifically, this study.

Table 1: Correlation matrix showing the relationship between study variables

Variables	Mean	StdDev	1	2	3		
Health information-seeking behaviour	27.7600	8.84838	1.000				
Social support	35.7200	10.66067	.633**	1.000			
Conscientiousness	40.1000	9.38779	.230**	.525**	1.000		
Self-efficacy	40.0000	10.40487	.338**	.395**	.417**	1.000	

*Correlation is significant at 0.05(2-tailed)

* Correlation is significant at 0.01(2-tailed)

Table 1 reveals the relationship of each independent variables (social support, conscientiousness and self-efficacy) with the dependent variable (health information-seeking behaviour). Health information-seeking behaviour positively correlated with social support (r= .633, p< 0.01), followed by self-efficacy (r=.338, p<0.01) and conscientiousness (r =.230. P<0.01). This implies that the higher the influence of social

support, conscientiousness influence and self-efficacy the better their health information-seeking behaviour is.

Research Question 2:

What is the joint contribution of the independent variables (social support, conscientiousness and self-efficacy) to the dependent variables (Health information seeking behaviour)?

Table 2: Summary of regression for the joint contributions of independent variables to the prediction of health information-seeking behaviour

R = 657						
R Square = .432						
Adjusted R square = .424						
Std. Error = 6.71795						
Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	6734.839	3	2244.946	49.743	.000 ^h
	Residual	8845.641	196	45.131		
	Total	15580.480	199			

Table 2 indicates significant joint contribution of the independent variables (social support, conscientiousness and self-efficacy) to the prediction of health information-seeking behaviour. The result yielded a coefficient of multiple regressions R = 0.657 and multiple R-square = 0.432. This suggests that the three factors combined accounted for 42.4% (Adj.R²= .424)

variance in the prediction of health information-seeking behaviour. The other factors accounting for the remaining variance were beyond the scope of this study. The A NOVA result from the regression analysis showed that there was a significant effect of the independent variables on the health information-seeking behaviour. F_(3,196) = 49.743, P<0.01.

Research Question 3:

What is the relative contribution of the independent variables (social support, conscientiousness and

self-efficacy) to the dependent variables (Health information-seeking behaviour)?

Table 3: Relative effect of the independent variables to the prediction of health information-seeking behaviour

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	9.758	2.383		4.094	.000
	Social support	.556	.054	.670	10.320	.000
	Conscientiousness	.174	.062	.185	2.812	.005
	Self-efficacy	.128	.052	.150	2.469	.014

Table 3 shows that the three predictors (social support, conscientiousness and self-efficacy) were potent predictors of health information-seeking behaviour. The most potent factor was social support (Beta = .670, $t = 10.320$, $P < 0.01$), followed by conscientiousness (Beta = .185, $t = 2.812$, $P < 0.01$) and self-efficacy (Beta = .150, $t = 2.469$, $P < 0.05$). This implies that increase in social support will increase health information-seeking behaviour by 67%, while conscientiousness and self-efficacy will increase employees' health information-seeking behaviour by 18.5% and 15%, respectively.

Discussion of the Findings

The first research question examined the relationship between the independent variables (social support, conscientiousness and self-efficacy) and the dependent variable (health information-seeking behaviour). The result showed that there was a positive significant relationship between social support, conscientiousness, self-efficacy and health information-seeking behaviour. By implication, increase in social support, conscientiousness, self-efficacy could increase health information-seeking behaviour of students.

The result of this study corroborated Meehan and Negy (2003), who reported that perceived social support from family and friends was significantly associated with improved health information-seeking behaviour in their study of a sample of 271 undergraduate students at a large metropolitan public university in the United States. Similarly, in a sample of 35 Latino students, Schneider and Ward (2003) examined the role of ethnic identification and perceived social support in relationship to health information-seeking behaviour. The findings confirmed that the perceived social support received from family, peers in general, faculty, institutional and Latino peers was significantly and positively

related to health information-seeking behaviour. The results from a repeated measures correlational study revealed that perceived social support was also consistently related to health information-seeking behaviour over time in Chinese college freshmen (Tao et al., 2000). This presupposes that adolescents are likely to engage in health information-seeking behaviour if there is social support.

In terms of self-efficacy and health information-seeking behaviour, this study agreed with Shavelon and Bohis (1982) who conducted a meta-analysis of the self-efficacy literature and concluded that self-efficacy positively correlated to health information-seeking behaviour and persistence. High levels of personal efficacy beliefs strengthened student effort, persistence and health information-seeking behaviour in academic endeavours.

The result on conscientiousness in this study agreed with Han and his colleagues (2008), who examined the role of conscientiousness expressions in online social support groups of women with breast cancer. After analyzing online messages from 96 active patient participants, the authors found strong negative relationship between conscientiousness words and breast cancer-related concerns. The study also found that more negative emotional expressions were associated with higher levels of breast cancer-related concerns (Han, Shaw, Hawkins, Pingree, Mctavish and Gustafson, 2008).

The second research question examined the joint contribution of the independent variables (social support, conscientiousness and self-efficacy) to the dependent variables (Health information-seeking behaviour). The result showed that there was a significant joint contribution of the independent variables (social support, conscientiousness and self-efficacy) to the

prediction of health information-seeking behaviour. This suggests that the three factors combined accounted for 42.4% ($\text{Adj.}R^2 = .424$) variance in the prediction of health information-seeking behaviour.

The results of this study agreed with earlier studies on the positive effects of social support on numerous populations, including the college student population. One of the variables examined in a 1992 study was the contributions of perceived stress, personal support, and faculty encouragement and discouragement, in combination with social cognitive variables, to the predication of health information-seeking behaviour of engineering majors at a West Coast University ($N = 218$, & $M = 17-19.70$ years old). It was hypothesized that social support and faculty encouragement will be positively related, and stress and strain will be inversely related to health information-seeking behaviour. The results concluded that perceptions of coping with stress were positively correlated with perceptions of faculty support and inversely correlated with faculty discouragement. As predicted, greater levels of strain were related to lower levels of performance. These results provide some evidence to support the fact that lower levels of stress and more social support enhance self-efficacy and health information-seeking behaviour (Hackett, Betz, Casas, and Rocha-Singh, 1992).

On the other hand, self-efficacy and health information-seeking behaviour agreed with Marcia (2004) who investigated the effects of self-efficacy on health information-seeking behaviour and students' perception of the new senior secondary school environment as either a challenge or threat. After controlling the student ability, the researchers found a statistically significant relationship between academic self-efficacy and health information-seeking behaviour. Besides, students with high levels of academic self-efficacy were confident and optimistic about successfully meeting with the challenges that the first year of the senior secondary school environment presented to them.

The third research question examined the relative contribution of the independent variables (social support, conscientiousness and self-efficacy) to the dependent variables (Health information-seeking behaviour). The result showed that the three predictors (social support, conscientiousness and self-efficacy) were potent predictors of health information-seeking behaviour. The most potent factor was social support, followed by conscientiousness and self-efficacy. The results of this study also supported Crockett, Iturbide, Torres Stone, McGiniev, Raffaeili and Carlo (2007), who found similar result; when they examined

Mexican American college students The study, which involved a sample of 148 college students identified as Mexican American, found that familial support mediated the relationships between stress, health information-seeking behaviour, and depression, whereas peer support mediated the interaction of stress and depression Peer support was positively related with health information-seeking behaviour, and researchers posited that, perhaps, students with greater health information-seeking behaviour tended to seek more peer support, rather than claiming that peer support preceded health information-seeking behaviour.

On self-efficacy and health information seeking, this study agreed with Caprara, Steca, Cervone, and Artistic (2003), who reported that adolescents' perceived capabilities to handle negative emotions and to express positive emotions have been posited as determinants of adolescents' positive thinking and happiness, directly or indirectly through their capabilities to keep effective relationships with parents and peers. Similarly, on conscientiousness, this study corroborated Shaw et al. (2008, who) found that negative emotions were positively related with time spent in cancer-relevant information-seeking. Using the Cognitive-Social Health Information Processing (C-SHIP) model (Miller, Shoda, and Hurley, 1996) as a conceptual framework, these scholars tested the relevance of various cognitive and affective constructs in online cancer information processing. The C-SHIP model argues that individuals differ in terms of cognitive and affective factors, such as values, beliefs, emotional reactions, and competencies, and these factors work together to generate and/or influence health-related behaviours (Shaw et al., 2008). The study found that emotional well-being was negatively correlated with total time spent in information services, whereas negative emotions were linked with a preference for narrative information and psychosocial information-seeking.

Conclusion

This study investigated conscientiousness, self-efficacy and social support as predictors of health information-seeking behaviour among secondary school students in Oyo State. The result showed that there was a significant relationship between social support, conscientiousness, self-efficacy and health information-seeking behaviour. The three factors accounted for 42.4% variance in the prediction of health information-seeking behaviour. The most potent factor was social

support, followed by conscientiousness and self-efficacy. By implication, health information-seeking behaviour is likely to increase when individual experience social support, conscientiousness and self-efficacy.

Recommendations

The following are suggested based on the findings of this study;

- a. Parents, teachers and significant individuals need to help students out with their demand to access information about their health status.
- b. School counselors should help students to build their self-efficacy in order to help them develop boldness to seek for health information.
- c. School counsellor should help students to build their personality (conscientiousness) to enhance self-control on their health issue; this might go a long way in reducing self-prescription and drug administration without consulting medical experts.
- d. Students should try to make enquiry from medical personnel before making any decision concerning their health.

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