

Investigating Health Seeking Behaviour (HSB) among Undergraduates of Social Studies and Education in Kaduna State, Nigeria

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Abstract

This paper investigates Health Seeking Behaviour (HSB) among Undergraduates of Social Studies and Education in Kaduna State, Nigeria. The study was born out of intellectual curiosity to unveil the way and manner students promote their health as well as handle health challenges or disease conditions. To achieve the aim of this study, two (2) research objectives and research questions each guided the study. The descriptive survey design was employed. The data were collected using a questionnaire and In-depth interview (IDI). The quantitative data collected was analysed using descriptive statistics, while, the qualitative data was transcribed to support the discussion of quantitative data. The study found that students engage in positive health-seeking behaviour such as eating vegetables and fruits, self-care and personal hygiene, regular exercise/ physical activities, voluntary fasting as well and going for medical check-ups. However, self-medication, skipping medication, purchasing over-the-counter drugs and sleeping late at night among others as negative health behaviours among the students. Based on the findings, it was recommended among others that educational institutions should collaborate with health experts to incorporate health social work modules into the curriculum. These modules can cover topics such as preventive measures, mental health awareness, nutrition, and accessing healthcare services. By integrating health social work, students can develop a better understanding of their well-being, which will positively impact their overall learning experience in Kaduna State and the country at large.

Keywords: Education, Health Seeking Behaviour, Social Studies, Learning, Undergraduates.

Introduction

The 2018 Health Access Quality (HAQ) Index, which measures the quality and accessibility of healthcare based on 32 causes of death which is preventable with efficient and effective medical/health care, ranked Nigeria 187 out of 195 countries of the world, beneath Egypt (64th), Kenya (112th) South-Africa (119th) and Rwanda (173rd) (Odubola, 2018). Equally, the 2019 World Health Organisation (WHO) data on life expectancy at birth (total years), which captures how long, on average, a newborn baby is expected to live given constancy in death rate, ranked Nigeria 178 out of 192 countries. Added to this, the total life expectancy in Nigeria according to WHO (2019) stood at 55.2 years, below Ghana (64 years), Niger (62 years), South Africa (64 years), and Sudan (65 years). Thus, Nigeria's life

expectancy is below average across the whole continent, which settled at 62.5 years (World Health Organisation [WHO], 2019). One of those reasons for low life expectancy could be attributed to the practice of health-seeking behaviour.

Furthermore, Odubola (2018) reported that Nigeria's health expenditure per capita, which stood at \$215, is also significantly below South Africa's (\$1,086) and Egypt's (\$495), but higher than that of Rwanda's (\$143) and Kenya's (\$157). Budgetary allocation to the health sector in Nigeria is below the 15% recommendation of the World Health Organisation and the Member state of the African Union. However, between the years 2010 and 2019, the average percentage of the health budget against the national budget has ranged from 3.9 to 5.8% (Ejide, 2019). Thus, the Nigerian health sector suffers poor budget allocation which invariably could affect the health-seeking behaviour of the undergraduates in the country as well as Kaduna state.

Health Seeking Behaviour (HSB) has been defined as, "any action or inaction undertaken by individuals who perceive themselves to have a health problem or to be ill to find an appropriate remedy" (Olenja cited in Latunji & Akinyemi, 2018). Health-seeking behaviour can also be referred to as illness behaviour or sick-term behaviour. Health-seeking behaviour is situated within the broader concept of health behaviour, which encompasses activities undertaken to maintain good health, prevent ill health, as well as deal with any departure from a good state of health (Mackian, et al., 2018). Thus, health-seeking behaviour reflects all activities undertaken by persons to promote their health or otherwise. The study of Mintah et al (2012); Sarkar (2013); Usman et al. (2016); Silva et al (2017); Amao (2018); Al-Rifaai, et al (2018); Agbor, et al (2018); Gea-García, et. al (2020); Johnston (2021) submitted that one of the ways of promoting health seeking behaviour is through eating of fruits and vegetables, also self-care and personal hygiene help improve overall health, protect the vital organs of the body, assist in weight control, and promote healthy skin and hair, assist in the proper functioning of the brain as it stimulates the memory recall, supplies the human body with fibre needed for a healthy digestive system.

Accordingly, Salahuddin et al (2014); Horne et al (2015); Ganesan et al (2018); Benson, (2021) noted that fasting helps in lowering triglyceride levels (leftover calories that are turned into a kind of fat which is stored in the fat cells for later use in the body. Also, Sarkar (2013); Al-Rifaai, et al (2018) asserted that the health and personal hygiene knowledge of students significantly improved after education. This supports the theory of Structured Dialectical of Idyorough (2019) which urged that the observance of norms and values in themselves provide the required security for maintaining social health.

However, Bertoldi et al (2014) stated that self-medication which is one of the students' means of health-seeking behaviour is related to wrong diagnosis, delay in seeking medical advice when needed, infrequent but severe adverse reactions, dangerous drug interactions, wrong drug usage and administration as well as dependency and abuse of drugs. Also, a study conducted by Dougherty et al. (2020) revealed that the use of self-medication and traditional medicine was found to be the first step of treatment before turning to the

medical care system. Also, the route of seeking care varied between seeking care at chemists and then continuing to health facilities or starting with a health facility and then accessing prescriptions from a chemist. Afolabi (2008); Yusuf and Omarusehe (2011); Akande-Sholabi et al (2021) studies revealed that between 52.2 % and 55% of the Nigerian population purchase their medicines for self-medication through patent medicine stores.

Whereas, et al (2020) noted that the intake of protein and dairy products helps maintain energy balance, improve bone health and cardiovascular function as well as aid in wound healing. However, WHO (2015); Thorning, et al (2016); NAFDAC (2020) stated that eating a lot of protein and processed dairy products is linked to an increased risk of heart disease, stroke and cancer. Fuhrman (2018); Chen, et al (2020) studies revealed a relationship between processed food/ fast food and increased risk of cardiovascular diseases, coronary heart diseases, cerebrovascular diseases, hypertension among others.

Similarly, the study of Chaudhary, et al (2020); and Corazza et al (2021) revealed that teenagers' preferences for healthy foods and eating habits correlate with their level of food literacy and school-based intervention programmes on health promotion. The study of Omonon and Freddy (2015) found no significant difference in the pattern of drug abuse between students with and those without knowledge of drug education. Consequently, Agberotimi's (2021) study revealed that the rates of alcohol use significantly differ across geographical regions in Nigeria.

On the other hand, the National Health Demographic Survey (2018) revealed that only per per cent of women aged 15-49 have two or more sexual partners, while nine per cent of women reported having sexual intercourse with a person who neither was their husband nor lived with them, and fewer than 4 in 10 of those women (36 per cent) reported using a condom during the last sexual intercourse with such a partner among others. Furthermore, Souza, Galina, Sousa and Azevedo (2016); and Tanaka and Tamura (2016) studies found a significant relationship between sleep education, self-help and improved sleeping habits. Umar (2017) study revealed that education is statistically associated with the number of antenatal clinic visits made and the place of delivery even after controlling for the availability of skilled health workers, parity, income, religion, age and distance.

In another study conducted by Usman, et al (2019) it was revealed that overall medication adherence was low and that some of the factors which affect the adherence level of patients include (e.g. socio-demographic), health system-related factors (such as treatment cost and patients' resources), and provider-related factors (such as prescriber-patient, pharmacist-patient relationship and communication). Similarly, Ostrov, et al (2014); and Dunda (2017) studies revealed that the choice of health facility, either public or private correlates with educational level, presence of a specialist, availability of good equipment and technology, trust in the diagnosis and treatment, demand for the health services, attitude of health workers and cost of treatment among others. Added to this, Opuba and Onyango's (2022) study established that the place of seeking treatment, adequate

instructions, satisfaction level and shared decisions among others influence health health-seeking behaviour of patients and caregivers.

Moving further, Shivaji, et al (2020) study revealed that frequent talking on mobile phones for several hours may result in brain cancer–glioma and acoustic neuroma. Also, students' use of cell phones at night leads to insomnia and this can result in depression and anxiety. However, none of these studies on the varying dimensions of health-seeking behaviour was conducted among Social Studies and Education students in Kaduna state. This study filled the gap.

Theoretical Framework

The study used Andersen behavioural model of health services utilization (1995) to explain HSB of Social Studies and Education students in Kaduna state. According to Andersen (1995) the key elements that can influence health care behaviour and health outcomes of students could be described to include environmental and population characteristics. Environmental factors include the health care system and the external environment, whereas population characteristics include predisposing, enabling resources and need (Ononokpono, 2015). In other words, it is assumed that students' use of health care services is a function of predisposing factors (demographic and social structure), enabling factors (resources) which enable or impede use and their need for health care (perceived and actual) (Andersen, 1995). The researchers employed this model because it provides insight factors that influence HSB of students such as attitudes, beliefs, and perceptions about health and healthcare services as well as cultural beliefs and health literacy levels, which may affect their willingness to seek care. Also, the model established that the financial resources available to students, including their own income, parental income, and access to health insurance can be a significant enabler or barrier to seeking healthcare. However, these variables have not been affirmed among social studies and education students as predictor of their HSB in Kaduna state.

Statement of the Problem

Social Studies and Education undergraduates who are mostly youths form a significant population group in terms of the demographic parameter as they constitute about a fifth of the human population globally and are rapidly increasing in terms of absolute number. Since these undergraduates who are mostly youths represent the future of Kaduna state and the country at large, one of the most important commitments a state can make for future economic, social and political progress is to address their health and development needs. The WHO, and United States Agency for International Development [UNAIDS] (2015) reports noted that existing health services often fail the world's youths, while many of them who suffer from various health challenges and illnesses do not have access to critical preventive and health care services due to negative health-seeking behaviours. It is therefore not clear whether the Social Studies and Education undergraduates understand

the pathway or the decision to engage with a particular medical channel for their health-seeking behaviour. The need for this study becomes clear. In other words, this study sought to investigate Health Seeking Behaviour [HSB] among Undergraduates of Social Studies and Education in Kaduna State, Nigeria. Hence, the following research questions were developed:

- i. What are the measures Social Studies and Education Undergraduates take to promote their health as a means for transforming the learning process in Kaduna State?
- ii. What are the things Social Studies and Education Undergraduates avoid in order not to get ill?

In line with the above research questions, the study sought to:

- i. Find out what Social Studies and Education Undergraduates do to promote their health as a means for transforming learning in Kaduna state.
- ii. Find out what things Social Studies and Education Undergraduates avoided in order not to get ill.

Materials and Methods

The study employed mixed research design which involved the use of quantitative and qualitative methods. The population of the study comprised undergraduate social studies students in FCE, Zaria, ABU, Zaria, Kaduna State College of Education, Gidan-Waya and all students in the Faculty of Education, Kaduna State University totalling four thousand eight hundred and thirty-two [4832] (Academic Secretaries of various institutions, 2022). A sample of four hundred and fifty [450] respondents was selected using sample random, stratified and purposive sampling techniques. The data were collected using a questionnaire and In-depth interview [IDI]. The quantitative data collected was analysed using descriptive statistics of frequency and percentage, while, the qualitative data was transcribed to support the discussion of quantitative data.

Results and Discussions

Out of the 450 questionnaires that were distributed in the course of data collection, 439 were returned. At the end of data screening and analysis, 413 questionnaires were available for further analysis, which represented 91.8%. This was considered adequate because it was more than the minimum required sample size of 400 needed for this study. Furthermore, 10 respondents were interviewed in the study.

Research Question One: What are the measures Social Studies and Education Undergraduates take to promote their health as a means for transforming the learning process in Kaduna State? The findings of this research question are presented as follows:

Table 1: The measures Undergraduates take to promote their Health

Items (Multiple Responses Apply)	Frequency	Per cent
Eat a lot of Vegetables and fruits	314	76.0
Self-care and Personal Hygiene	372	90.1
Regular Exercise	311	75.3
Buy drugs to treat ailments at home	178	43.1
Go for a medical check-up	217	52.5
Fasting	76	18.4
Eat a lot of proteins/ dairy products	224	54.2
Chat and make a lot of calls all day	266	64.4
Take supplementary nutrients	98	23.7
Engage in physical activities	285	69.0

Source: Fieldwork, 2023

The multiple responses revealed that 314 (76.0%) eat a lot of vegetables and fruits, 372 (90.1%) engage in proper self-care and personal hygiene, while, 311 of the respondents representing 75% engage in regular exercise, with 285 of the respondents representing 69.0% participate in physical activities. Thus, on average, 72 % of the respondents engage in physical fitness activities which could assist in the prevention of non-communicable diseases and other illnesses among Social Studies and Education undergraduates in the state. Also, the study found that 217 of the respondents representing 52.5% often go for a medical check-up in both public and private health facilities. This shows that not more than half of the respondents could afford to go for medical check-ups, whereas, 76 respondents representing 18.4 % engage in voluntary fasting as a strategy for health promotion. In an interview conducted, one of the interviewees (student) noted that:

Most students find it difficult to engage in voluntary fasting due to their nature of studies, commitments and other life schedules.

Another interviewee submits that:

Students are aware of the health benefits of voluntary or religious fasting. However, the training of the mind to get accustomed to it is what matters. Added to this, students oftentimes engage in voluntary fasting when their parents, friends or significant others do the same.

Furthermore, the study found that out of 413 respondents, 266 of the respondents representing 64.4% eat protein and dairy products, while 98 of the respondents representing 23.7% take nutritional supplements such as amino acids, fatty acids, enzymes, probiotics, herbals, botanicals and animal extracts among others. Also, a total of 266 (64.4%) of the respondents engage in chatting and making several calls all day and 178 (43.1%) of the participants use to buy drugs to treat ailments at home. This implies some of the students could fall victim to addiction or drug abuse as well as the wrong treatment of ailment. Added to this, an interviewee recounted that:

Self-medication is a common practice among medical professionals and non-medical professionals for the fact that drugs are accessible to all. Sometimes, people decide to treat minor ailments at home to avoid the cost and unnecessary medical investigations.

Another interviewee (student) noted that:

Not all individuals who practice self-medication are illiterate, but, do so to cut the cost of medication. Mostly, it is used to treat ailments such as headaches, malaria, cough and others. Added to this, the interviewee said that, the practice of self-medication is triggered by drug hawkers, registered and unregistered proprietors and patent medicine vendors, and weak law enforcement agents among others.

Research Question Two: What are the things Social Studies and Education Undergraduates avoid in order not to fall sick or ill? The findings of this research question are presented as follows:

Table 2: Things undergraduates avoid in order not to fall sick or get ill

Items (Multiple Responses Apply)	Frequency	Per cent
Sleep late at night	135	32.7
Take alcohol to relax	137	33.2
Eat Food that contains high fat and oil	112	27.1
Eat fast and junky foods (e.g., Indomie, Hamburgers)	110	26.6
Have sex with multiple partners	327	79.2

Source: Fieldwork, 2023

By human nature, sleep plays a central role in the brain and overall body functioning. Based on the study, it was revealed that only 135 of the respondents representing 32.7% avoid sleeping late at night. This indicates that the majority of the youths in the study sleep late at night. Probably, this could be linked to low cost and favourable subs available for night chatting, browsing and video streaming as well as reading for exams. According to an interviewee (male), he said that:

My social life has oftentimes affected my sleeping time at night. Most times, I chat and make calls at night, because, that is the time my friends are free from daily work and other activities. I often go to bed by 1:00 a.m. and wake up by 4:30 a.m./5:00 a.m. to prepare myself and continue with learning and other daily activities. Though, I used to have some sleep in the daytime.

Another interviewee (female student) at Kaduna State University noted that:

My sleeping hours at night are unstable because, I need more time to study at night based on the nature of my course, that is, Chemistry. I hardly sleep for 4 hours at night because I have a lot to cover and assignments to do on the Internet. However, when school was on break, I used to sleep all day at home. I hardly chat or make calls at night. I spend most of the time reading and goggling information about my programme and assignments.

Another interviewee (Student and Self-employed) reiterated his sleeping habit and said: I have a big shop located in the city's busy area of Kawo area, close to the Motor Park, Kaduna metropolis. I used to go to bed by midnight... sometimes my customers kept me awake. You know, customers need your attention; some of them, only run out of the basic commodities at night and have to run to your shop to get those things. Even, when you decide to close the shop, some will later call you on the phone, while, others, will text you or knock on your door. Oftentimes, I have disrupted sleep at night, especially, during Ramadan (Muslim Fasting period) and festive periods.

Furthermore, 137 respondents representing 33.2 were found to engage in taking alcohol to relax or while away their time. This implies the majority of students do not drink or use alcohol during their leisure time. Probably, this is associated with the cultural and religious practices in the study area. In one of the interviewees' opinions:

The use of alcohol is highly restricted in the Muslim-dominated area in the Kaduna metropolis. In recent times, the Local Government Chairman of Sabon-Gari of Kaduna state signed a bill that prohibits the sale and consumption of alcohol as well as closed all the brothels in the area.

Another interviewee (civil servant) said:

Although alcohol is very low in circulation in the Muslim-dominated area, the use of other drugs and substances is highly patronized among students.

Also, 112 respondents representing 27.1% avoid eating food that contains high fat and oil. Eating food with high fat and oil could lead to heart disease, and obesity among others. In an interview with a female student of Shehu Idris College of Health Sciences and Technology, Makarfi stated:

Some of the things we eat that contain fat and oil are not subjected to a clinical investigation that will provide information on the amount of fat and oil contained in them. Similarly, I think, many people just eat food to satisfy their taste not hungry, therefore, the issue of knowing the contents of fat or oil in the foods is secondary to them. That is why some young persons are obese, while, others suffer from ailments relating to the food they consume daily.

Another interviewee (male, 25years) from Giwa Local Government Area narrated that:

I eat food that contains fat and oil not minding the content. You know whenever you are hungry, you do not focus on the content or rules and regulations for intake of fat or oil, but, you are more concerned about filling your Tommy. I can tell you that very few Nigerian students are concerned about regulating what they eat. Most especially, in the rural area, we have less knowledge of things like that.

Moving forward, only 110 (26.6%) of the respondents avoid eating fast and junky foods. In other words, the majority of the students who participated in the study eat junk food or fast foods such as Pizza, Egg rolls, Noodles, Chocolate, Pastries and Chips, among others. To buttress the findings further, an interview was conducted with 300 male students in the

Department of Arts and Social Science Education of Ahmadu Bello University, Zaria and the students affirmed that:

I always visit the social centre (the place where restaurants are located in the university) daily to have my lunch. I can tell you that I prefer eating Noodles and eggs all the time because it keeps me going and I only drink water for the rest of the day until I get back to have dinner. It is easier to get and sweet to eat. You know, as a student, I like easy life and chilling.

Another interviewee (female student, 26 years) married with two kids at Anguwan Juma Zaria said that:

We women don't like to stress ourselves nowadays, so, if there is money in the house, I buy noodles and pastries, that is what we eat most times with the children and they enjoy it very well. I always cook Indomie for my daughter as break food at school. Sometimes, I give her a Biscuit and juice.

In an interview with health personnel, (48 years) at Kaduna State Ministry of Health noted that, junk foods contain low nutrients such as vitamins, minerals and fibre, whereas, they contain high kilojoules, saturated fats, added sugar and salt, which are often unhealthy for children and adults. Hence, junk foods are not required as part of any diet or nutritional value. He added that young persons, who intend to control their weight, should eat junk food occasionally and in a small quantity of it, while, those who want to lose weight should limit their eating of junk food. Based on my knowledge of junk foods according to research findings, eating junk foods always could lead to an increased risk of obesity in children and adults, as well as, chronic diseases such as type II diabetes, cardiovascular diseases, cancer and more.

The study revealed that 327 of the respondents representing 79.2% avoid having sex with multiple partners as a means of maintaining their health. Thus, this could be attributed to, the knowledge level, and religious and cultural practices of the students in the study area. On the other hand, an interviewee (Male Student) reiterated that:

Some students nowadays abstain from multiple sex partners to avoid contracting HIV/AIDs and STIs. However, they engage in other sexual practices such as masturbating and sex chatting with an intimate partner(s).

Another interviewee (female) said:

Young men than women have more multiple-sex partners and this could be a result of the vulnerability of the female gender in society. Added to this, some ladies practice this to be able to provide for their needs at home and school especially those from poor families and out of their family residence.

Discussion of Findings

The study found that social studies and education student promote their health through eating a lot of Vegetables and fruits, self-care and personal hygiene, regular exercise and physical activities as well and going for medical check-ups. This implies that most of the

respondents engage in positive health promotion behaviour and this could help in the proper function of the brain, ease digestion, assist in weight control, and overall well-being of the students. This concurs with the submissions of Mintah, et al (2012); Sarkar (2013); Usman et al (2016); Silva, et al (2017); Amao (2018); Al-Rifaai, et al (2018); Agbor, et al (2018); Gea-García, et. al (2020); Johnston (2021) which submitted that fruits and vegetables, self-care and personal hygiene help improve overall health, protect the vital organs of the body, assist in weight control, and promote healthy skin and hair, assist in the proper functioning of the brain as it stimulates the memory recall, supplies the human body with fibre needed for a healthy digestive system. Also, regular exercising and physical activity (PA) contribute to the prevention of chronic diseases such as obesity, metabolic syndrome or cardiovascular diseases, and are also directly related to the individual's physical fitness.

The study found that most of the students engage in healthy habits such as brushing and flossing their teeth regularly, basic manicures and pedicures, menstrual hygiene, armpit and bottom hygiene, washing and combing the hair, bathing regularly, and washing clothes among others. This could be attributed to the student's knowledge or level of education. This agrees with the findings of Sarkar (2013); Al-Rifaai, et al (2018); (Idyorough, 2019) who reported that the health and personal hygiene knowledge of students significantly improved after education.

However, few students that participated in the study engage in voluntary fasting and taking supplementary nutrients which are very important in promoting the health of individuals. According to Salahuddin, et al (2014); Horne, et al (2015); Ganesan, et al (2018); Benson, (2021) fasting help in lowering triglyceride levels (leftover calories that are turned into a kind of fat which is stored in the fat cells for later use in the body. Added to this, the study found that the students used to buy drugs to treat ailments at home. This implies some of the students could fall victim to addiction or drug abuse as well as the wrong treatment of ailment. As noted by Afolabi (2008); Yusuf and Omarusehe (2011); Bertoldi et al (2014); Akande-Sholabi, et al (2021) studies revealed that between 52.2 % and 55% of the Nigerian population purchase their medicines for self-medication through patent medicine stores. Added to this, self-medication is related to wrong diagnosis, delay in seeking medical advice when needed, infrequent but severe adverse reactions, dangerous drug interactions, wrong drug usage and administration as well as dependency and abuse of drugs.

On the other hand, the students were found to eat a lot of protein/dairy products which is needed for the body to grow well. Thus, eating proteins helps in maintaining balanced energy, effective bone and cardiovascular functioning and speedy wound recovery. This concurs with the submission of Baum, et al (2020) that the intake of protein and dairy products helps maintain energy balance, improve bone health and cardiovascular function as well as aid in wound healing. However, WHO (2015); Thorning, et al (2016); and NAFDAC (2020) studies revealed that eating a lot of protein and processed dairy products is linked to an increased risk of heart disease, stroke and cancer.

Similarly, the study found that more than half of the students engage in chatting and making calls all day. This implies that most of the respondents spend vital hours of the day and night using their mobile phones as a result of a lack of strong commitments to academics, occupation, and other activities of daily living. According to Ostrov, et al (2014); Souza, et al (2016); Tanaka and Tamura (2016); Dunda (2017); Umar (2017); Usman, et al (2019); Shivaji, et al (2020) studies, frequent talking on mobile phones for several hours may result in brain cancer—glioma and acoustic neuroma. Also, youths' use of cell phones at night leads to insomnia and this can result in depression and anxiety. While few of them engaged in taking alcohol to relax or while away their time. This implies the majority of students in the study do not drink or use alcohol during their leisure time. Probably, this is associated with the cultural and religious practices in the study area. This correlates with the finding of Agberotimi (2021) which indicated that the rates of alcohol use significantly differ across geographical regions in Nigeria. Alcohol use was found to be high in the south-south region and north-east, while, low in the northwest (Kaduna state inclusive) and southwest region respectively. A probable explanation for this difference could be socio-cultural and religious factors and ease of access to alcohol.

An overwhelming number of the respondents were found to participate in eating junk food or fast foods such as Pizza, Egg rolls, Noodles, Chocolate, Pastries and Chips, among others. This is further supported by the qualitative findings found that" many people just eat food to satisfy their taste, not hunger, therefore, the issue of knowing the contents of fat or oil in the foods are secondary to them. That is why some young persons are obese, while, others suffer from ailments relating to the food they consume daily". It is further revealed that very few Nigerians are concerned about regulating what they eat. Most especially, in the rural area, we have less knowledge on things like that". This concurs with the findings of Omonon and Freddy (2015); Fuhrman (2018); Chen, et al (2020); Usman, et al (2019); Chaudhary, et al (2020); Dougherty et al. (2020); Corazza, et al (2021); Opuba and Onyango (2022) revealed the relationship between processed food/ fast food and increased risk of cardiovascular diseases, coronary heart diseases, cerebrovascular diseases, hypertension, and metabolic syndrome among others.

The study showed a majority of the respondents do not have multiple sex partners to maintain their health. In other words, the students who participated in the study did not engage in risky sexual practices. Furthermore, the qualitative finding revealed that "some students nowadays abstain from multiple sex partners to avoid contracting HIV/AIDs and STIs. However, they engage in other sexual practices such as masturbating and sex chatting with an intimate partner(s)". The findings are in line with what the National Health Demographic Survey (2018) reported which revealed that only per cent of women aged 15-49 have two or more sexual partners, while nine per cent of women reported having sexual intercourse with a person who neither was their husband nor lived with them, and fewer than 4 in 10 of those women (36 per cent) reported using a condom during the last sexual intercourse with such a partner among others.

Conclusion

In conclusion, the research undertaken to investigate the HSB among undergraduates of Social Studies and Education in Kaduna State has shed light on crucial insights that can significantly contribute to the enhancement of the learning process in the state. The findings of this study have illuminated the various dimensions of students' attitudes and actions related to their health, providing an understanding of how these behaviours intersect with their educational journey.

Through the data collection and analysis, we have discerned that the HSB of undergraduates is a multifaceted phenomenon influenced by a variety of factors including awareness, accessibility, cultural beliefs, and personal experiences. This investigation has highlighted both the strengths and areas for improvement within the current landscape of health practices among the target demographic. Addressing HSB can contribute to an enriched learning environment. By fostering a culture of proactive health engagement, educational institutions can facilitate not only physical well-being but also cognitive development, ultimately leading to improved academic outcomes.

The implications of this study extend beyond the immediate scope of health practices. They point towards a need for collaborative efforts between educational authorities, health institutions, and policymakers to integrate health-social work seamlessly within the academic framework. Such efforts could involve workshops, awareness campaigns, and accessible healthcare facilities tailored to the specific needs of undergraduates in the fields of Social Studies and Education.

While this research provides valuable insights, it also acknowledges its limitations. The study's focus on a specific faculty and academic discipline might not fully capture the diversity of health behaviours in broader contexts. Nevertheless, the findings present a foundation upon which further research can build to explore other demographics, deepening our understanding of the intricate relationship between health behaviours and the learning process. By recognizing the interconnectedness of health and learning, educators, policymakers, and healthcare providers can collaboratively work towards refining educational practices, thus nurturing the holistic growth of students and paving the way for a more effective and enriched learning process.

Recommendations

Based on the insights gained from the investigation into HSB among undergraduates of Social Studies and Education in Kaduna State, the following recommendations are proposed to enhance the learning process and promote holistic student development:

- i. Educational institutions should collaborate with health experts to incorporate health social work modules into the curriculum. These modules can cover topics such as preventive measures, mental health awareness, nutrition, and accessing healthcare services. By integrating health social work, students can develop a better

understanding of their well-being, which will positively impact their overall learning experience in Kaduna State and the country at large.

- ii. Universities and colleges should collaborate with healthcare providers to establish accessible and student-friendly health services on campus. This could include medical clinics, mobile health apps or online resources, counselling centres, and health workshops. These services should be tailored to address the specific health needs and concerns of undergraduates in Kaduna State.

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