

## **Influence of Demographic Factors on the Lifestyles of Tertiary Institutions Students in Kwara State, Nigeria: Educational Media and Counseling Interventions**

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**Abstract:** This study investigated the influence of demographic factors on the lifestyle of students of tertiary institutions in Kwara State. The research design adopted for the study was descriptive survey. The study population comprised all students of government-owned tertiary institutions in Kwara State. A sample size of 750 students out of the 1050 students selected through a multi-stage sampling technique participated in the study. Data were collected from the sample through a questionnaire designed by the researchers titled Demographic Factors and Students Lifestyle Questionnaire (DFSLSQ). The data collected were analysed with the use of simple percentage, frequency count, ranking means and student t-test statistics. Four research hypotheses were generated and tested at 0.05 alpha level of significance. The findings of the study revealed that age and marital status had significant influence on the respondents lifestyles while mode residence and type of institutions had no significant influence on their lifestyle. It was recommended among others that Health Counseling Services (HCS) should be provided in institutions of higher learning in order to promote healthy life style among students. Such counseling could be routed through Educational Media Technology such as Campus Radio Broadcast, Campus e-Portal, Close Circuit Television, Campus Bulletin, Posters etc.

**Key words:** Influence, demographic factors, lifestyle, tertiary institutions, fat food, Nigeria

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### **INTRODUCTION**

Lifestyle are patterns of behavioural choices made from the alternatives that are available to people according to their Socio-economic circumstances and the ease with which they are able to choose certain ones over other (Molarious *et al.*, 2007). Lifestyles are the behaviours of choice which affect ones fitness and health status. The individual lifestyles or health habits constitute what he does and what he fails to do such exercising reading, dancing, smoking, overeating, inactivity alcoholism, drug abuse and indiscrimination sexual practices (Shehu, 2005).

The range of choices available to the individual is a function of education, relationships, socialization, personality, physical and mental ability, situational factors and goals, financial and other material resources (Oygaard and Anderssen, 1998). Healthy lifestyle is defined by the interaction between choices and habit of individuals with different social locations, susceptibilities and exposure to risks (Shehu *et al.*, 2010). The spent indoors or outdoors and the sort of neighborhood one

lives in are factors related to lifestyle as much as habits of diet, exercise, drug and alcohol consumption. A healthy lifestyle can help prevent for example, weight gain, high blood pressure, diabetes arthritis, stress and early mortality. On the other hand, the cumulative effects of unhealthy lifestyles begin to produce noticeable differences in the health of the persons who are physically inactive and or were heavy smokers and consumers of alcohol versus those who were not.

When students first enter college, their diets often deteriorate and they often gain weight (Haveman *et al.*, 2003). The weight gain may be related to sedentary lifestyle and changes in food intake and dietary patterns. Irregular class schedules, part-time jobs and varied homework loads can disrupt eating patterns among that college student leading to unhealthy habits may be hard to break. The scenario described is also applicable to all other lifestyle of drug abuse, alcohol consumption, physical activity, indiscriminate sexual practices and most recently the use of customized campus dresses and mobile phones (Shehu *et al.*, 2010). Alemu and Lindtjorn (1995); Haveman *et al.* (2002) shown that lifestyle of

individuals is influenced by a variety of external and internal factors based on the complex interactions between the individual and their immediate environment. The social environment plays a decisive role in the individual's capacity to maintain, promote healthy and prevent disease (Oygar and Anderssen, 1998; Dahl and Elstad, 2001). Environment is considered a crucial factor in the health and well being of individuals. Everything within the environment ranging from air, water and chemical products have tremendous impact on the well being of the individual. This is in addition to the demographic variables of age gender, marital status, type of institution, religious, socio-economic status and educational background that influence the health of individuals.

Among the demographic factors residence seems to be a major determinant of lifestyle since urban residents have a 1.5-4 fold prevalence of lifestyle factors like smoking heavy alcohol use, sedentary lifestyle, drug abuse, misuses and unsafe sexual practices compared to their rural counterparts especially among the middle-aged individual and adult in the community (Davis *et al.*, 1994; Mackenbach *et al.*, 1994).

The use of automobiles, telephone facilities, mobile phones, household technological gadgets has substantially increased the sedentary lifestyle of the urban residents (Johansson and Sundquist, 1999). Rural populations rely upon foot walk as a means of transportation and often have intense agricultural activities as their main occupation. Rural dwellers therefore have a high physical activity related energy expenditure compared to urban subjects (Johansson and Sundquist, 1999). This explains the higher ratio of obesity, hypertension and other cardiovascular disease in the cities.

Another demographic factor is gender lifestyle factors such as physical inactivity, dietary habits, smoking and alcohol intake are related to relative weight in both men and women Molarious *et al.*, (2007) shown a prevalence of obesity by gender and age group among their study population (i.e., 12% of men and 14% of women were obese), For instance in Sweden, women are often smokers than men except among the elderly 65-74 years (Ferrucci *et al.*, 1999). Gender disparities in health are often linked to differences between men and women exposure in lifestyle factors. The influence of marital status on lifestyle factors have not been extensively research on but one observed that the use of alcohol, cigarette smoking among the teenagers than their married counterparts. Some teenagers in institution of higher learning are seen using different stimulates as mood elevator in social functions and to improve their

academic and sports performance in schools. Leslie *et al.* (2001) described the decreasing prevalence of physical activity participation over the young adult years and the patterns of difference in the physical activity habits of young men and young women in tertiary institution and suggested interventions to promote physical activity using mass media, print media and information technology.

This study therefore aimed at examining the influence on the demographic factors stated above on the lifestyles of these teenagers in tertiary institutions of learning in Kwara State, Nigeria.

**Statement of the problem:** In Nigeria, many of the students in higher institutions are adolescents and some of them engage in various risky behaviours such as smoking, reckless driving, premarital and indiscriminate sexual activities and drug abuse and misuse (Adegoke, 2003). In 2000, the World Health Organization shown that while Japan has an average life expectancy of 74.5 years, Nigerians has 38.3 years. Also, The World Bank (2010) world development indicator showed that Nigeria has an average lifespan of 46.8 years age in 2007 which is far below the World average age of 100 years. The high rate of deaths in Nigeria, especially among the youths may not be unconnected with the unhealthy lifestyle adopted by them. In order to reduce needless premature deaths and promote longetivity, a study of this nature is therefore relevant.

This study would provide information on common unhealthy lifestyle among students of tertiary institution in Kwara State and compare their lifestyles based in identified demographic variables of gender, age mode residence and marital status. The findings of the study will benefits health professionals, Educational Technology experts, Education counselors, college administrators and teacher in promoting positive healthy lifestyle among students of tertiary institutions.

**Research questions:**

- What are lifestyles of students in tertiary of institutions in Kwara State?
- Do gender, mode of residence (On and Off campus and marital status influence the lifestyles of students of tertiary institutions in Kwara State

**Research hypotheses:**

- There is no significant difference in the lifestyle of students of tertiary institutions in Kwara State, Nigeria based on gender
- There is no significant difference in the lifestyle of students of tertiary institutions in Kwara state Nigeria based on mode of residence

- There is no significant difference in the lifestyle of student of tertiary institutions in Kwara State, Nigeria based on marital status

**MATERIALS AND METHODS**

The research method adopted for the study is descriptive survey. This involved collection of data from the students of tertiary institutions in Kwara State with the use of structured research questionnaire shown by the researchers. The estimated population of students of tertiary institutions in Kwara State was 48,695 (Kwara State Government of Nigeria, 2009). There are 8 government owned tertiary institutions in the state namely University of Ilorin, Kwara State University, Molete, Kwara State Polytechnic, Ilorin, Federal Polytechnic, Offa; Kwara State college of Education Ilorin; Kwara State college of Education, Oro; Kwara State College of Education (Technical) Lafiagi and College of Arabic and Islamic Legal Studies, Ilorin. About 3 tertiary institutions, one from each of the three constitutionally recognized senatorial districts of the state were selected using stratified random sampling techniques. These are university of Ilorin (Kwara Central Senatorial District), Federal Polytechnic, Offa (Kwara South Senatorial District) and Kwara State College of Education (Technical) Lafiagi ( Kwara North Senatorial District in Nigeria).

A total of 865 questionnaire forms were administered to the students of the three selected institutions out of which 600 questionnaire forms were validly completed and returned. A return rate of 70.1% was obtained which is considered adequate for the study. The instruments were distributed to the respondents with the support of students affairs divisions of the selected tertiary institutions. The instrument administered consist of section A and B. Section A elicited demographic data while section B sought information on respondent’s lifestyles as related to smoking, alcoholic, drug habit, physical activity, sexuality, driving habit, dressing, nutritional habit and use of mobile phones.

The instrument was validated by five lecturers in the Departments of Human Kinetics and Health Education, Counselor Education, Community Health, Sociology and Geography in the University of Ilorin. The reliability of the instrument was conducted with the use of Split-half reliability procedure. A correlation coefficient of 0.63 was obtained. The 3 hypotheses postulated for the study were analyzed with the use of descriptive mean and inferential statistics of students t-test.

**RESULTS**

Table 1 shows the data on the lifestyles of the respondents based on gender. The Table 1 shows a calculated t-value of 2.74 and a critical t-value of 1.96 at

Table 1: Means, standard deviation and t-value on respondents lifestyles based on gender

Variable gender	No	X	SD	Df	Cal t-value	Crit t-value
Male	341	103.22	12.41	598	2.74	1.96
Female	259	73.22	13.77	-	-	-

Significant of 0.05 alpha level

Table 2: Means, standard deviation and t-value of respondents based on mode of residence

Variable mode of residence	No	X	SD	Df	Cal t-value	Crit t-value
On campus	357	77.98	13.62	598	3.03	1.96
Off campus	243	108.95	9.99	-	-	-

Significant at 0.05 alpha level

Table 3: Means, standard deviation and t-value on respondents lifestyle based on marital status

Variable marital status	No	X	SD	Df	Cal t-value	Crit t-value
Married	248	41.64	8.09	598	0s.19	1.96
Single	352	41.76	6.20	-	-	-

0.05 alpha level. This indicates a significant difference in the lifestyles of respondents based on gender. Table 2 shows the data on respondents lifestyles based on mode of residence. (On campus and Off campus). The Table 2 shows a calculated t-order of 3.03 and a critical t-order of 1.96 at 0.05 alpha level. The Table 2 indicates a significant difference in the lifestyles of respondents based on mode of residence.

Table 3 shows the data on the lifestyle of the respondents based on marital status difference. The Table 3 indicates a calculated t-value of 0.96 and a critical t-value of 1.96 at 0.05 level. This shows no significant differences exists in the lifestyles of respondents based on marital status difference. Test of hypothesis one, two and three are shown in Table 1-3.

**DISCUSSION**

The respondents had very high means in lifestyles that are related to unhealthy usage of mobile phones, nutrition and dressings and had low means in life-styles that are related to unhealthy physical ac inactivities, smoking and reckless driving.

The study indicated significant difference in lifestyles of students of tertiary institutions in Kwara State based on gender. These findings may be related to the fact that adolescent males take higher risk compare to their female counterparts. The finding is related to Adegoke (2003) view that male adolescents are more involved in risk behaviour than the female adolescents. Females were more often than males trying to avoid fat food and to eat fiber-rich food. Further differences in

health status and lifestyle between male and female students in Kwara State tertiary institutions have been attributed to gender-specific health and longevity-related behaviour. For example females are more likely than male to describe themselves as non-drinkers and non-smokers, yet they are less physically active (Ferrucci *et al.*, 1999). Gender disparities in health are often linked to differences between men and women in exposure to lifestyle factors. Shehu (2005) shown that heavy use of alcohol and drug abuse are very common among men especially young men than women especially in Nigeria cities. Dietary attitudes of respondents shows a similar patterns as heavy alcohol use and drug abuse. The finding that indicated significant difference in lifestyle of students of tertiary institutions in Kwara State based on gender is accordance with all the submissions from previous researchers as stated above.

The study indicated a significant difference in the lifestyles of students of tertiary institution in Kwara State based on mode of residence. The off-campus students were more involved in the unhealthy lifestyles than the on-campus students. This study may be connected to the restricted life on campus. Students on campus are governed by institutional rules and regulations while off campus students live a free life after leaving the school premises.

This finding may be linked with two findings of Haveman *et al.* (2002) and Alemu and Lindtjorn (1995) in which the researchers shown that urban lifestyle (like on campus lifestyle) in Nigeria and Africa is characterized by changes in dietary habits involving an increase in consumption of refined sugars and saturated fat and a reduction in fibre intake. Majority of the students (88.2%) depends on imported and refined food nutrients with little nutrient values which may have adverse effects on their well being (Shehu, 2005). Mode of residence is shown in this study as an important determinant of individual lifestyle. It is important to state categorically that the rates of drug abuse and drug trafficking is more pronounce amongst the urban dwellers than the rural dwellers. Also the higher prevalence of unsafe sexual practices as lifestyle factors in the cities in Kenya, South Africa and Nigeria accounts for the incidence of sexually transmitted diseases and HIV/AIDS in the areas (Johansson and Sundquist, 1999). The respondents used for this study submitted that alcohol consumption and wearing of obnoxious dresses are common among the off campus students as compared to their counterparts living on campus governed with rules and regulations. It is therefore true that one's place of abode is a significant factor in the determination of adopted lifestyle factors (excessive eating, indiscriminate sexual practices, use of mobile phones, dressing, anxiety and stress, alcoholism,

drug abuse, sedentary lifestyle and smoking). There is no significant difference in the lifestyle of students of tertiary institution in Kwara state based on marital status. This finding may be related to the fact that students irrespective of marital status usually behave alike. More importantly only few students usually indicate their marital status as married while on campus. They engages in different lifestyles so as to satisfy their ego.

Corroborating this finding on marital status, Davis *et al.* (1994) found that being single was associated with high physical activity levels, eating of fast foods, drug abuse and wearing of obnoxious dresses. The respondents used for this study believed that being singles gives them opportunity to explore and enjoy their environment.

This they failed to realized has adverse effects on their health and longevity. The adoption of position lifestyle will go along way to promote and maintain sound and optimal health of the respondents.

## CONCLUSION

Lifestyle is generally considered a personal issue. The concept of lifestyle has been proposed as a bridge between individual and his immediate environment, reference is then made to healthy and unhealthy lifestyle. Students of higher institution engage in a number of lifestyle factors occasioned by their new social environment. The adoption of these lifestyle factors of smoking, reckless driving, abnormal dressing, use of mobile phones and sedentary lifestyle influence their unhealthy lifestyle.

Their involvement in these lifestyles influence their academic and sports performance. On the other hand, adoption of unhealthy lifestyle among the students are likely to cause unnecessary stress, protests, cancer, high blood pressure, social vices and other health problems.

## RECOMMENDATIONS

Based on the findings of the study. It is recommended here:

- It is recommended that students should be enlightened on healthy lifestyles and the need to adopt healthy lifestyles in their daily activities. These students should engage in physical exercises and relaxation in order to reduce stress anxiety and boredom which are common in tertiary institutions
- Counseling centers should be established in tertiary institutions to provide information to students on healthy lifestyles and the need to avoid risky behaviour

- Tertiary institutions should be equipped with Educational Media infrastructure such as Campus Radio Broadcast, Close Circuit Television, University Portal, Campus Bulletin, Posters and print media and information technology as interventions through which students could be properly educated and enlightened on healthy physical activities and lifestyles

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