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The Journal of Health Education and Sport Science (JOHESS) is a scientific and professional journal published by the Department of Physical and Health Education, University of Maiduguri. The Editorial Board accepts and publishes scholarly papers across a wide range of health and science related topics in the following areas:

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PREVENTIVE MENTAL HYGIENE OF SECONDARY SCHOOL STUDENTS IN NSUKKA LOCAL GOVERNMENT AREA OF ENUGU STATE

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University of Nigeria, Nsukka

Abstract
In an attempt to determine the preventive mental hygiene practices of secondary school students, data generated from researchers' constructed questionnaire for 420 students were analysed by computer. The preventive mental hygiene practices included watching films (TV programmes), listening to music, travelling as source of deriving happiness; activities for managing personal problems included paying, seeking advice from parents and teachers, and confiding in friends; activities adopted in adjusting to problems included eighthing in discussion, visiting people and engaging in games. Statistical analysis of data revealed that there was significant difference in the mental hygiene practices of urban and rural students regarding source of happiness, activities for managing personal problems and practices students adopt in adjusting to their problems. Similarly, significant difference existed in the preventive mental hygiene practice of male and female students regarding activities for managing personal problems and practices students adopt in adjusting to their problems. The study concluded that the home and school environment should be made more conducive for students to prevent or reduce mental discomfort, instability and stress.
Introduction

The importance of mental health to individuals especially secondary schools students such as those in Nigeria cannot be overemphasized. For this reason, many countries including Nigeria have made mental health part of the school health education curriculum.

Mental health, an aspect of the total health, is the capacity of the individual, or individuals to interact with one another as well as the environment in ways that promote subjective well-being, the optimal development, use of mental abilities, the achievement of individual and collective goals (Denneratain, Astbury and Morss, 1993). Schreiner (1979) described mental health as a condition, which an individual has found a reasonable measure of peace with himself and with the environment. It involves an individual’s ability to use his capability and talents fruitfully, experiencing a sense of belonging and security, a sense of being respected and feeling that he is liked, loved and wanted.

Sometimes, it is not always possible for an individual to have or maintain mental stability. Factors responsible may be rooted in the environment, culture or it may be hereditary. Therefore, no individual can claim to have and maintain optimal level of mental health because each day, individuals keep seeking self gratification and the experience of pleasant emotions that accompany gratification of self. Since mental health is difficult to be achieved or maintained due to unending stresses in the environment, skills or practices or measures or strategies are needed which when adopted or applied, consciously or unconsciously will invariably prevent or reduce stress and anxiety, and promote health or restore mental stability. These practices, measures or strategies are collectively described as mental hygiene practice.

Chauhan (1981) describes mental hygiene as the process, which deal with attaining mental and preventing mental illness. Longton, Allen and Waxler (1961) conceived mental hygiene as a process by which groups and individuals aid in the prevention of mental illness and in the promotion of mental health. Ayorinde (1981) pointed out that mental hygiene involves all sorts of physical, intellectual, emotional, social and spiritual adjustments. Therefore,
mental hygiene practices as used in this study refer to those techniques, measures, strategies or captivities utilized by secondary school students in order to reduce stress and anxiety, and thus enabling them to cope with environmental, social and intellectual stresses. These practices foster and promote a high level of mental stability. Mental hygiene practices could be preventive, promotive or restorative. This study, therefore, focuses on the preventive mental hygiene practices of secondary school students in Nsukka Local Government Area (LGA) of Enugu State.

The study was primarily designed to identify preventive mental hygiene practices of secondary school students in Nsukka LGA of Enugu State. Specifically, the study sought to find answers to the following questions:

1. What are the students' sources of happiness?
2. What activities do students participate to relieve tension?
3. What activities do students use to manage personal problems?
4. What practices do students adopt to adjust to their problems?

Hypotheses

Two hypotheses were formulated for the study thus:

1. There is no statistically significant difference (p < .05) in the preventive mental hygiene practices of urban and rural secondary school students.

2. There is no statistically significant difference (p < .05) in the preventive mental hygiene practices of male and female secondary school students.

Methods

The study made use of survey research design to identify the preventive mental hygiene practices of secondary school students in Nsukka LGA of Enugu State. The population for the study consisted of all secondary school students in Nsukka LGA of Enugu State.

The method of simple random sampling of balloting without replacement was utilized to select ten out of the twenty-five...
Secondary schools inNsukka LGA. Similarly, fifty (50) students were randomly selected from each of the ten secondary schools for the study. Therefore the sample of the study comprised 500 students.

The investigators constructed the questionnaires after a thorough review of literature and this served as the main instrument for data collection. Two health education specialists in the Department of Health and Physical Education, University of Nigeria, Nsukka and one specialist in the Department of Psychology of the same University validated the instrument. The split-half method was utilized to establish reliability of the instrument.

The questionnaire consisted of two sections. Section A contained two items on personal data while section B contained four items on preventive mental hygiene practices. The investigators undertook the data collection with the assistance of the Health Education Teachers and or Vice Principals in the respective schools.

The responses from the 420 usable questionnaire copies were entered on computer coding sheets. Thereafter, the Special Package for Social Sciences (SPSS) was employed for data analysis. Percentages were used for the purposes of description and to answer the research questions posed for the study. Chi-square statistic was utilized to test the two hypotheses formulated for the study. The hypotheses were rejected at .05 alpha.

Results

On the sources of happiness for secondary school students, 60.5 per cent claimed they derived happiness from watching films, 54 per cent claimed that they derived happiness from listening to music, 51.7 per cent claimed that they derived happiness from travelling and 44.8 per cent submitted that they derived happiness from visiting friends, and 44.8 per cent indicated that they derived happiness from games and sports (Table 1).
Table 1: Student's Sources of Happiness

<table>
<thead>
<tr>
<th>Sources</th>
<th>Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Watching films (TV Programmes)</td>
<td>254</td>
<td>60.5</td>
</tr>
<tr>
<td>Listening to Music</td>
<td>227</td>
<td>54.0</td>
</tr>
<tr>
<td>Travelling</td>
<td>205</td>
<td>48.8</td>
</tr>
<tr>
<td>Visiting friends</td>
<td>217</td>
<td>51.7</td>
</tr>
<tr>
<td>Games or sports</td>
<td>118</td>
<td>44.8</td>
</tr>
</tbody>
</table>

Regarding activities students participate to relieve tension, 55 per cent indicated that they participated in church activities (such as drama, debate, excursion) to relieve tension while 43.3 per cent indicated that they participate in recreational activities to achieve the same purpose (Table 2).

Table 2: Activities the Student Participate in to Relieve Tension

<table>
<thead>
<tr>
<th>Activities</th>
<th>Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Church Activities</td>
<td>231</td>
<td>55.0</td>
</tr>
<tr>
<td>Recreational Activities</td>
<td>182</td>
<td>43.3</td>
</tr>
<tr>
<td>Education Activities (drama, debate etc.)</td>
<td>220</td>
<td>52.4</td>
</tr>
</tbody>
</table>

Data in Table 3 indicate the practices students use for managing personal problems. About sixty per cent (60.2%) claimed that they pray to manage personal problems, 58.6 per cent indicated that they seek advice from parents and teachers while 50.2 percent indicated that they confide in friends for managing their problems. Additionally, 47.1 per cent indicated that they keep their problems to themselves as a measure of managing their problems.
Table 3: Activities for Managing Personal Problems

<table>
<thead>
<tr>
<th>Sources</th>
<th>Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seek advice from parents and teachers</td>
<td>246</td>
<td>58.6</td>
</tr>
<tr>
<td>Confide in friends</td>
<td>211</td>
<td>50.2</td>
</tr>
<tr>
<td>Prayer</td>
<td>253</td>
<td>60.2</td>
</tr>
<tr>
<td>Keep to oneself</td>
<td>198</td>
<td>47.1</td>
</tr>
</tbody>
</table>

Table 4: Practices Students Adopt in Adjusting to Their Problems

<table>
<thead>
<tr>
<th>Practice</th>
<th>Responses</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visiting people or friends</td>
<td>193</td>
<td>46.0</td>
</tr>
<tr>
<td>Taking a walk or strolling</td>
<td>167</td>
<td>39.8</td>
</tr>
<tr>
<td>Engaging in discussion</td>
<td>197</td>
<td>46.9</td>
</tr>
<tr>
<td>Engaging in games (e.g. chess, etc.)</td>
<td>181</td>
<td>43.1</td>
</tr>
</tbody>
</table>

Table 4 shows the practices students adopt in adjusting to their problems. About 46.9 per cent indicated they engage in discussion, 46 per cent indicated that they visit people or friends while 43.1 per cent claimed they engage in games such as Ludo for adjusting to their problems. Taking a walk or strolling was also indicated. About 39.8 per cent of the students also indicated taking a walk or strolling as a practice used in adjusting to problems.

The chi-square test of no significant difference was applied to test gender and location differences in the preventive mental hygiene practices of students.
Table 5: Summary of Chi-Square Values Verifying the Hypothesis of no Significant Difference in the Preventive Mental Hygiene Practices of Urban and Rural Secondary School Students

<table>
<thead>
<tr>
<th>Practice</th>
<th>Cal. Value</th>
<th>df</th>
<th>P</th>
<th>Tab. Value</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sources of happiness</td>
<td>13.752</td>
<td>4</td>
<td>.05</td>
<td>9.488</td>
<td>Ho: Rejected</td>
</tr>
<tr>
<td>Activities students participate to relieve tension</td>
<td>2.781</td>
<td>2</td>
<td>.05</td>
<td>5.991</td>
<td>Ho: Accepted</td>
</tr>
<tr>
<td>Activities for managing personal problems</td>
<td>11.165</td>
<td>3</td>
<td>.05</td>
<td>7.815</td>
<td>Ho: Rejected</td>
</tr>
<tr>
<td>Practices students adopt in adjusting to their problems</td>
<td>9.311</td>
<td>3</td>
<td>.05</td>
<td>7.815</td>
<td>Ho: Rejected</td>
</tr>
</tbody>
</table>

Results of statistical analysis of data in Table 5 revealed that there was significant difference in the preventive mental hygiene practices between urban and rural students regarding sources of happiness in watching films and listening to music. The table also shows that there was no significant difference between urban and rural students regarding activities they participate in to relieve tension. The table further shows that there was significant difference between urban and rural students in activities they engage in for managing personal problems. Statistically significant difference also existed between urban and rural students in the practices they adopt in adjusting to their problems.

Table 6: Summary of Chi-Square Values Verifying the Hypothesis of no Significant Difference in the Preventive Mental Hygiene Practices of Male and Female Secondary School Students

<table>
<thead>
<tr>
<th>Practice</th>
<th>Cal. Value</th>
<th>df</th>
<th>P</th>
<th>Tab. Value</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sources of happiness</td>
<td>7.727</td>
<td>4</td>
<td>.05</td>
<td>9.488</td>
<td>Ho: Accepted</td>
</tr>
<tr>
<td>Activities students participate to relieve tension</td>
<td>3.844</td>
<td>2</td>
<td>.05</td>
<td>5.991</td>
<td>Ho: Accepted</td>
</tr>
<tr>
<td>Activities for managing personal problems</td>
<td>28.264</td>
<td>3</td>
<td>.05</td>
<td>7.815</td>
<td>Ho: Rejected</td>
</tr>
<tr>
<td>Practices students adopt in adjusting to their problems</td>
<td>15.33</td>
<td>3</td>
<td>.05</td>
<td>7.815</td>
<td>Ho: Rejected</td>
</tr>
</tbody>
</table>
Table 6 shows that there was no significant difference between male and female secondary school students in their sources of happiness and, also in the activities they participate in to relieve tension. The table also revealed that there was significant difference between male and female students in activities they engage in for managing personal problems and also in the practice they adopt in adjusting to their problems.

Discussion

Within the limitation of the study, the students adopted several preventive mental hygiene practices. This finding is not surprising at all because the students are supposed to be exposed to equipment, facilities and conditions both in schools and at home for the practice of these measures. For instance, Table 1 showed that 60.5 per cent of the students watch films (TV programmes). Cady (1985) pointed out that activities such as watching television is a health practice since it promotes relaxation and rest for good living.

Result in Table 2 showed that 55 per cent of the students indicated that church activities were engaged in to relieve tension. The result also revealed that more than half (52.4%) of the students sampled engaged in school activities. This finding is in agreement with that of Sudman (1981) who noted that mental hygiene cannot be completed without an educational effort. This finding was not surprising since almost every student who is opportuned to go to school is at liberty to engage in any school activity of his or her choice.

Praying was a major activity students engage in for managing personal problems. WHO (1948) pointed out that spiritual well being is a vital component of mental health. Dutton (1983) added that religious guiding principles are not devoid of mental hygiene significance. The finding was expected because many people are now becoming more aware of the life. The study further revealed that 58.6 per cent of the students resorted to seeking advice from their parents and teachers in managing their problems. Bears (1975) agreed that problems are
Jointly discussed to try to find out solutions to them and hence the finding was not surprising.

Table 4 revealed that 46.9 per cent of the students engaged in discussion in order to adjust to their problems. This finding was not unexpected because engaging in meaningful discussions helps to keep away mental instability, which is a good practice, according to Knutgen (1989). Chauhan (1981) pointed out that harmonious development is necessary for physical, mental and spiritual capacities of the school child to be able to adjust to problems and fit into the society.

The findings of the study indicate that with the student population used in this study, students adopted various religious, educational, recreational, social and personal measures to prevent stress, anxiety and to keep life going without much problems. This study also showed that significant differences existed in certain preventive mental hygiene practices between urban and rural students and male and female students. School and home environment of students should be made more conducive in order to prevent mental discomfort and instability.

Recommendations

On the basis of the findings, the following recommendations were made:

1. Students should be provided with a health and conducive environment both in school and at home in order to prevent mental discomfort.
2. Students should be provided with adequate facilities and activities that should aim at promoting their mental state. Such activities should include recreational activities, participation in activities of voluntary organisations and clubs in schools; sufficient rest and sleep and activities that make maximum use of their talents at home and school to boost their mental stability.
References


