DOI: https://doi.org/10.67203/jerd.2026.xvc02kgm

CAREER ASPIRATION AS A PREDICTOR OF HEALTH-SEEKING BEHAVIOUR AMONG FEMALE PUBLIC SECONDARY SCHOOL TEACHERS IN OSUN STATE, NIGERIA

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Abstract

Despite increasing emphasis on healthy lifestyle practices such as adequate nutrition, regular physical activity, and routine medical check-ups, unhealthy health-seeking behaviours remain prevalent among working populations. This study examined career aspiration as a predictor of health-seeking behaviour among female secondary school teachers in Osun State, Nigeria. A descriptive survey research design was adopted. The population comprised all female secondary school teachers in Osun State. A sample of 300 respondents was selected from twenty-three secondary schools across five local government areas using a multi-stage sampling technique. The sample size was determined using the Taro Yamane (1967) formula to ensure adequacy and representativeness. Data were collected using validated Career Aspiration and Health-Seeking Behaviour scales. Data analysis was conducted using Pearson Product-Moment Correlation and simple linear regression at the 0.05 level of significance. Findings revealed a significant positive relationship between career aspiration and health-seeking behaviour ($r = .34$, $p < .05$). Career aspiration accounted for approximately 22% of the variance in health-seeking behaviour and significantly predicted it ($\beta = .30$, $t = 5.85$, $p < .05$). This indicates that higher career aspiration is associated with better health-seeking behaviour. The study concludes that career aspiration significantly influences health-seeking behaviour among female teachers. It recommends strengthening career development programmes and workplace health interventions to enhance both professional growth and health outcomes.

Keywords: Career aspiration; Health-seeking behaviour; Female secondary school teachers; Workplace health interventions; Psychological factors

Introduction

Human health is influenced by both biological and behavioural factors. While nature provides the biological foundation of health, nurture involves the behavioural choices individuals make to enhance their health status and prevent avoidable health problems. The health of a nation is closely linked to the health of its population, as healthy individuals constitute a vital asset for national growth and development.

Health extends beyond medical intervention and is largely shaped by individuals' perceptions, attitudes, and behaviours toward maintaining well-being. Contemporary health perspectives emphasise that health is a dynamic state of physical, mental, and social well-being that enables individuals to function effectively and live productive lives (World Health Organisation [WHO], 2022). From this viewpoint, health is not solely the responsibility of healthcare professionals but is actively constructed through informed, deliberate, and sustained behavioural choices made by individuals in their daily lives (Kickbusch, 2021).

One of the major means through which individuals maintain and improve their health is health-seeking behaviour. Health-seeking behaviour refers to any action taken by individuals in response to perceived health needs, including preventive practices, utilisation of healthcare services, and timely consultation with health professionals (Isiaq & Abdullahi, 2025; Salifu & Owoyemi, 2024). These behaviours are considered essential components of a healthy lifestyle and reflect individuals' engagement with available healthcare systems.

Health-seeking behaviour is influenced by socio-demographic and socio-cultural factors such as age, gender, education level, income, occupation, and social networks (Isiaq & Abdullahi, 2025). In many developing countries, including Nigeria, barriers such as healthcare costs, limited access, and concerns about service quality contribute to the delayed use of formal healthcare services and increased reliance on self-medication (Adepoju & Adesina, 2021; Elfaki, 2024). These influences are evident across various populations, including working professionals whose occupational demands may shape health-related decisions.

Although government efforts aim to promote preventive care and health awareness through public health education programmes and primary healthcare services, increased awareness does not always translate into positive health-seeking behaviour. Individuals may remain aware of preventive measures yet delay or avoid seeking professional care due to motivational and behavioural factors (Oche, 2024).

One such motivational factor is career aspiration. Career aspiration refers to an individual's drive and commitment to achieve professional success and advancement, which may include attaining higher qualifications, promotions, or leadership positions. Individuals with higher career aspirations are more likely to invest in their health, recognising that physical and mental well-being are essential for sustaining productivity and achieving long-term professional goals (Umami, 2023; Wangeshi, 2025).

Understanding the relationship between career aspiration and health-seeking behaviour among female secondary school teachers is particularly important, given their dual responsibilities in professional work and family life. This study, situated in Osun State, examines how career aspiration predicts health-seeking behaviour, recognising that good health is fundamental to both career success and overall well-being.

Statement of the problem

Despite awareness of healthy lifestyle practices, many female public secondary school teachers continue to exhibit negative health-seeking behaviours due to occupational demands such as irregular meals, high stress, inadequate rest, and delayed healthcare utilisation. These behaviours increase their risk of chronic health conditions and reduce professional effectiveness.

While socio-demographic and structural factors have been widely studied, motivational factors such as career aspiration, reflecting commitment to professional growth and sustained productivity, remain underexplored.

This study addresses this gap by examining career aspiration as a predictor of health-seeking behaviour, to inform integrated health and career development interventions in the education sector.

Research Questions

The following are research questions raised by the researcher:

i. What is the significant relationship between career aspiration and health-seeking behaviour among female public secondary school teachers in Osun State, Nigeria?

ii. To what extent do career aspirations significantly predict health-seeking behaviour among female public secondary school teachers in Osun State, Nigeria?

iii. What is the effect of career aspiration on health-seeking behaviour among female public secondary school teachers in Osun State, Nigeria?

Hypotheses

The following null hypotheses were tested at the 0.05 level of significance:

1. There is no significant relationship between career aspiration and health-seeking behaviour among female public secondary school teachers in Osun State.
2. Career aspiration does not significantly predict health-seeking behaviour among female public secondary school teachers in Osun State.
3. Career aspiration has no significant effect on health-seeking behaviour among female public secondary school teachers in Osun State.

Literature Review

Career aspiration refers to individuals' goals, ambitions, and expectations regarding their future occupational advancement. It is a dynamic construct shaped by motivation, education, socio-economic background, and institutional support (Al-Bahrani, 2020; Aziz, 2025). Evidence suggests that individuals with strong career aspirations tend to demonstrate higher persistence, self-discipline, and goal-directed behaviour, which enhance both personal and professional development (Mostajeran, 2025). In the teaching profession, career aspiration is

linked to job commitment and professional growth, although research has largely focused on occupational outcomes rather than broader behavioural effects such as health-related practices (Silva & Taveira, 2025).

Health-seeking behaviour involves actions taken to maintain health, prevent illness, or seek medical care. It is shaped by socio-economic, cultural, and structural factors, particularly in developing contexts like Nigeria (Salifu & Owoyemi, 2024). Key determinants include financial constraints, access to healthcare services, and perceptions of illness severity, while women also face additional barriers such as cultural expectations and family responsibilities (Onyemaechi & Ezenwaka, 2022; Onuoha, 2024).

Although both constructs are conceptually different, they may be connected through motivation and goal orientation, as individuals with strong career aspirations may be more likely to prioritise health as a means of achieving long-term success. However, empirical studies examining this relationship remain limited, especially among working women in education.

Theoretically, Social Cognitive Career Theory explains the development of career aspiration through self-efficacy, goals, and environmental influences, while the Health Belief Model explains health-seeking behaviour based on perceived risks, benefits, and barriers. Each theory provides a partial explanation of behaviour; however, their integration offers a more comprehensive framework for understanding how long-term career motivation interacts with health perceptions to influence health-related decisions.

Empirical evidence shows that career aspiration is shaped by academic and socio-economic factors, while health-seeking behaviour is influenced by education, income, and cultural beliefs. However, most studies treat both constructs separately and focus mainly on students or general populations, with limited attention to female secondary school teachers. This reveals conceptual, empirical, and population gaps in the literature.

Therefore, there is a need to investigate how career aspiration predicts health-seeking behaviour among female secondary school teachers in Nigeria, using an integrated framework of Social Cognitive Career Theory and the Health Belief Model.

Methodology

A descriptive survey research design was adopted for the study, as it facilitated the collection of quantitative data on career aspiration and health-seeking behaviour from a large population without manipulation of variables. A multi-stage sampling technique was employed. Osun State

has a total of 489 public secondary schools. At the first stage, five Local Government Areas (LGAs) in Osun State, namely Ilesa West, Ilesa East, Oriade, Obokun, and Atakunmosa East, were purposively selected. At the second stage, twenty-three public secondary schools were randomly selected from the selected LGAs. At the final stage, female teachers were proportionately sampled from the selected schools. The sample size for the study was determined to be 300 female public secondary school teachers using the Taro Yamane (1967) formula for sample size determination:

$$n = \frac{N}{1 + N(e)^2}$$

Where **n** is the required sample size, **N** is the population size, and **e** is the level of precision (0.05). Based on the application of the Yamane formula, a sample size of 300 respondents was obtained. These respondents were selected using a simple random sampling technique to ensure equal probability of selection. Data were collected using a structured questionnaire titled Career Aspiration and Health-Seeking Behaviour Scale (CaHSBS). The instrument was adapted from standardised scales and subjected to a pilot test to establish reliability. Reliability was determined using Cronbach's alpha method. The Health-Seeking Behaviour Scale yielded a reliability coefficient of $\alpha = 0.78$, while the Career Aspiration Scale recorded a coefficient of $\alpha = 0.81$, indicating acceptable internal consistency. Data were analysed using Pearson Product-Moment Correlation and regression analysis at the 0.05 level of significance. Pearson correlation analysis was employed to examine the relationship between career aspiration and health-seeking behaviour, while regression analysis was used to determine the predictive effect of career aspiration on health-seeking behaviour.

Table 1: Socio-Demographic Characteristics of Respondents (N = 300)

Variable	Category	Frequency	Percentage (%)
Age (years)	30–35	63	21.0
	36–40	31	10.3
	41–45	61	20.3
	46–50	62	20.7
	51–55	61	20.3
	56–60	22	7.3
Religion	Islam	86	28.7
	Christian	212	70.7
	Traditional	2	0.7
Marital status	Single	28	9.3
	Married	236	78.7
	Divorced	19	6.3
	Widowed	17	5.7
Years in service	1–5	95	31.7
	6–10	76	25.3
	11–15	58	19.3
	16–20	36	12.0
	21–25	11	3.7
	26–30	24	8.0
Number of children	0–3	176	58.7
	4–7	113	37.7
	8–11	11	3.7

Note. Percentages may not total 100 due to rounding.

Table 1 presents the demographic characteristics of the respondents. The majority were aged between 30 and 55 years, with the largest proportions in the 30–35 years (21.0%), 46–50 years (20.7%), 41–45 years (20.3%), and 51–55 years (20.3%) age groups. Respondents aged 56–60 years constituted the smallest proportion (7.3%). Most respondents were Christians (70.7%), followed by Muslims (28.7%), while adherents of traditional religion accounted for a negligible proportion (0.6%).

Regarding marital status, the majority were married (78.7%), 9.3% were single, and 6.3% and 5.7% were divorced and widowed, respectively. In terms of years in service, respondents with 1–5 years of experience constituted the largest group (31.7%), followed by those with 6–10 years (25.3%) and 11–15 years (19.3%), while respondents with 21–25 years of service represented the smallest proportion (3.7%).

With respect to the number of children, over half of the respondents had 0–3 children (58.7%), 37.7% had 4–7 children, and a small proportion had 8–11 children (3.6%).

Hypotheses Testing

Hypothesis One: Hypothesis One states that there is no significant relationship between career aspiration and health-seeking behaviour among female public secondary school teachers in Osun State.

Table 2: Pearson Product–Moment Correlation Between Career Aspiration and Health-Seeking Behaviour

Variable	M	SD	Health-seeking behaviour	Career aspiration
1. Health-seeking behaviour	55.06	6.74	1.00	
2. Career aspiration	71.88	8.49	.341**, $p < .01$	1.00

Note. M = mean; SD = standard deviation. **p** < .01 indicates statistical significance.

Table 2 presents the Pearson product–moment correlation analysis of the relationship between career aspiration and health-seeking behaviour among female public secondary school teachers. The result shows a positive and significant relationship between career aspiration and health-seeking behaviour ($r = .341$, $p < .01$).

This implies that an increase in career aspiration is associated with improved health-seeking behaviour among the respondents. The relationship, although statistically significant, is moderate in strength, suggesting that while career aspiration contributes to health-seeking behaviour, other factors may also play important roles.

Therefore, the null hypothesis stating that there is no significant relationship between career aspiration and health-seeking behaviour among female public secondary school teachers is rejected.

Hypothesis Two: Hypothesis Two states that career aspiration does not significantly predict health-seeking behaviour among female public secondary school teachers in Osun State.

Table 3: Summary of regression analysis showing the predictive effect of career aspiration on health-seeking behaviour

Model	R	R^2	Adjusted R^2	F	P
1	.47	.22	.21	27.70	< .001

ANOVA

Source	SS	df	MS	F	P
Regression	2976.26	1	2976.26	27.70	< .001
Residual	10602.66	298	35.62		
Total	13578.92	299			

Note. $N = 300$.

Table 3 presents the results of the regression analysis on the predictive effect of career aspiration on health-seeking behaviour among female public secondary school teachers. The model summary indicates a moderate positive relationship between career aspiration and health-seeking behaviour (R = .47). The coefficient of determination (R^2 = .22) and adjusted R^2 (.21) show that career aspiration accounts for approximately 22% of the variance in health-seeking behaviour among respondents.

The ANOVA results reveal that the regression model is statistically significant, $F(1, 298) = 27.70$, $p < .001$, indicating that career aspiration is a significant predictor of health-seeking behaviour. This suggests that career aspiration contributes significantly to the prediction of health-seeking behaviour among female public secondary school teachers.

Therefore, the null hypothesis is rejected.

Hypothesis Three: Hypothesis Three states that career aspiration has no significant relative effect on health-seeking behaviour among female public secondary school teachers in Osun State.

Table 4: Relative Effect of Career Aspiration on Health-Seeking Behaviour

Predictor	B	Std. Error	B	T	P
Constant	20.418	3.856		5.295	< .001
Career aspiration	.241	.041	.303	5.849	< .001

Note. B = unstandardised regression coefficient; β = standardised regression coefficient.

Table 4 presents the results of the regression analysis on the relative effect of career aspiration on health-seeking behaviour among female public secondary school teachers. The findings reveal that career aspiration is a statistically significant positive predictor of health-seeking behaviour.

Specifically, the unstandardised coefficient (B = .241, t = 5.849, p < .001) indicates that an increase in career aspiration leads to an increase in health-seeking behaviour. The standardised coefficient (β = .303) further shows that career aspiration has a moderate positive effect on health-seeking behaviour. The constant value (B = 20.418, t = 5.295, p < .001) represents the expected level of health-seeking behaviour when career aspiration is zero.

Overall, the result implies that career aspiration significantly contributes to variations in health-seeking behaviour among respondents. Therefore, the null hypothesis is rejected.

Discussion of Findings

This study investigated the relationship between career aspiration and health-seeking behaviour among female public secondary school teachers in Osun State. The findings indicate a consistent and statistically significant positive relationship between the two variables.

The correlation analysis revealed a significant relationship between career aspiration and health-seeking behaviour ($r = .341$, $p < .01$), suggesting that teachers with higher levels of career aspiration are more likely to engage in positive health-seeking behaviours, although the relationship is moderate in strength. The regression results further confirmed this relationship, showing that career aspiration significantly predicts health-seeking behaviour, $F(1, 298) = 27.697$, $p < .001$, and explains approximately 21.1% of the variance in health-seeking behaviour (Adjusted $R^2 = .211$).

In addition, the relative effect analysis indicated that career aspiration is a significant positive predictor of health-seeking behaviour ($\beta = .303$, $t = 5.849$, $p < .001$), implying that an increase in career aspiration leads to improved health-seeking behaviour among respondents.

Overall, the findings suggest that career aspiration is an important psychological factor influencing health-seeking behaviour among female public secondary school teachers. Consequently, all null hypotheses were rejected, confirming that career aspiration significantly relates to and predicts health-seeking behaviour in the study population.

Conclusion

This study examined the relationship between career aspiration and health-seeking behaviour among female public secondary school teachers in Osun State. The findings revealed a significant positive relationship between the two variables. Results from the correlation, regression, and relative effect analyses consistently showed that teachers with higher career aspirations are more likely to engage in positive health-seeking behaviours.

The regression analysis further demonstrated that career aspiration significantly predicts health-seeking behaviour, explaining a meaningful proportion of its variation. Overall, the study concludes that career aspiration is an important psychological factor influencing health-seeking behaviour among female teachers. Strengthening career aspiration may therefore contribute to improved health awareness and healthier behavioural choices among teachers.

Recommendations

Based on the findings of the study, the following recommendations are made:

1. Enhancement of Career Development Programmes: School administrators and education stakeholders should provide continuous career development opportunities such as workshops, seminars, and mentoring programmes to strengthen teachers' career aspirations.
2. Improved Health Awareness Campaigns: Health agencies and school management boards should organise regular health education programmes within schools to promote positive health-seeking behaviours among teachers.
3. Supportive School Environment: Government and school authorities should create a conducive work environment that supports both professional growth and access to healthcare services for teachers.
4. Integration of Health and Career Policies: Educational policymakers should integrate health promotion strategies into teacher development policies to ensure that career advancement is linked with improved health awareness.
5. Counselling Services for Teachers: Schools should provide access to professional counselling services to help teachers balance career aspirations with personal health needs and stress management.

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