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BURNOUT AND MANAGEMENT STYLE IMPACT ON JOB SATISFACTION AMONG SOME EMPLOYEES IN TELECOMS SECTOR WITHIN THE LAGOS METROLPOLIS

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Abstract

It is known fact that due to the cosmopolitan nature of Lagos, employees can experience burnout which may impact on their work satisfaction and indeed leadership style may also impact the work satisfaction of employees especially in the telecoms sector. Consequently, this study sought to examine the impact of burnout and leadership style on job satisfaction among some employees in the telecoms industry within the Lagos metropolis. Using a cross-sectional design and a convenience sampling approach comprising 209 participants, the Maslach Burnout Inventory (MBI) and the Multifactor Leadership Questionnaire (MLQ) were used to measure the independent variable while the Minnesota Satisfaction Questionnaire (MSQ) was used to measure the dependent variable. Results showed that there was indeed a significant negative relationship between burnout and job satisfaction and the participative management style was significantly positively correlated job satisfaction. The laissez-faire type of leadership was significantly negatively correlated job satisfaction. The implications of these findings and limitations are discussed and areas for future direction of research in this area suggested.

Keywords: Burnout, Leadership style, Job satisfaction, Lagos Metropolis, Telcom employees

Introduction

Organisations constantly seek to implement strategies that engender workplace productivity and guarantee their competitive advantage. They also aim to maximise productivity and efficiency by creating a high performing work environment. Expectations are set through clearly defined key performance indicators (KPI) and resources are directed to meet different milestones. Academic conversations about workplace productivity stretch beyond this quantifiable performance and include issues around employee satisfaction (Aziri, 2011).Some of these issues have included

work environment, job satisfaction, burnout, and leadership styles in organisations. For example, past studies have shown acorrelation between job dissatisfaction and absenteeism, turnover, and burnout (Dall'Ora et al., 2020; Owusu, 2021).In some organisations today, the market volatility has placed enormous pressure on organisations to demand more quality in service delivery, expand the scope of job requirements and increase the performance matrixes. Employees are also expected to be adaptable and agile to the unpredictable changes in the market, which could ultimately improve their workload.

The burden of responsibility is creating an environment that strikes a balance between high-performing expectations and a conducive work environment. This requires creating an environment with minimal stressors and a culture that prioritises employees' mental health. To strike this balance, the management needs to appraise the organisational structures and routines to identify factors that could potentially induce burnout. One way to do this is to evaluate the management's styles to attain organisational goals and objectives. The management team is responsible for the strategic planning that lays out the organisation's vision to ensure its growth. For example, when an organisation ensures that there is a sense of equity and indeed fairness in the workings of the organisation, there would be considerable increase in productivity (Virtanen & Elovainio, 2018)

There has been extensive work in the area of   job satisfaction and burnout (Silva et al., 2021), but there is still a need to recognise the impact of management styles. Theories have been propounded to explain the early influence of management styles (Abioye & Ifejirika, 2018). This study seeks to advance the scholarly conversations by identifying incorporating management styles around burnout and job satisfaction. While some have established that burnout leads to low satisfaction, the relations between employees and management could also be a significant driver. Therefore, the core research questions for this study are:

1. Will there be a relationship between job satisfaction and burnout?
2. Will there be a relationship between job satisfaction and management styles?

The organisational leadership could demand the employee maintain a strict routine for deliverables to be met, which may stifle their creative freedoms. Some may offer more flexible pathways of operations leading to unstructured practices that also deter performance. Therefore,

adopting a management style that suits both the industry context and the capacities of the employees could prove to be a pragmatic solution. Job satisfaction provides insights into the degree of contentment, fulfillment and gratification people derive from their job. It also impacts the general attitude towards the task assigned and accounts for the difference between the number of awards employees receives and their amount (Terason, 2018). This leads to the suggesting that job satisfaction can be attained by helping workers, making changes in the organisation, and promoting employee growth. It is also a crucial determinant of employers' behaviour at work and their willingness to constitute the organisation's holistic development. (Wu et al., 2016).According to Sarıçam and Sakız (2014), burnout constitute some physical, emotional, or interactional symptoms that depicts lack of personal achievement, and feelings of impersonation of clients and this forms the major fulcrum of the present study.

A study by Tamini and Kord (2011) investigated the relationship between job burnout, life, and job satisfaction. They found that job satisfaction has a positive relationship with life satisfaction while job satisfaction correlated negatively with the dimension of burnout, impersonation and emotional exhaustion. The finding, however, reported a significant positive relationship between personal achievement and job satisfaction. Similarly, the work of Capri et al., (2012) reported a negative relationship between job satisfaction and burnout among 354 students sampled in their study.

Smetackova et al., (2019) explored the relationship between burnout and life satisfaction among teachers in Czech. Their findings showed that females had higher life satisfaction than males, while burnout was higher among administrators. Furthermore, a study by Skaalvik and Skaalvik (2017) studied the relation between job satisfaction and burnout among teachers and found that burnout has a significant negative relationship with job satisfaction. Further using nurses in four hospitals in South Africa, Khamisa et al., (2015) carried out a study on job stress, job satisfaction and burnout. Their finding revealed that burnout negatively correlates with job satisfaction and a positive relationship with job stress.

The context for current study is the Nigerian telecommunication industry because some gaps exist in current literature in this area. Employees work twenty-four hours shifts to ensure a stable network and solve other customers' problems at any time of the day. They also must deal with

multiple queries and enquiries for different customers. This could, in a way, affect the countenance and the way the telecommunication employees discharge their responsibilities. Therefore, for the first hypothesis in this study, there will be an attempt examine the relationship between burnout and job satisfaction experienced by employees in the telecommunications industry. Past studies suggests that jobs involving excessive amounts of burnout may have adverse consequences for employees, such as emotional exhaustion (Azizi et al., 2012) and decreased job satisfaction (Bahadori, 2012). Therefore, the first hypothesis is framed as:

Hypothesis 1: There will be a significant negative relationship between burnout and job satisfaction

In the second hypothesis, we examine management styles of the telecommunication industry because we believe it has significant relationship with the welfares of their employees. For example, management or indeed leadership style is known to affect productivity (Hater & Bass, 1988). In addition, we also believe it can significantly impact the burnout experienced by employees because of the enormous workload and task requirement in the industry. It is our belief that telecommunication levels of management need to be initiative-taking in managing their employee with high emotional labour demands, particularly since burnout has also been associated with employees' intentions to leave an organisation (Saleem, 2015). This research aims to examine the influence of burnout and management style on employee's job satisfaction and thus the hypothesis stated as follows:

Hypothesis 2: There will be a significant negative relationship between management style and job satisfaction.

Method

Employees were selected from the significant telecommunication companies in Nigeria. MTN Nigeria Communication Plc, Airtel Networks Nigeria Limited, Globacom Limited, Huawei Technologies Co. Nigeria Limited, and Ericsson Nigeria Limited participated in this study. The study adopted a cross-sectional design as it was done at a single point in time. The independent variables are burnout and management styles, while the dependent variable is job satisfaction. A convenience sampling technique was used to select the participants. In this study, 209 participated in this study. 112 were males while 97 were females

Instrument

Burnout: Maslach Burnout Inventory (MBI) was used to measure burnout syndrome (Maslach & Jackson, 1981). The 22-item Inventory was designed to assess burnout syndrome, a state of physical and emotional depletion resulting from work conditions. The MBI employs a six-point Likert rating scale in which (1) represents *a few times a year* and (6) represents *every day*. Higher scores indicate the manifestation of burnout syndrome, while lower scores indicate the absence of burnout syndrome. The psychometric properties for Nigerian samples had been clearly established in a similar study (Nwosu et al., 2020).

Management Style: The Multifactor Leadership Questionnaire (MLQ) is a rater established by Bass and Avolio (1997) to measure leadership behaviours as considered by subordinates. This questionnaire, the MLQ, contains 45 items that identify and measure essential leadership and operational behaviour. Each of the nine levels of leadership in a complete range of leadership or management styles is measured by the four most interconnected elements. The tool was designed at a five-point location to measure the frequency of visible leader behaviour and has a rating scale based on a 4: 3: 2: 1: 0 scale. The MLQ was chosen because of its widespread use in leadership research, as it has been validated here in Nigeria (Ugwu & Okojie, 2016).

Job Satisfaction: Minnesota Satisfaction Questionnaire (MSQ) was used to measure job satisfaction (Weiss et al., 1967). It measures the employee's overall satisfaction with their job. All items are scored on a five-point Likert rating scale. Employees are required to indicate if they ever feel a certain way about their job ranging from "very dissatisfied" (1) to "very satisfied" (5). Higher scores indicate adequate satisfaction in the measure component, while lower scores indicate dissatisfaction. The psychometric properties have been established as excellent on a Nigeria sample (Bello et al., 2020).

Procedure

The researchers met with the respondents in their various organisations and sought their consent to participate in the research. Questionnaires were given to participants who agreed to join after establishing a rapport. The participants were also assured that the information they provided would be used strictly for research. The researchers ensured that participants understood the

contents of the questionnaire in accordance with APA research guidelines. Subsequently, ample time was given to the participants to read the questionnaire and ask questions confused. The questionnaires were collected after completion, and they were scored according to the manual of the scales.

Results

Table 1 below shows the mean and standard deviation of job satisfaction, burnout, participative management style, authoritative management style, and laissez fair management style by gender. On the job satisfaction, the result revealed that male participants reported a higher mean score (M= 83.83; SD=0.99) than their female counterparts (M=80.44; SD= 1.50). On burnout, female participants recorded higher mean score (M= 49.19; SD=1.72) than their male counterparts (M=42.36; SD= 2.64). Likewise, male participants recorded a higher mean score (M= 42. 15; SD=4.36) than their female counterparts (M=41.79; SD= 3.95). Male participants recorded a higher mean score (M= 44. 38; SD=3.95) than their male counterparts (M=43.95; SD=3.86). While on laissez fair management style, female participants recorded a higher mean score (M= 50.89; SD=3.01) than their female counterparts (M=41.32; SD= 1.49).

Table 1.

Mean and Standard Deviation of all variables

Description	Variables	Job satisfaction		Burnout		Participative management		Authoritative management		Laissez fair management	
		Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Gender	Male	83.83	0.99	42.36	2.64	42. 15	4.36	44. 38	3.95	41.32	1.49
	Female	80.44	1.50	49.19	1.72	41.79	3.95	43.95	3.86	50.89	3.01

Table 2 below reveals that burnout has a significant negative correlation with job satisfaction (r = -.263*; p<0.05). The negative correlation is due to elevated levels of burnout scores resulting in lower levels of job satisfaction. Thus, hypothesis one states that there will be a significant negative relationship between burnout and job satisfaction is accepted because the increase in burnout is associated with a decrease in job satisfaction. Regression analysis was computed to

determine the contribution of burnout on the prediction of job satisfaction. The result is presented in Table 3.

Table 2

Correlation between Burnout and Job Satisfaction

Variable	Mean	SD	JS	BN
Job satisfaction	82.04	2.15	1	
Burnout	46.02	5.38	-.263*	1

P<0.05*

The result indicated that burnout significantly contributes to the variance in job satisfaction (Beta= .263, t= -3.917 at p<0.05). The variable yielded significant coefficient of regression $R^2 = 0.069$ (p<0.05). This shows that burnout accounted for 6.9% of the observed variance in job satisfaction

Table 3.

Multiple Regression Analysis Showing the Contributions of Burnout to the Prediction of Job Satisfaction

Variables	B	Beta	T	Sig.	R	R^2	F-ratio	Pv
Burnout	-.105	.263	-3.917	.01	.263	.069	15.341	P<0.05

p<0.05

Table 4 below reveals that Participative management has a significant positive correlation with Job satisfaction (r = .147*; p<0.05). Authoritative management also has significant positive correlation with job satisfaction (r = .251*; p<0.05). While Laissez fair management has a significant negative correlation with job satisfaction (r = -.443*; p<0.05). Thus, hypothesis one, which states that there will be a significant relationship between management styles and job satisfaction, is accepted.

Table 4

Correlation between Performance Appraisal Satisfaction and Turnover Intention

Variable	Mean	SD	JS	PM	AM	LM
Job satisfaction	82.04	2.15	1			
Participative management	41.96	4.14	.147*	1		
Authoritative management	44.03	3.91	.251*	-.067	1	
Laissez fair management	46.45	5.36	-.443*	.043	.070	1

P<0.05*

The result indicated that participative management significantly contributes to the variance in job satisfaction (Beta= .188, t= 3.227 at p<0.05), authoritative management on job satisfaction (Beta= .297, t= 5.099 at p<0.05), while laissez fair management significantly contributes to the variance on job satisfaction (Beta= -.472, t= -8.121at p<0.05). Jointly, all the variables yielded a significant coefficient of regression R^2 = 0. .312 (p<0.05). This shows that participative management, authoritative management and laissez fair management accounted for 31.2% of the observed variance on job satisfaction.

Table 5

Multiple Regression Analysis Showing the Contributions of Management Stylesto the Prediction of Job Satisfaction

Variables	B	Beta	T	Sig.	R	R^2	F-ratio	Pv
Participative management	.097	.188	3.227	.01	.558	.312	30.928	P<0.05
Authoritative management	.163	.297	5.099	.01				
Laissez fair management	-.190	-.472	-8.121	.01				

p<0.05

Discussion

The relationship between job burnout and job satisfaction showed that burnout has a significant negative relationship. This finding implies that burnout affects the employee's satisfaction and undermines their performance on the job. This finding supports the work of Capri et al., (2012), which found a significant relationship between job satisfaction and burnout among the student sample. This implies that burnout could also engender reduced concentration, work motivation, and satisfaction. The finding also agrees with Khamisa et al., (2015), which reported a negative relationship between burnout and job satisfaction among nurses in South Africa. This implies the burnout ability for employees to discharge their duties efficiently. It also leads to the physical and emotional strain that is detrimental to the psychological well-being of employees.

The finding showed that management style has a significant relationship with job satisfaction. Participative and Authoritative management has a significant positive relationship with employees' job satisfaction. This finding revealed that job satisfaction is better attained when a management team consistently recognises the achievements and milestones of its employees (Virtanen & Elovainio, 2018). Participative management style ensures that employees feel integrated into the organisational structure and decision-making process. They develop a profound level of citizenship behaviour and engage actively with every developmental phase of the organisation. Authoritative management style also enhances employees' job satisfaction because it creates constructive feedback and improves relations between the employees and the management team.

In addition, the finding also showed that Laissez fair management style has a significant negative relationship with job satisfaction. This management style will adversely affect employee performance and satisfaction in the long run (Hater & Bass, 1988).

Conclusion

The finding reveals that participatory and authoritative management styles have a significant influence on employee's satisfaction. However, based on the results, the participatory

management style is a better predictor as it also leads to a significantly better positive influence on job satisfaction.

Since this study has shown that authoritative and participatory management can influence job satisfaction, managers, policymakers, and other stakeholders should adopt this style to execute organisational goals and objectives, to enhance individual efficiency and organisational productivity. Although according to this study findings, the participatory management style was shown to have a more significant impact on job satisfaction. Hence, according to the findings of this study, the participatory management style should be seen as a better management style for adoption.

The findings of this study have given an insight into the outlook of job satisfaction, and organisations are advised to create a proper working environment. Further research should consider other factors like motivation to encourage individual work performance.

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EFFECTIVENESS OF INDIVIDUAL AND GROUP COGNITIVE BEHAVIOUR THERAPIESIN RELAPSE PREVENTION AMONG CLIENTS WITH SUBSTANCE-USE DISORDERSIN LAGOS DRUG TREATMENT CENTRES

BY

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ABSTRACT

The study investigated the effectiveness of individual and group cognitive behaviour therapies on relapse prevention among clients stated for substance use disorder in three drug treatment centres in Lagos. The sample consisted of 143 clients randomly selected from three drug rehabilitation centres within Lagos state of Nigeria. Quasi-experimental design using pre-test, post-test and control group with a 3x2x3 factorial matrix was adopted for the study. Seven hypotheses were formulated and tested at 0.05 level of significance. Data collected were analyzed using Analysis of Covariance (ANCOVA). The findings revealed that there was a significant main effect of individual and group cognitive behaviour therapies, [$F(2, 125) = 44.03$, $P<0.05$ $\eta\rho^2$)= 0.413] in relapse prevention and that group cognitive behaviour therapy was more effective ($\bar{x} = 74.50$) than individual cognitive behaviour therapy ($\bar{x} = 61.22$) and control ($\bar{x} =55.35$). The result further showed that, there was no significant (main) effect of gender in relapse prevention for clients treated for substance use disorder, [$F (1, 125) = .086$, $p > 0.05$, $\eta\rho^2 = 0.001$]. Also findings revealed that there was no significant (main) effect of level of education in relapse prevention for clients treated for substance use disorder, [$F(2, 125) = 1.460$, $p > 0.05$, $\eta\rho^2 = 0.023$]. In addition, there was no significant interaction effect of treatment and gender in relapse prevention for client treated for substance use disorder, [$F(2, 125) = 1.351$, $p > 0.05$, $\eta\rho^2 = 0.021$]. Furthermore, there was no significant interaction effect of treatment and level of education in relapse prevention for client treated for substance use disorder, [$F(4, 125) = .672$, $p > 0.05$, $\eta\rho^2 = 0.021$]. Furthermore, there was no interaction effect of gender and level of education in relapse prevention for client treated for substance use disorder, [$F(2, 125) = 1.157$, $p > .05$, ($\eta\rho^2$)= .018]. Finally, there was no interaction effect of treatment, gender and level of education in relapse prevention for client treated for substance use disorder, [$F(3, 125) = .760$, $p > .05$, $\eta\rho^2 = .018$]. It is concluded that, there were main significant effects of treatment in relapse prevention for clients treated for substance use disorder in Lagos State. In the light of these findings, the research recommended that, counselling psychologists, clinical psychologists and other mental health workers should adopt both individual and group cognitive behaviour therapies in the management of clients treated for substance use disorder in addiction centres across the country to prevent relapse among substance abusers.

Keywords: Individual Cognitive Behaviour Therapy, Group Cognitive Behaviour Therapy, Relapse Prevention, Substance Use Disorder.

Introduction

Relapse in the context of drug use is a form of spontaneous recovery that involves the recurrence of pathological drug use after a period of abstinence. Relapse is generally observed in people who have developed a substance addiction that lead to behaviour problem. Relapse occurs in the following stages: emotional relapse, mental relapse, physical relapse and so forth, and each of the stages is characterized by feelings, thoughts and actions that ultimately lead to the individuals returning to their old habit of using different types of substances (Witkiewitz & Marlatt, 2004; National Institute of Drug Abuse, 2018).Although, one should not take relapse to be definite, an individual can make life style changes to help ensure that he/she did not experience relapse after rehabilitation programmes. It is therefore important for individuals to make changes in their life to ensure that they live a life free of addiction. The techniques that help an individual to avoid the use of substances are called relapse-prevention strategies, which can significantly increase an individual's chance of lifelong recovery.

Relapse prevention is a cognitive behaviour approach with the goal of identifying and preventing high risk situation such as substance abuse, obsessive-compulsive behaviour, obesity, depression and so on, and it is an important component in the treatment of different forms of substance abuse globally.

Relapse prevention is a tertiary intervention strategy for reducing the likelihood and severity of relapse among substance abusers following the cessation or reduction of a problematic behaviour. The relapse prevention model remains an influential cognitive behaviour approach in the treatment and study of addiction.The research provides an update on application of individual and group cognitive behaviour therapies to reduce the rate of relapse among substance abusers.

The relapse-prevention model was first developed by Marlattand Gordon (1995) and it provides both conceptual framework for the understanding of relapse and a set of treatment strategies designed to limit the likelihood of early relapse among substance abusers. On the cognitive behaviour model of relapse, it was initially conceived as an outgrowth and augmentation of traditional behaviour approaches to the study and management of addiction in any treatment centres globally.

The evolution of cognitive behaviour theories of substance use brought notable changes in the conceptualization of relapse. Many of these theories depart from traditional disease based models of addiction. For example, the traditional models often attribute relapse to endogenous factors like cravings or withdrawal symptoms that was mostly construed as symptoms of an underlining disease condition while the cognitive behaviour theories emphasize contextual factors like environmental stimuli and cognitive processes as proximal relapse antecedents (Pretzer & Beck, 2004).

In the same vein, cognitive behaviour theories also diverge from traditional disease models in rejecting the idea of relapse as a dividing outcome, but rather being viewed as a state or endpoint signaling treatment failure among substance abusers. Relapse is, therefore, considered a fluctuating process that begins prior to and extends beyond the returns to the target behaviour of using various types of substances (Witkiewitz & Marlatt, 2004).

It is therefore important to note that, an initial return to the target behaviour after a period of volitional abstinence (a lapse) is not seen as the end of life but, as a mistake on the part of the substance abuser. However, the lapse might prompt full-blown-relapse by clients if not adequately managed. Regardless of what kind of substance is abused by a client, diagnosis is based on a pathological set of the behaviours that fall into four major categories, they are: impaired control, social impairment, risky use and pharmacological indicators (tolerance and withdrawal).

Many factors contribute to substance abuse; for example, the inability of a person to control his substance use. Furthermore, drug abuse is more about habit as the desire of the drug user also involves physical dependence which involves a compulsive drug-seeking behaviour (Substance Abuse and Mental Health Services (SAMHSA), 2017; Badejo, 2004; Omokhodion & Pemede, 2000; Bizarth, 2001). Some of the factors could include: the substance of abuse, the individual and the environment in which the client lives.

Statement of the Problem

Based on relapse experienced by the substance abusers, the follow statement was looked into:

1. What is the effected of individual cognitive behaviour therapy in relapse prevention for clients treated for substance use disorders in drug treatment centres in Lagos?

2. What is the effect of group cognitive therapy in relapse prevention for clients treated for substance use disorders in drug treatment centres in Lagos?

3. What is the influence of gender on relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos?

4. What is the influence of level of education in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos?

Several studies have shown that problem of drugs abuse have been effectively managed by the use of cognitive behaviour therapy as reported by Beck (1998) and Serra 2002).

Purpose of the Study

The main purpose of this study is to investigate the effect of individual and group cognitive behaviour therapies on relapse prevention among clients with substance use disorder in Lagos. Specifically, the study sought to investigate:

1. The effect of individual and group cognitive behaviour therapies in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

2. The effect of gender in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

3. The effect of level of education on relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

4. The effect of treatment and gender on relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

5. The effect of treatment and level of education on relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

6. The effect of gender and level of education in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

7. The effect of treatment, gender and level of education in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

Research Hypotheses

The following null hypotheses were formulated to guide the research on effectiveness of individual and group cognitive behaviour therapies in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos.

Ho$_1$:   There is no significant effect of treatment (individual and group cognitive behaviour therapies) in relapse prevention of substance use disorder in drug treatment centres in Lagos State.

Ho$_2$:   There is no significant effect of gender on relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos State.

Ho$_3$:   There is no significant effect of level of education on relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos State.

Ho$_4$:   There is no significant interaction effect of treatment (individual and group cognitive behaviour therapies) and gender in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos State.

Ho$_5$:   There is no significant interaction effect of treatment (individual and group cognitive behaviour therapies) and level of education in relapse prevention for clients treated for substance-use disorders in drug treatment centres on Lagos State.

Ho$_6$:   There is no significant interaction effect of gender and level of education on relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos State.

Ho$_7$:   There is no significant interaction effect of treatment (individual and group cognitive behaviour therapies), gender and level of education in relapse prevention for clients treated for substance-use disorders in drug treatment centres in Lagos State.

Method

Research Design

The study examined the effectiveness of individual and group cognitive behaviour therapies in relapse prevention among clients with substance-use disorders in Lagos drug treatment centres.

The research design adopted for the study is a pre-test, post-test, control group quasi-experimental design. The research design was applied as the study required a pre-test to determine the threshold level of clients and a post-test to establish the effectiveness of treatments (individual and group CBT) without randomising the clients. A 3 x 2 x 3 factorial matrix design. DAST and SOCRATES which were tested and found both valid and reliable for the study were administered as a pre-test and post-test measure to the clients at the end of the eight-week treatments process. The table 1 shows the factorial design in the study sample.

Table 1:   3x2x3 Factorial Matrixes for the Treatment of Substance Use Disorder

Treatment	Gender	Education			Total
		Primary	Secondary	Tertiary	
Individual	Male	1	13	25	39
	Female	3	3	5	12
Group	Male	1	14	24	39
	Female	1	0	10	11
Control Group	Male	2	11	10	23
	Female	4	9	6	19
Total		12	50	80	143

Grand total of the participants = 143

Participation and Setting

The population of the study constitute all the substance abusers in Lagos State who are treated in the 13 registered rehabilitation andtreatment centres in Lagos. Lagos is arguably the commercial hub of Nigeria with a staggering population of 30 million Nigerians from diverse ethnic groups with its capital at Ikeja. It has 20 Local Government Area (LGA) and 37 Local Council Development Area (LCDA). The 13 treatment centres in Lagos are dispersed across the various LGA and LCDA, they are Federal Neuropsychiatric Hospital, Yaba; Lagos University teaching Hospital, Lagos; Nature Crest Rehabilitation Centres, Lagos; Lagos State University Teaching Hospital, Lagos; Centres of Correction and Human Development, Lagos; Freedom Rehabilitation Centres, Lagos; Well Spring Rehabilitation Center, Lagos; House of Refuge Rehabilitation Center, Lagos; Quit Addiction Centres, Lagos; Redeemer Christian Church of God Drug Rehabilitation Centres, Lagos; Ibalawy Investment Company (Rehabilitation Unit), Lagos;

StayFit 101 Rehabilitation Centres, Lagos and Yek-Yem Nigeria Enterprises (Rehabilitation Unit) etc.

Sample and Sampling Techniques

The drug treatment centres were selected using purposive sampling technique. The participants for the study were purposively selected based on the criteria for inclusion in the study (client who have been diagnosed with substance disorder and experience relapse after being discharge from rehabilitation centres and that are mentally stable for participation in the study) and those who were able to fill the clients inform consent form were the major subjects used for the study.

Mentally stable participants were selected based on the fact that, they have experienced similar health problem in the past but healthy enough to respond to the research instruments as presented by the researchers. There was no likely complication as participants were drawn from known clients of the rehabilitation centres that attend their normal clinic follow-up.

The consent form for all participants involved in the research study was adequately distributed by the researchers; hence, the clients freely consented to participate in the study.

Instrumentation

Two instruments were used for data collection in this study. These are:
1.   The Drug Abuse Screening Test (DAST)
2.   The Stages Change Readiness and Treatment Eagerness Scale (SOCRATES)

The two instruments are described below:
i.   **The Drug Abuse Screening Test (DAST)**
This instrument, DAST was adapted from Skinner (1980). The instrument quizzed clients on their use of drugs, cause of drug use, possible causes of relapse, drug abused and also their personal profile. It is made up of three sections. Section "A" consists of the respondents personal profile such as sex, gender, age, level of education, occupation, marital status, religion and ethnicity of respondents. Section B consists of 20 items that describe client's perception on substance abuse. The respondents were to respond to items based on dichotomous scale of Yes or No. Section "C" contains three multiple choice items to be filled by the client and an item to be filled by the psychologist.

ii.   **The Stages Changes Readiness and Treatment Eagerness Scales (SOCRATES).**

This instrument was adapted from Miller and Tonigan (1996). The instrument focuses on how the client describes his/her feelings about drug abuse. It has only one section which consists of 20 items that described client's feeling about drug abuse as it relates to relapse prevention. The respondents were to respond to items based on modified 5 points Likert scale:

1- No! Strong Disagree

2- No! Disagree

3- Undecided or Unsure

4- Yes! Agree

4- Yes! Strongly Agree

Validity of the Research Instruments

The instruments used were adapted for use in the terrain and locality of Nigeria. The two instruments were tested for face and content validity. The face validity was ensured through reading and spelling check of the items for appropriateness of wordings and vocabularies. The content validity was also ensured through the perusal of the instrument items by the researchers and psychometricians in the Department of Educational Foundations and Counselling Psychology, Faculty of Education, LASU, Lagos State.

Reliability of Research Instrument

To establish the reliability of instruments the test-retest reliability method was employed. The instruments were administered twice to group of participants which were excluded from the sample for the main study but with similar health problems (drug abuse), but healthy enough to response to the research instruments. The results were compared using Pearson Moment Correlation Coefficient and a coeffient of 0.75 and 0.77 were obtained indicating that the research instrument were reliable for use.

Method of Data Analysis

Analysis of data was done using both descriptive (frequencies count, percentage and cumulative frequency) and inferential statistics. The Analysis of Covariance (ANCOVA) statistical tool was used to analyze the data due to its robust nature in handling large data equating the groups on the

same variables, which could not be controlled by the researcher. ANCOVA controls for errors, adjusts treatment means; partitions a total covariance, estimates missing data, and corrects initial mean difference between the experimental group and control groups. ANCOVA takes the correlation between the pre-test and post-test measures into account and also increases precision in randomized experiments.

Testing of hypotheses

Hypothesis One

Hypothesis one had stated that:

There is no significant effect of treatments (individual and group cognitive behaviour therapies) on relapse prevention for clients treated for substance use disorders in drug treatment centres in Lagos.

Table 1:Test of Main and Interactive effect of the treatments group, gender and educational level on relapse prevention among substance use disorder clients

Source	SS	df	MS	F	ρ	η_p^2
Corrected Model	11315.579[a]	17	665.622	8.947	.000	.549
Intercept	7860.232	1	7860.232	105.659	.000	.458
Gender	6.398	1	6.398	.086	.770	.001
Education	217.242	2	108.621	1.460	.236	.023
Treatments	6551.145	2	3275.572	44.031	.000	.413
Gender * Education	172.158	2	86.079	1.157	.318	.018
Gender * Treatments	200.998	2	100.499	1.351	.263	.021
Education * Treatments	199.951	4	49.988	.672	.613	.021
Gender * Education * Treatments	169.680	3	56.560	.760	.518	.018
Error	9299.051	125	74.392			
Total	608136.000	143				
Corrected Total	20614.629	142				

a. R Squared = .594 (Adjusted R Squared= .488)
Source: The Researchers (2020)

In order to test the null hypothesis, the data gathered in respect of treatment groups (individual CBT, group CBT and control) was analysed using ANCOVA. The result obtained provided that, there was significant effect of treatment in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos; [$F_{(2, 125)}$ = 44.03 p <0.5, $\eta\rho^2$= 0.413].

Therefore,the null hypothesis which states that, there is no significant main effect of treatment in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos was rejected (see table 1).

Table 2: Duncan Post Hoc test of the treatment groups

Treatment Group	N	Subset			
		1	2	3	
Control	43	55.35			A
Individual CBT	50		61.22		B
Group CBT	50			74.50	C
Sig.		1.000	1.000	1.000	

Source: **The Researcher (2020)**

In order to establish the direction of differences, a post hoc test, Duncan Multiple Range Test, was performed.

This presented that, there existed three existed groups of mean that were heterogeneous. The ordering of the means showed that group CBT ($\bar{x} = 74.5$) > Individual CBT ($\bar{x} = 61.22$) > control group ($\bar{x} = 55.35$). Each of the means was significantly different from the other. (seetable 2).
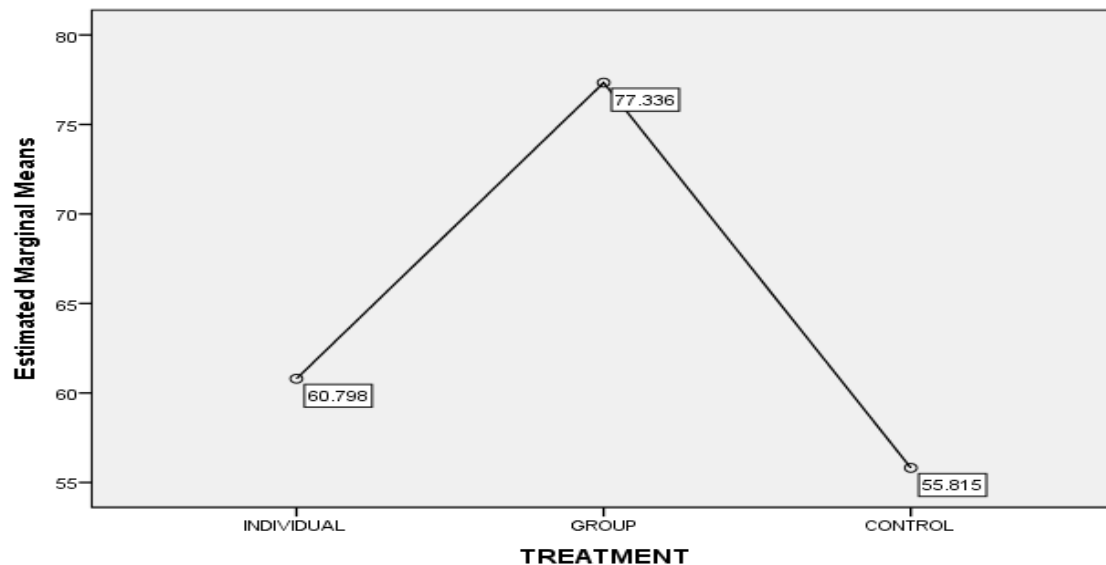
Figure 1: **Mean Estimate of Treatments Groups (Individual, Group and Control)**

Hypothesis Two

Hypothesis two had presented that:

There is no significant effect of gender on relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos.

Figure 2: **Mean Estimate of Male and Female Client in the Study**

In order to test the null hypothesis, the data gathered in respect of the main effect of gender using individual and group CBT in relapse prevention were analyzed using ANCOVA. The result obtained provided that, there was no significant main effect of gender in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos State; [$F(1, 125) = .086$, $p > 0.05$, $\eta\rho^2 = 0.001$]. Therefore, the null hypothesis which states that there is no significant main effect of gender in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos was not rejected. Gender accounted for 0.1% of the total variance in the model. This implies that gender has no effect in relapse prevention for clients treated for substance use disorder in Lagos State (see figure 2).

Hypothesis Three

Hypothesis three had presented that:

There is no significant effect of level of education in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos.
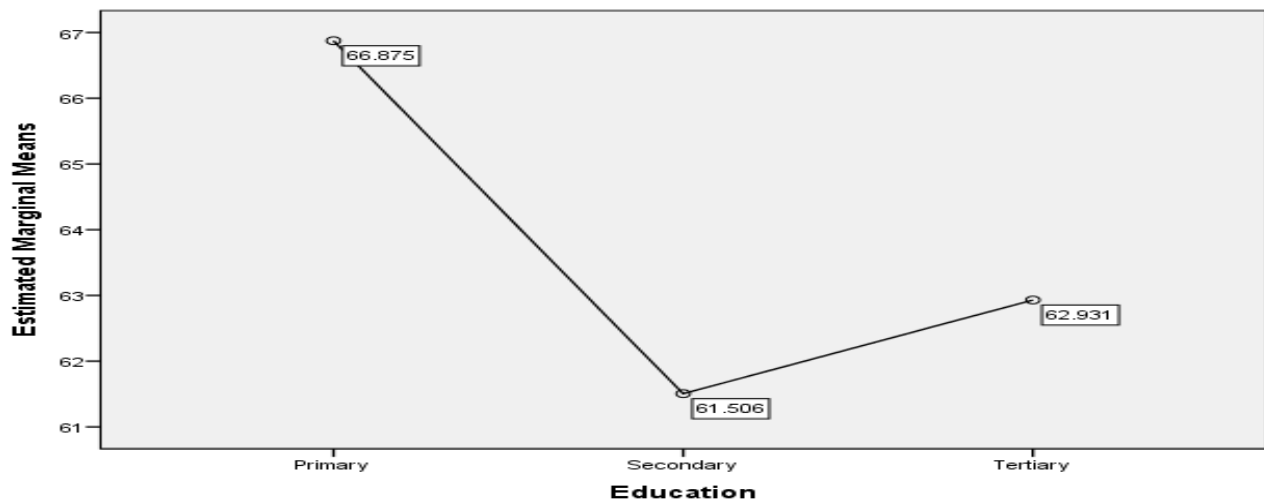
Figure 3: **Mean Estimates of Educational Level of the Clients in the Study**

In order to test the null hypothesis, the data gathered in respect of the main effect of level of education using individual and group CBT in relapse prevention on clients treated for substance use disorder were analyzed using ANCOVA. The result obtained provided that, there was no significant main effect of level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos; [$F(2, 125) = 1.460$, $p > 0.05$, $\eta\rho^2 = 0.023$]. Therefore, the null hypothesis which states that, there is no significant main effect of level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos was accepted. Level of education accounted for 2.3% of the total variance in the model. This implies that, level of education has no effect in relapse prevention for clients treated for substance use disorder in Lagos State (see figure 3).

Hypothesis Four

Hypothesis four had presented that:

There is no significant interaction effect of treatment (individual and group cognitive behaviour therapies) and gender in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos.

In order to test the null hypothesis, the data gathered in respect of the interaction effect of treatment and gender using individual and group CBT in relapse prevention on clients treated for substance use disorder in drug treatment centres in Lagos were analyzed using ANCOVA. The result obtained provided that, there was no significant interaction effect of treatment and gender in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos; [$F(2, 125) = 1.351$, $p > 0.05$, $\eta\rho^2 = 0.021$]. Therefore, the null hypothesis which states that there is no significant interaction effect of treatment and gender in relapse prevention for client treated for substance use disorder in Lagos was not rejected. Treatments and gender jointly accounted for 2.1% of the total variance in the model. This implies that there was no interaction effect of treatment and gender in relapse prevention for clients treated for substance use disorder in Lagos State (see table 1).

Hypothesis Five
Hypothesis five had presented that:
There is no significant interaction effect of treatment (individual and group behaviour therapies) and level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos.

In order to test the null hypothesis, the data gathered in respect of the interaction effect of the treatments and level of education using individual and group CBT in relapse prevention on clients treated for substance use disorder was analysed using ANCOVA. The result obtained provided that, there was no significant interaction effect of treatments and level of education in relapse prevention for clients treated for substance use disorder; [$F(4, 125) = .672$, $p > 0.05$, $\eta\rho^2 = 0.021$]. Therefore, the null hypothesis which states that, there is no significant interaction effect

of treatment and level of education in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos was not rejected. Treatments and level of education jointly accounted for 2.1% of the total variance in the model. This implies that, there was no interaction effect of treatment and level of education in relapse prevention for clients treated for substance use disorder in Lagos State (see table 1).

Hypothesis Six

Hypothesis six had presented that:

There is no significant interaction effect of gender and level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos.

In order to test the null hypothesis, the data gathered in respect of the interaction effect of gender and level of education using individual and group CBT in relapse prevention on clients treated for substance use disorder was analyzed using ANCOVA. The result obtained provided that there was no significant interaction effect of gender and level of education in relapse prevention for clients treated for substance use disorder; [$F(2, 125) = 1.157$, $p > .05$, $\eta\rho^2 = .018$]. Therefore, the null hypothesis which states that there is no significant interaction effect of gender and level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos State was not rejected. Gender and level of education jointly accounted for 1.8% of the total variance in the model. This implies that, there was no interaction effect of gender and level of education in relapse prevention for clients treated for substance use disorder in Lagos State (see table 1).

Hypothesis Seven

Hypothesis seven stated that:

There is no significant interaction effect of treatment (individual and group cognitive behavior therapies), gender and level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos.
In order to test the null hypothesis, the data gathered in respect of the interaction effect of treatment, gender and level of education provided using individual and group CBT in relapse

prevention on clients treated for substance use disorder in drug treatment centres in Lagos were analyzed using ANCOVA. The result obtained provided that there was no significant interaction effect of treatment, gender and level of education in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos; [$F(3, 125) = .760$, $p > .05$, $\eta\rho^2 = .018$]. Therefore, the null hypothesis which stated that there is no significant interaction effect of treatment and level of education in relapse prevention for client treated for substance use disorder in drug treatment centres in Lagos State was not rejected. Treatment, gender and level of education jointly accounted for 1.8% of the total variance in the model. This implies that, there was no interaction effect of treatment, gender and level of education in relapse prevention for clients treated for substance use disorder in Lagos State (see table 1).

Discussion, Conclusion and Recommendations

Discussion of the Findings

The finding of this study indicates that, there is a significant effect of the treatment (cognitive behaviour therapies) in relapse prevention for clients treated for substance use disorders. This result is in line with the finding of Marlat and Donovan (2005) that group Cognitive Behaviour Therapy treatment is an efficient way to reduce the rate of relapse as the individual becomes actively involved in group sessions.

Results also indicate that, gender has no significant effect in relapse prevention for clients treated for substance use disorders. The result indicates that, gender has no significant effect on therapeutic intervention, hence, both male and female clients could benefit from the intervention programs. The finding was in line with Florence et al (1997) , Walt and Roger 2000 who found no significant effect of gender on the relapse prevention for client treated at addiction centres in US.

The study further indicates that, there is no significant effect of level of education in relapse prevention for clients treated for substance use disorders in drug treatment centres in Lagos. This finding is in line with the finding of Xie et al (2005) who reported that, there is no main significant interaction effect of treatment and gender in relapse prevention. The insignificant interaction effect reveals that, client's gender has no influence on the treatment package. This

finding is in agreement with that of Green et al 2000 who found no significant difference between time of treatment and gender in the U.S. Although the result is not in agreement with the finding of Greenfield et al 2000 that reported that gender is significant prediction of treatment, rotation, completion and outcome.

In the same vein, there is no significant interaction effect of treatment and level of education on relapse prevention for substance use disorder. This finding is in accord with the finding of AL 'Absi et al (2015) that there was no significant interaction effect of treatment and level of education among individuals with substance use disorder in U.S.

Similarly, the result indicates that no significant effect existed between relapse prevention, level of education and gender. The finding indicates that, level of education and gender do not affect the effectiveness of both individual and group cognitive behaviour therapies as treatment package. The stated result corroborates the finding of Grella, Scot and Foss (2005) which posits no significant difference between men and women in their treatment outcomes.

Result also indicate no significant intervention effects of treatment, gender and level of education in relapse prevention for substance use disorder in drug treatment centres in Lagos. The result is in agreement with the finding of Greenfield et al (2007) Xie et al (2005) and AL 'Albsi et al (2015) who reported that gender and level of education were not significant predictors of treatment retention, completion or outcome respectively. The no-interaction effect found in this study reveals that, level of education and gender when combined with treatment do not exert for any significant effect on clients. Hence, the treatment (cognitive behaviour therapy) alone is strong enough to produce therapeutic effectiveness in any drugs treatment centres across the country.

The Implications for Clinical and Counselling Practice Include:

1.   The individual and group cognitive behaviour therapies used in this study could be used effectively by counselling psychologists, clinical psychologists and other mental health workers to assists clients to maintained abstinence among substance abusers in Nigeria

2. The counselling psychologist and other mental health workers need to acquaint themselves with these techniques to help them effectively managed substance use disorders in our rehabilitation centres across the country.

3. The school counsellors and other mental health workers should develop interest in their targeted population with the aim of identifying individual that, abuse substances in the school and other targeted areas for appropriate drug counselling procedure and prompt remediation for the targeted population.

4. Substance abuse seems to be a serious menace in our society, hence the need for the counselling psychologists and other stakeholders to take appropriate action in reducing the rate of abuse among our youth and the general population at large.

Recommendations

Based on the findings of the study, the following are suggested as recommendations to prevent relapse among clients with substance use disorder.

1. The government and other relevant authorities should ensure adequate provision of medical facilities like well-equipped hospitals with drug wards to take care of this category of clients via the establishment of addiction/rehabilitation centres across Nigeria. This will help reduce the rate of relapse among substance abusers.

2. The government and other stakeholders should make provisions for training/retraining needs of manpower like counselling psychologists, clinical psychologists, psychiatrists, counsellors and other mental-health professionals to handle all forms of psychotherapy and other psychological intervention for the benefit of substance-use disorders clients to avoid early relapse after the rehabilitation programmes.

3. Government should enforce legislations already enacted to combat drug abuse in the society with particular emphasis on sales and restrictions of any form of drugs to underage children or adolescents respectively. Adequate legislation should be applied in the case of any form of abuse while those with mental illnesses should be referred for appropriate care/treatment and rehabilitation programmes accordingly. The government should also pay adequate attention to appropriate rehabilitation programmes for substance abusers and consequently, reduce the rate of relapse among abusers as increased and frequency of relapse and admission

negatively affect clients' quality of life and also the quality of life of their families (Gbiri, Badru, Ladapo & Gbiri, 2011).

4. Adequate enlightenment campaign programs need to be put into consideration, like drug education, radio programmes, seminars, workshops, and awareness campaigns to educate the youth and other groups of the population at risk on the negative effects of substance abuse in the society.

5. Professional guidance counsellors in secondary schools and higher institutions should be employed adequate and empowered to perform their responsibilities of enlightening the major stakeholders on the need to accelerate the current tempo of education of youths on the dangers of substance use amongst the general population as this will help to complement the government's war against drug abuse as implemented by the NDLEA and other relevant agencies. Counselling interventions should be encouraged for proper rehabilitation and re-orientation of substance abusers back to society to avoid unnecessary stigma being experienced by this group of people.

6. The current educational curriculum and syllabuses in primary, secondary and higher institutions should accommodate drug education to suit the needs of society in general. Curriculum planners and education policymakers then need to work on the implementation of drug education at various levels of our educational system and it must be made a compulsory subject for all in order for the society to be drug-free by 2020.

7. For effectiveness of rehabilitation centres to be realized, government at the different levels of intervention in the area of finance is very important and NGOs intervention because of the financial constraints faced by many rehabilitation centres across the globe (Sereta *et al*., 2016).

8. The Senate motion on Tuesday, February 27, 2018, calling on the federal government, through the Ministry of Health, to establish rehabilitation centres in each of the 36 states is a welcomed development to reduce the rate of substance abuse in Nigeria.

9. Elders, of students' organizations social clubs, religious and academic organizations should be educated and sensitized on drug abuse in schools and other targeted areas in the society. Similarly parents should be good role models to their children by living drug-free lives as positive family history of substance could be passed on to their children.

10. Finally, government should ensure adequate implementation of its anti-drug law in Nigeria and prosecute the offenders appropriately.

If there would ever be a change in the status quo of substance use relapse cases in Nigeria, all the various agents concerned in the management of substance abuse in Nigeria are called upon to properly and honestly implement the above recommendations and suggestions. This would therefore, lead to a significant improvement in the management of substance abuse and consequently the rate of relapse would be reduced significantly in the Nigerian society.

Conclusion

Based on the findings of this study, it could be concluded that, there were main significant effects of treatments in relapse prevention for clients treated for substance use disorder in drug treatment centres in Lagos. It could also be concluded that, group cognitive behaviour therapy has a better effect than the individual cognitive behaviour therapy. These results attested to the fact that, group cognitive behaviour therapy works to change learned behaviour by changing thinking patterns, belief and perception of the individual concerned as he/she becomes actively involved in discussing and solving their own problems as well, as others in group session as asserted by Marlat and Donovan (2005).

Although level of education and gender of the participants revealed no main significant effect on relapse prevention for clients treated for substance use disorder but when compared with the significant effect which the treatment had on respondents exposed to individual and group cognitive behaviour therapies, it provides an empirical evidence in support of the need to use this treatment method to reduce the rate of relapse among substance abusers in Nigeria.

If the findings of this work are implemented most especially as treatment modalities in our various drug rehabilitation centres across the country, they will help to reduce the rate of substance abuse and consequently the rate of relapse among substance abuser would be reduced significantly in Nigeria.

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HACKMAN AND OLDHAM (1976) EXTRINSIC/ INTRINSIC SATISFACTION HYPOTHESES: A Review of Evidence from an Empirical Analysis among Pharmaceutical Products Sale Force Personnel in Lagos Metropolis

By

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Abstract

Employee motivation, satisfaction and performance are all multidimensional phenomenon that has been studied in several disciplines. It is one of the most fascinating phenomena in modern capitalist and competitive markets. Customarily, in pharmaceutical industries the performance of sale force personnel most often than not depends largely on both the quality of the product, company's motivational strategies, as well as the level of experienced job satisfaction. The study examined the nature and pattern of relationship between monetary benefits, work culture (extrinsic factors), job satisfaction, recognition (intrinsic factors) on sale force performance (performance behaviour and learning agility). One hundred and twenty sales force personnel from four leading pharmaceutical companies in Lagos metropolis, between ages 18 years old and above 30 years, participated in the survey which was administered through on-line platform. Anchored on Hackman and Oldham (1976) extrinsic/ intrinsic satisfaction hypotheses the study employed mixed design of descriptive survey and Ex-Post-Facto survey design to execute the investigation. It was hypothesized that Personal factors (such as gender, age) and agility may influence performance. Also hypothesized was that monetary intrinsic and extrinsic factors will significantly predict motivation across age groups, gender and time in the field among sales force personnel. Median analyses and Kruskal-Wallis rank sum test revealed inter-alia that monetary benefits, work culture, job satisfaction, recognition, performance behaviours and learning agility were all significant predictors of motivation among sales force personnel's across gender and age categories. The study helps HR practitioners in pharmaceutical companies and businesses organisations to create solution logic and come out with suitable motivational policies that suit the interests of the company and that of sales force personnel's. The study concludes that both personal and psychological factors can lead sales force motivation and performance. The study provided the insight and baseline empirical data/evidence to help businesses, HR practitioners and marketers to understand psychological strategies that are potentially relevant to motivating sales force professional in pharmaceutical industry. Findings of this study were discussed in the light of extant literatures with implications for further studies highlighted.

Key words: Personal factors (age and gender), Motivation (intrinsic and extrinsic), Psychology factors (Recognition and learning Agility)

Introduction

Human resource management has emerged into a cornerstone in the management of organisations as the global market place is now in an era characterised by high dynamism, increased proximity and connectivity due largely to technology. (Hope, 2004). This trend has necessitated a change in the perspective and approach of practitioners to the management of organisations and people at work. This has hitherto foster greater quest for the acquisition of knowledge and practise of managerial psychology, namely human needs, attitudes, behaviour and motivation as a predictor of certain aptitude, attitude, behaviours and skills in driving individual and group performance in the workplace. It is almost generally believed that within the sales function, performance is driven by providing performance based rewards; essentially the more sales personnel delivers, the more reward he/she receives (Siu, Tsang & Wong, 2011). Performance based rewards essentially promote job satisfaction in the workplace particularly among sales force and marketing personnel. This knowledge makes job satisfaction amongst sales personnel is an important performance factor. The absence of job satisfaction is capable of promotion disruptive behaviours such as fraud, cutting corners, absenteeism and unreliability which ultimately lead to poor performance. Nevertheless, increased job satisfaction does not necessarily result in improved job performance.

Locke, Durham and Knight (2001) maintain that in the manufacturing sector sales processes and compensation policies are effectively designed to improve sales performance. They observed that sales processes and compensation policies are critical factors for ensuring motivation of sales force personnel and improving performance. Sales personnel are generally referred to as frontline staff that interfaced between the organisation and the customer, in the quest to increase organisational revenue through offering an exceptional customer experience. Albeit, where these employees are poorly motivated performance decrement set in and industrial morale diminished and the organisation loses sales (Ryals & Rogers, 2005). From time immemorial, money has typically been the low hanging fruit in motivating sales personnel and driving performance. It is generally believed that if the sales force has sufficient financial rewards, they will perform better. Little wonder then that reward packages for the sales force personnel usually differ from other employees in the organisation (Bakoshi & Sharry, 2008) with variable pay such as bonuses and incentives being the most popular. Extensive research has been carried out on motivation by

various scholars in academics and management alike with varying hypothesis, conclusions and theories. There are gaps in adapting these to front line sales personnel especially in the pharmaceutical industry that has a unique business model where customers (healthcare workers) are not the end users or consumers of their products/medicines i.e. patients.

Background to the Study

The school of classical or traditional management is the oldest of management approaches, dating to the twentieth century during the era of industrialization with factories saddled with overworked workers, low wages, low motivation, high inefficiencies and reduced productivity. Daft and Marcic (2016) opined that the inefficiencies on the factory floor is due to the management and not the workers with the solution lying with a change to structure and process by which work is carried out. The most significant disadvantage of classical approach to management is the focus on tasks, process and output over the humans doing the tasks. This resulted in significant de-motivation, much complaints by workers, leading to reduced efficiencies and production output. This development was followed by the propagation of theories that focused on the individual workers, their needs and motivation in addition to inter-personal interactions on the organisation (Baldridge, 1972). This body of work culminated into the human relations theories of management. The theories break the dichotomy of thinking and action being the reserve of managers and workers respectively, promoting worker interaction and motivation as key drivers of productivity in organisations (Daft, 2006).

Nevertheless, Elton Mayo's Hawthorne Studies in 1920 results redefined Scientific Management which was the management practice of the day leading to the initiation Human Relations Movement (Grimes 2006).The Hawthorne Studies investigated a variety of working conditions and their effect on productivity with outcome of the studies observed in organisations and management today; organisations have transitioned from large working groups to small teams, managers play an active role in the work of staff, showing interest and offering support through regular team meetings, coaching sessions, reviews and appraisals thereby fostering communication and trust. The most successful organisations in the world today demonstrate the positive influence of human relations approach to management.

Motivation is the process that accounts for an individual's intensity, direction, and persistence of effort toward attaining a goal (Ran, 2009). In view of the high dynamism in the marketplace, increased competition, drive for revenue and market share, effective sales force management and motivation has become critical (Anderson and Oliver, 1987; Chowdhury, 1993; Dubinsky et al., 1994; Walker et al., 1977); A meta-analysis conducted by Churchill et al. (1985) on sales performance revealed three effective predictors of sales performance namely motivation, skills and role perceptions, in increasing order of importance; this highlights the importance of motivation to sales team performance. This has led to sales force control system being developed and deployed by organisations and consists of a set of procedures for monitoring, directing, evaluating and compensating sales employees (Anderson & Oliver, 1987). It influences employee behaviour in such a way that it enhances the welfare of both the organisation and the employee. Anderson and Oliver (1987) have described two-major sales-force control systems namely *behaviour based* and *outcome based* systems and they have also assessed the effects of these systems on salesperson's motivation, cognitions and behaviour. In the case of an outcome based systems the field force is held accountable for results obtained and not necessarily the behaviour that produced the result; alternatively with the behaviour based system the sales force is accountable for their behaviour in anticipation that this will correlate to the results produced.

According to Anderson and Oliver (2007) in outcome based systems there is limited supervisor involvement in terms of monitoring and setting direction. The set objective measures are provided to the field force against which they are evaluated and compensated, rather than measures of how they achieved the results. Behaviour-control systems involve extensive monitoring of sales staff and high-levels of managerial direction and intervention with more complex and subjective evaluation of performance, including what the individual attributes of the sales personnel in the selling process such as aptitude and product knowledge; in addition to sales personnel activities such as number of calls made in a day; and their sales strategies (Anderson & Oliver, 2007).

Studies have shown that performance targets, such as sales volume, that are linked to reward will encourage employees to pursue the behaviour and actions that trigger the payout, it is often at the expense of other, equally important, business objectives (Cravens et al., 1993). Moreover, sales team intrinsic motivation has been positively correlated with behaviour based sales-force control

systems, while extrinsic motivation factors correlate positively to outcome based control systems (Cravens et al., 1993; Oliver & Anderson 1994). Intrinsic motivation consists of such factors as challenge seeking and task enjoyment (cognitive), while extrinsic motivation includes compensation and recognition seeking (affective) (Amabile et al., 1994). According to Ryan and Deci (2000) Self-Determination Theory proposes that increased cognitive capacity (e.g., challenge seeking and task enjoyment) can increase the rate of internalization of valued extrinsic rewards (e.g., compensation or recognition), suggesting potential causal relationships between certain Intrinsic and Extrinsic factors of motivation. According to Amabile et al (1994) motivation consists of cognitive and affective dimensions relative to individual sales personnel, these have unique antecedents and consequences, which should be considered and incorporated into the development and implementation of sales force control systems (Dubinsky et al., 1994). Sales team controlled by an outcome-control system tend to be short term oriented, hardworking, and more interested in tangible rewards, such as money; and are more likely to promote products based on personal relationships and strong closing techniques.

The aforementioned accounts for the reason performance of employees differ even though they may be termed to be referents, that is doing same job under identical conditions, furthermore it differentiates the root cause of success amongst employee who may be considered to be referents as defined above; indeed two successful sales personnel may deliver on targets for unique reasons one may be due to the sales force incentive package while the other may be to be recognised as the best performing sales staff in the company; clearly motivation as a driver of performance is best individualised to employees and organisations (Daft, 2009).

This study shall seek to identify the casual relationships between different factors of motivation by determining the key psychological predictors of motivation that influence sales teams. Also, it seek to confirm the correlation between motivation and performance with a view of contributing to the existing knowledge on motivation of sales teams. The findings is expected to guide practitioners in developing effective and efficient sales force control systems as they drive for increased revenue and market share.

Statement of the Problem

Marketing pharmaceutical products is perhaps one of the most sensitive job, because, customers are generally not the direct consumers of products or services, hence the end users purchase decision is generally not directly open to sales force personnel assessment. The conventional industrial practice to overcome this challenge was to operate a unique selling model, which hitherto does not provide enough knowledge of the correlation between motivation and performance of the sales force personnel. As a result of this challenge, it is usually difficult to figure out effectiveness and efficiency of sales forces personnel because their performance is sandwiched within supply-demand marketing chain. Moreover, sales force leadership often than not are suspected to give undue attention to the motivation of their customers to the detriment of their sales foerce personnel believing g that they are the actually drivers of sales. In fact, sales leadership in manufacturing firms have had to contend with a sales force that often times releases low energy, records lower calls than expected, displays higher than acceptable rate of absenteeism and resistance to change and training simply because sales force personnel appeared to have been demotivated. It is being speculated also that this is due to diminished motivation, loss of industrial morale, company loyalty. However, this has not been sufficiently and empirically determined nor effectively resolved and most of the available reports appears to be grossly inadequate, not only that, available evidence are generally based on sweeping assumptions or practices in other countries. This emerging dysfunctional trend has profound implications for all manners of disruptive behaviours in the workplace. This is rather very instructive, because when employees appear to have lost motivation for service delivery, then it is expected that the performance of such an employee will drop significantly and the company will be a loss.

Objectives of the Study

The principal objective of the study was to determine psychological predictors affecting sales force motivation and the impact of these on performance, focusing on Pharmaceutical industries located in Lagos Metropolis in Nigeria. Specifically, the objectives of this investigation are:

1. To investigate nature and pattern of relationship between monetary benefits, work culture (extrinsic factors) and sale force performance (performance behaviour and learning agility)?

2. To examine the relationship between job importance, recognition (intrinsic factors) and sale force performance (performance behaviour and learning agility)?

3. To establish the relationship between extrinsic motivation, intrinsic motivation, job satisfaction and sale force performance.

4. To confirm whether the sale force personnel will report better performance behaviours and learning agility as a function of satisfaction with extrinsic factors than intrinsic factors?

Significance of the Study

Psychological predictors of motivation of sales personnel was investigated within some selected the pharmaceutical industry in Lagos Nigeria, thereby offer empirical data from which managers may draw insight to develop and implement initiatives that would increase motivation and drive performance and the achievement of company commercial objectives. Moreover, the study provide rich insight into the behaviour of sales personnel, thereby could serve as a springboard that is capable of guiding the development of policy and programmes to improve productivity of sales men and women by enhancing motivation. Furthermore, leaders in other pharmaceutical, fast moving consumer goods (FMCG) and related companies in Nigeria may find the results useful in drawing insight and developing policies and programmes to improve motivation of their sales staff.

Conceptual Clarifications: Motivation and Employee Performance

Employee motivation is one of the policies of managers to increase effectual job management amongst employees in organizations (Shadare et al., 2009). A motivated employee is responsive to the definite goals and objectives individuals must meet, therefore individuals direct its efforts in that direction. Organizational facilities cannot flourish if they lack motivated people to direct and execute activities within them efficiently and effectively. Employee motivation and performance are key factors in moving an organisation forward. Owners and supervisors realize effective motivation ends in better performance and better productiveness but may rely on the incorrect tools that subsequently cause dissatisfaction amongst personnel and ultimately poor overall performance of the organization. Motivation increases the willingness of the employees to work, which results in growth and efficiency of the organisation. The company's purpose is to

develop stimulated employees and support their morale concerning their respective works for better overall performance (Shadare et al., 2009).

The Society for Human Resource Management (2010) defines motivation as "*the psychological forces that determine the direction of a person's level of effort, as well as a person's persistence in the face of obstacles*". Bratton et al. (2007:248) defined it as "*a cognitive decision making process that influences the persistence and direction of goal directed behaviour*". Nevertheless, work motivation can also be defined as "*the psychological forces within a person that determines the direction of that person's behaviour in an organisation*" (George & Jones, 2008). This explanation identifies that to attain set targets; individuals must be satisfactorily energetic and be clear about their determinations. Denhardt et al. (2008) also define motivation as an internal state that causes people to behave in a way to accomplish specific goals and purposes. While it is not possible to observe motivation itself, it is possible to observe the outward manifestations of motivation. For instance, the acquisition of money may be an extrinsic motivator, but it is simply the manifestation of the internal drive to meet intrinsic needs like purchasing food, paying rent for shelter, or acquiring high social status. He further stated that motivation is not the same as satisfaction. Satisfaction is past oriented, whereas motivation is future oriented.

Types of Motivation: It is commonly agreed that employee motivation can be separated in intrinsic and extrinsic motivation (Staw, 1976). Staw argues that one of the first attempts to make that distinction was in Herzberg's Two-Factor Theory (1959). However, the discussion about intrinsic and extrinsic motivation is more recent (e.g. Amabile, 1993 and Deci & Ryan, 2000), especially in the area of how intrinsic and extrinsic motivation correlates with employees' job performance (Ramlall, 2008).

As stated above, motivation can be separated in intrinsic and extrinsic motivation. Amabile (1993) explains both further as:

- Individuals are intrinsically motivated when they seek enjoyment, interest, satisfaction of curiosity, self-expression, or personal challenge in the work.
- Individuals are extrinsically motivated when they engage in the work in order to obtain some goal that is apart from the work itself.

Deci (1972) describes extrinsic motivation as, money and verbal reinforcement, mediated outside of the person, whereas intrinsic motivation is mediated within the person. A person is intrinsically motivated to perform an activity if there is no apparent reward except the activity itself or the feelings which result from the activity. Amabile (1993) argues that employees can be either intrinsically or extrinsically motivated or even both. It seems that intrinsic and extrinsic motivators apply differently to persons. Vroom (1964) argues that some employees focus on intrinsic outcomes whereas others are focused on extrinsic outcomes. According to Story et al. (2009), individuals high in intrinsic motivation seem to prefer challenging cognitive tasks and can self-regulate their behaviours, so offering rewards, setting external goals, or deadlines, will do little for them, unless they are also high in extrinsic motivation. Employees high in intrinsic motivation, emphasis could be placed on the engaging nature of the task and encouragement of self-set goals and deadlines (Story et al., 2009).

Hackman and Oldham (1976) even argue that people have individual differences in response to the same work; they differentiate between employees high and low in growth need strength: "*People high in growth need strength are most likely to be motivated by jobs with high skill variety, task identity, task significance, autonomy and feedback. And people low in strength is relatively insensitive for these factors*". This statement is supported by Grimes et al. (1998); they argue that introverts are more extrinsically motivated and extrovert's more intrinsically motivated. However, it not only seems that persons are differently motivated but intrinsic and extrinsic motivations also have effect on each other.

The Relationship between Intrinsic and Extrinsic Motivation

The distinction between intrinsic and extrinsic motivation is evident, however researchers argue that intrinsic and extrinsic motivation also have an effect on each other. Deci (1972) claims that in some cases extrinsic motivators can decrease intrinsic motivation. He argues that if money is administered contingently, it decreases intrinsic motivation. But this event will not occur if the money is non-contingently distributed. Deci and Ryan (2000) replicated an experiment that demonstrates the negative effect of financial rewards on intrinsic motivation and resulting performance. They administered a puzzle to university students in two groups, one group was paid the other not, the latter group reported higher interest in the puzzle working on it longer. Saitovic and Jusufi (2007) reported that the above experiment in a work environment show a similar result, with employees in the group that was offered financial rewards expressing a

feeling of being controlled by the rewards. It was concluded that financial rewards do not sustainable motivate employees to complete work being rewarded for and work identical to it in the future.

Amabile (1993) reacts to this discussion by stating that although extrinsic motivation can work in opposition to intrinsic motivation, it can also have a reinforcing effect: "once the scaffolding of extrinsic motivation is taken care of, intrinsic motivation can lead to high levels of satisfaction and performance" (Amabile, 1993: 54). She also states in her research that both intrinsic and extrinsic values can motivate employees to do their work, however intrinsic and extrinsic motivation can have very different effects on employees.

It can be stated that employees can be intrinsically and/or extrinsically motivated, to perform a certain task (Amabile, 1993). And that extrinsic and intrinsic motivation can reinforce each other, but in some cases extrinsic motivators can also decrease intrinsic motivation (Deci, 1972). Furthermore, researchers argue that not all people are equally motivated; some employees are more intrinsically and others more extrinsically motivated (Furnham et al., 1998).

Research Question

The following were raised in order to execute the investigation:

1. Will be a significant positive relationship between monetary benefits, work culture (extrinsic factors) and sale force performance (performance behaviour and learning agility)?
2. Will be a significant positive relationship between job importance, recognition (intrinsic factors) and sale force performance (performance behaviour and learning agility)?
3. Will be a significant positive relationship between extrinsic motivation, intrinsic motivation, job satisfaction and sale force performance.
4. Will sale force personnel report better performance behaviours and learning agility as a function of satisfaction with extrinsic factors than intrinsic factors?

Research Hypotheses

Four hypotheses were suggested and tested. The hypotheses include:
1. There will be a significant positive relationship between monetary benefits, work culture (extrinsic factors) and sale force performance (performance behaviour and learning agility) across age groups, gender and time in the field?

2. There will be a significant positive relationship between job importance, recognition (intrinsic factors) and sale force performance (performance behaviour and learning agility) across age groups, gender and time in the field?

3. There will be a significant positive relationship between extrinsic motivation, intrinsic motivation, job satisfaction and sale force performance across age groups, gender and time in the field?

4. Sale force personnel will report that performance behaviour and learning agility will be influenced more by satisfaction with extrinsic factors than intrinsic factors across age groups, gender and time in the field?.

Theoretical Framework: Hackman and Oldham (1976)

Hackman and Oldham (1976) specified that when employee satisfaction is considered as well, a circular relationship is formed with performance, satisfaction and motivation.
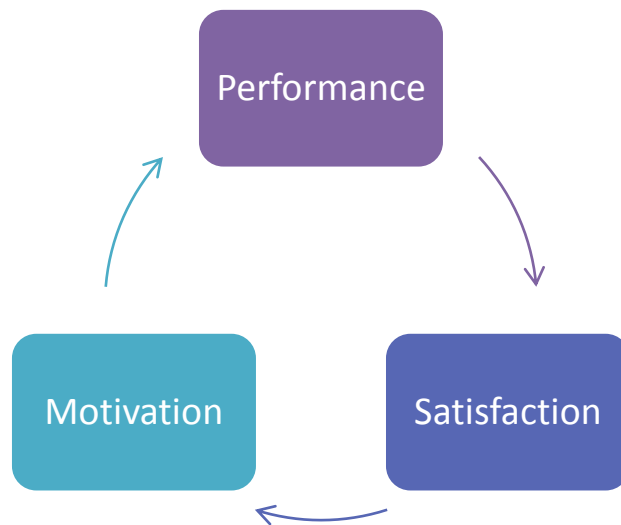
Fig. 4 performance, satisfaction and motivation (Hackman and Oldham, 1976)

The term satisfaction is also used by Herzberg (1959); describing the outcome of the presence of intrinsic factors (motivators) in a job, resulting in an increase in employee motivation. Amabile (1993) states that work performance are dependent upon the individual's level of motivation; which may be intrinsic or extrinsic. Job characteristics (skill variety, task identity, task significance, autonomy and feedback according to Hackman and Oldham (1976)) have also been found to be influential, Brass (1981) opines that when certain job characteristics are present in an

organisation, employees are better motivated and an increase in performance is noticeable. The results of their study indicate that employees who work on jobs scoring high on the five characteristics, show high work motivation, satisfaction and performance (Brass, 1981).

Hackman and Oldham (1976) conclude that employees can be motivated through the design of their work; they argue that by providing certain intrinsic and extrinsic factors an employee can be motivated to perform well. The five job characteristics (skill variety, task identity, task significance, autonomy and feedback) can bring the employee to three "critical psychological states", namely:

1. Experienced meaningfulness of the work,
2. Experienced responsibility for outcomes of the work
3. Knowledge of the actual results of the work activities (Hackman & Oldham, 1976).

According to Hackman and Oldham, the three critical psychological states will lead to high motivation, satisfaction and performance. A visual presentation of their theory is found below.
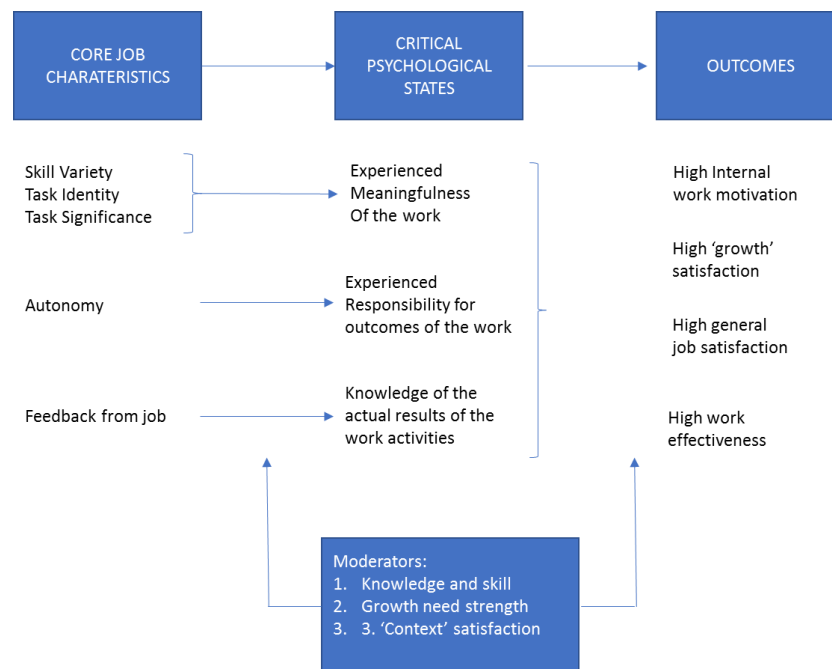

Fig 5 Hackman and Oldham (1976) Theory

Hackman and Oldham (1976) also propose that the growth need strength of the employee has a role in the relationship; where this is high, the employee will respond more positively to a job high in motivating potential than an employee with a low need for growth strength. According to them, growth need strength has a moderating effect on the relationship. This position is also reinforced by Furnham et al. (1998); they state that personality differs in extent to how employees react to intrinsic and extrinsic values. Their research concludes that for the introverted employee, extrinsic factors are more important than intrinsic factors, the reverse is the case for extraverted employees who are more intrinsically motivated. This would lead one to conclude that introverts are less satisfied than extroverts and possibly not high performers. This drives the hypothesis that there is a correlation between personality and performance (Gray, 1975).

The exact correlation between motivation, satisfaction and performance is yet to be defined, however Petty et al. (1984) state that the circular relationship among motivation, satisfaction and performance starts by high performance causing satisfaction. According to the researchers, when the employee performs well on a particular task, satisfaction develops. Because of the internal satisfaction of the employee, the employee is motivated to try to perform well in the future (Brass, 1981).

According to Hackman and Oldham (1976) the result is "*a self-reinforcing cycle of work motivation, driven by self-generated rewards (satisfaction), that will continue until one of the three psychological stages isno longer present, or until the employee no longer values the internal rewards (satisfaction no longer occurs) from his/her good performance*" (Hackman & Oldham, 1976; 112). However, Hackman and Oldham's (1976) theory is based on intrinsic factors because they argue that an increase in extrinsic factors does not lead to an increase in performance in line with Herzberg's 2 factor theory. However, other research suggests that the self-reinforcing circle also could work for extrinsic motivators (e.g. Ansar et al., 1997; Kraimer et al., 2005).

The motivation theorists such as Maslow (1946), Herzberg (1968), Alderfer (1972) and McClelland (1988) have suggested specific things that managers can do to help their subordinates become self-actualized, because such employees are likely to work at their maximum creative potential when their needs are met. They agree that by promoting a healthy

workforce, providing financial security, providing opportunities to socialize and recognizing employees" accomplishments help to satisfy the employees" physiological needs which in turn also increase their performance. Koch et al, (1996) states that recognition of a job well done or full appreciation for work done is often among the top motivators of employee performance and involves feedback. Positive feedback follows the principles advocated in Reinforcement Theory, which states that behaviour is contingent on reinforcement.

Motivation in the Workplace: Intrinsic and Extrinsic Motivation of Employees

Intrinsic Motivation: Amabile (1993) states in her research that employees can be intrinsically and/or extrinsically motivated. According to her there exist jobs which are purely extrinsic motivated, however pure intrinsically motivated jobs are scarce. Deci (1972) states that employees can be motivated to perform well by the job itself and can derive satisfaction from a good performance. The five job characteristics, as proposed by Hackman and Oldham (1976), Brass (1981), Griffin et al. (1981), etc, are intrinsic motivators. These are:

1. Skill variety
2. Task identity
3. Task significance
4. Autonomy
5. Feedback

They are designed as such based on Herzberg's (1959) theory, which states that only intrinsic factors can lead to an increase in motivation; as extrinsic (Hygiene) factors cannot cause motivation, they can only cause de-motivation when not present on the job.

This statement is also reinforced by Deci (1972); according to him there are two essential aspects to motivating employees intrinsically.

1. Designing tasks which are interesting.
2. Allowing workers to have some say in decisions which concern them, also known as autonomy.

Salary is an extensively researched extrinsic motivator. Since it is labelled as an extrinsic factor, it is not perceived as causing motivation in the workplace (Herzberg, 1959). However recent

research of Ansar, Cantor & Sparks (1997) resulted in evidence that higher wages directly affect job performance. The researchers propose that paying higher salaries reduce employee turnover rates saving the organisation from associated costs which may be high.

Rynes et al. (2004) emphasis this in their work proposing that pay may be the most important motivational factor. Jurgensen (1978) concluded that job applicants seem to believe that pay is the most important attribute to everyone except themselves. Ansar et al. (1997) also argue that that lowering wage levels to market parity can even reduce worker productivity. However, Deci (1972) argues that pay can decrease intrinsic motivation concluding from his research that if payments are non-contingently presented it decreases intrinsic motivation and it does not if payments are contingently presented. Pay may increase job performance according to aforementioned studies however a high commitment to supervisors and peers in addition to high job security can obtain the same results (Becker et al., 1996; Kraimer et al., 2005). However Becker et al (1996) state that overall commitment to the organisation is not correlated with job performance. According to Lindner (1998), managers should begin by focusing on pay and job security before focusing on the five intrinsic job characteristics. Furthermore, the reinforcing cycle of performance is applicable to salary, commitment to supervisors and peers and job security; through providing one or more of these factors a higher performance is established, which causes satisfaction for the employee and results in a higher motivation to perform well in the future.

In summary, it is argued by researchers that extrinsic factors do not contribute to an increase in performance, however, it seems that for some forms of extrinsic factors the opposite is true; salary, commitment to supervisors and peers in addition job security can increase job performances.Through providing one or more of these factors a higher performance is established, therefore the employee gains external satisfaction and is motivated to perform well in the future. But managers should be careful with extrinsic motivational factors, since in some cases they can decrease intrinsic motivational factors. There is limited literature on the factors influencing motivation of sales teams in pharmaceutical companies in Nigeria. This study therefore will seek to fill the gap by contributing empirical content to the body of knowledge on the psychological predictors of sales force motivation in Nigeria Pharmaceutical industries.

Method

Setting

Data for this study was collected from different groups of medical sales representatives from three Pharmaceuticals industries in Lagos via an online survey platform, which includes GlaxoSmithKline Pharmaceuticals Nigeria Ltd, Fidson Healthcare Plc, Evans Medicals Plc, and Ranbaxy Nigeria Ltd all located in the Lagos Metropolis.

Participants

One hundred and twenty (120) medical sales representatives comprising of female and male participated successfully in the survey. Names, email addresses and their teams were provided for the study by the Sales department administrator and verified to be up to date and accurate. One hundred and eighty (180) questionnaires were administered through the on-line survey. One hundred and twenty respondents responded satisfactorily to the survey which represents about 66.6% response rate: they completed adequately all relevant sections of the survey, respondents were assured of strict confidentiality of their response and so names, departments and company were strictly optional or not needed.

Design

A cross sectional research design was adopted in this study and involves a study of a group in a particular moment in time. This has been chosen as it is relatively easy to execute, especially as the time frame for the study is less than 8 weeks, furthermore it is relatively inexpensive compared to a longitudinal study which studies the same people over a long period of time to account for change. The inability to account for change is the most significant disadvantage of the study design adopted.

Instrument

Three psychological instruments were employed, which include:

(1). *Extrinsic Motivation Scale (EMS).* Sale force persons Extrinsic Motivation was measured by Extrinsic Motivation Scale (EMS) developed and validated by Oshin and Akinbode (2018). EMS was a 10-items scale on a 4-point Likert scale rating (e.g. Agree - 4 to Strongly Disagree – 1), which was designed to obtain a skill measure of sale force extrinsic motivation. The scale has

two subscales that measures different aspects of Extrinsic motivations at work: (a) 8-items Work Culture Scale (WCS) and (b) 2-items Monetary Benefit Scale (MBS). Oshin and Akinbode (2018) obtained a Cronbach's alpha coefficient 0.91 and a concurrent validity of 0.87.

(2) *Intrinsic Motivation Scale (IMS)*: Intrinsic motivation among the selected sale force persons was assessed by Intrinsic Motivation Scale (IMS) scale developed by Oshin and Akinbode (2018) for the purpose of obtaining a skill measure of factors that constitute intrinsic motivations among sale persons. IMS is also a 10-items scale on a 4-point Liker rating scale (e.g. Agree - 4 to Strongly Disagree – 1), which was designed to obtain a skill measure of different aspects of sale force extrinsic motivation typical of workplace. The authors Oshin and Akinbode (2018) obtained a Cronbach's alpha coefficient 0.81 and a concurrent validity of 0.80.

(3) *Work Performance and Productivity Scale (WPPS):* Work performance and productivity of sale force personnel were assessed with Work Performance and Productivity Scale (WPPS) developed by Oshin and Akinbode (2018) for the purpose of this study. WPPS is a 5-items scale on 4-point Liker rating sacle designed to measure aspects of sales force personnel performance and productivity. There are two subscale in the test: (a) 3-items Performance behaviour measures and (2) 2-items that is measuring sales force learning agility. Similarly, the authors Oshin and Akinbode (2018) obtained a Cronbach's alpha coefficient 0.72 and a concurrent validity of 0.76.

Procedure

The questionnaires were developed for the purpose of this investigation and used to collect the required data from the selected sample via an online platform. There are four major sections in the questionnaire; a demographic section that captured data on the age, sex and length of time in field of the respondents. The other three segments collect responses related to the extrinsic motivation, intrinsic motivation and performance factors. Response structure was typically 4-point Likert Type rating Scale. In order to determine related variables factors analysis was employed to identifying commonalities. Median Analysis was employed to determine the relationship between extrinsic and intrinsic factors of motivation, while Correspondence Analysis was used to determine the relationship between level of motivation and performance.

Results

The following graphs show the frequencies of responses for the different questions that make up the measure.

Chart 1.1: Frequency of responses to questions that relate to extrinsic factors of motivation
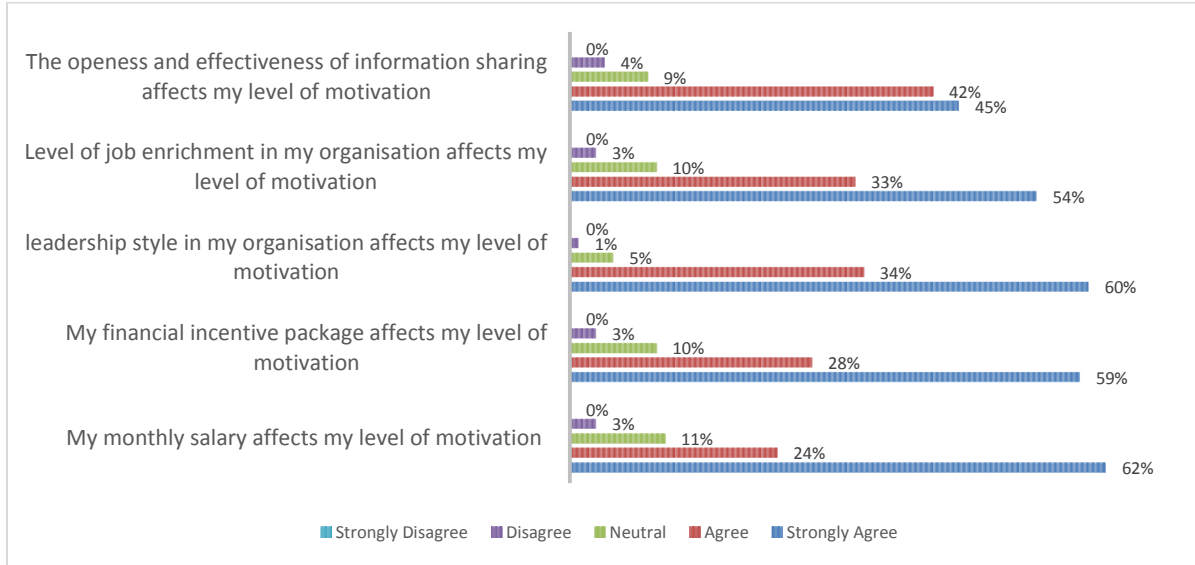
Chart 1.2: Frequency of responses to questions that relate to extrinsic factors of motivation
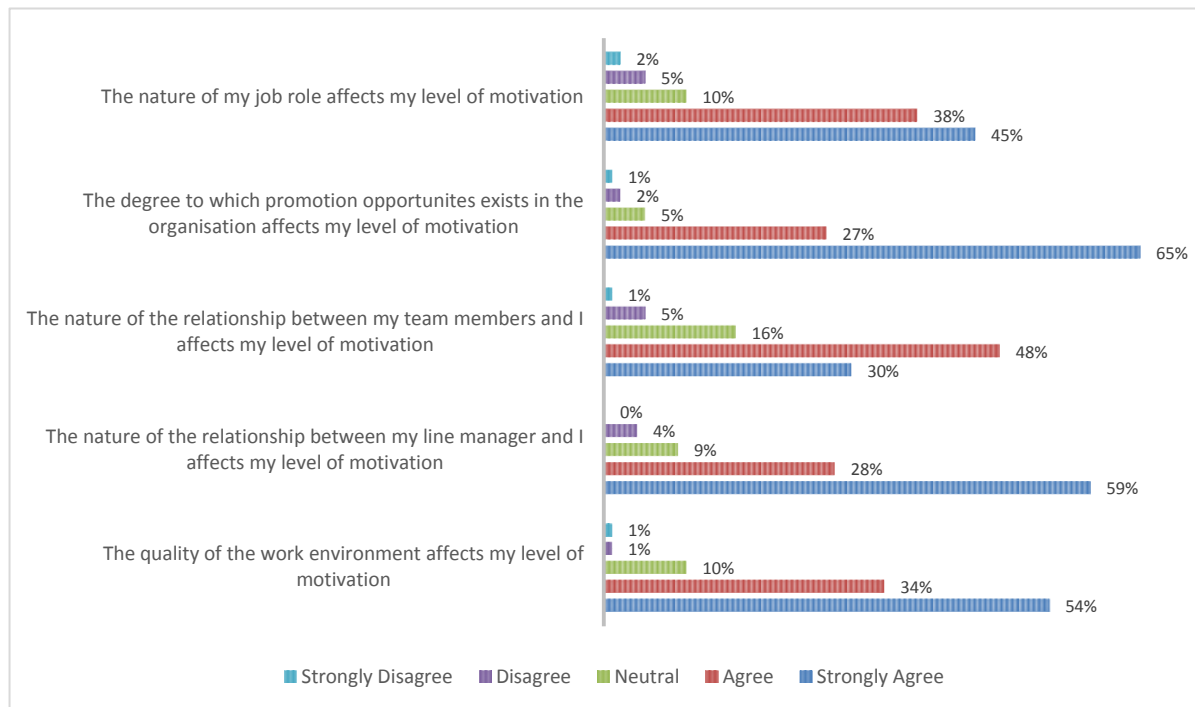
On average 53% of the 110 respondents strongly agreed and 34% agreed that the factors being surveyed influenced their motivation. The other 13% of the respondents were either neutral (10%) or disagreed/Strongly disagreed (3%).

Chart 2.1: Frequency of responses to questions that relate to intrinsic factors of motivation
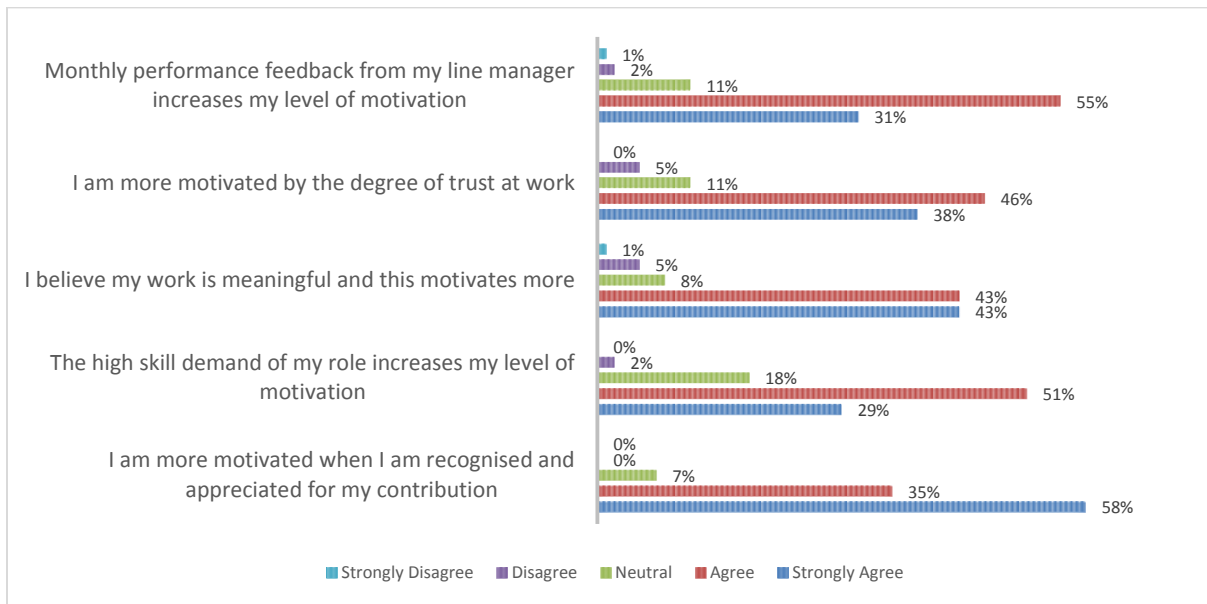
Chart 2.2: Frequency of responses to questions that relate to intrinsic factors of motivation
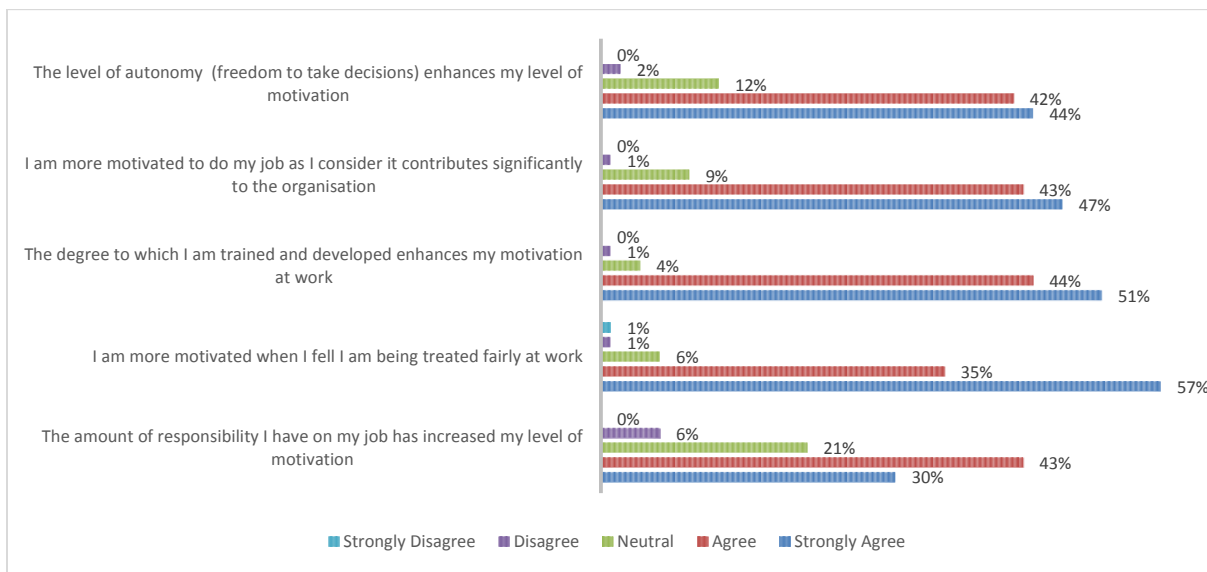
Chat 2.2 show the responses to questions that relate to intrinsic factors of motivation. On the average 43% of the 110 respondents strongly agreed and 44% agreed that these factors being surveyed influenced their motivation. The other 14% of the respondents were either neutral (11%) or disagreed (3%). The result further revealed that autonomy, training, fair treatment and responsibility on the job enhances sales force motivation among the sampled participants.

Chart 3.1: Frequency of responses to questions that relate to effect of motivation on performance
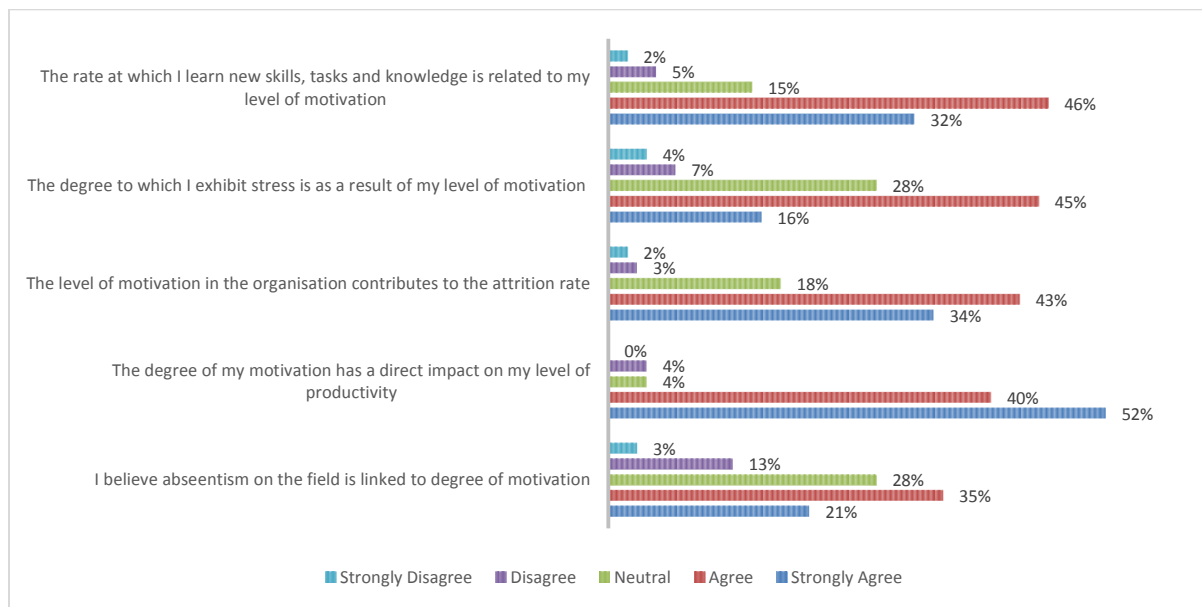
The graph in Chat 3.1 presents the responses to questions that relate to influence of motivation of performance or productivity of the sampled respondents. Results revealed that 31% of the 110 respondents strongly agreed, while 42% reported that new skills, employees attrition rate, job stress and absenteeism were all significant indicators of level of motivation among sales force men and women. It is worthy of note that 19% of the respondents were neutral with 8% disagreeing (6%) and strongly disagreeing (2%). As previously mentioned frequency and median data may not accurately provide an indication of the insight inherent in the responses; to achieve this, a factor analysis was undertaken following the ranking of all responses per section in descending order of strength with positive agreement as presented in the subsequent paragraphs.

Factor Analysis

The factor analysis was undertaken to either confirm or reject the hypothesis that two factors are sufficient to explain the 10 variables each of the extrinsic and intrinsic factors of motivation in addition to the five variables of the performance factors influenced by motivation levels.

The following is a summary of outcome of the analysis, with details in appendix 3.

Factor Analysis of Extrinsic Factors

Table 2.1: Factor Analysis Summary of Extrinsic Factors

	Factor 1	Factor 2
SS Loadings	4.095	2.087
Proportion Variance	0.410	0.209
Cumulative Variance	0.410	0.618

- The chi square statistic is 34.81 on 26 degrees of freedom.
- The p-value is 0.116

From the summary results above, 2 factors are sufficient to explain the 10 variables as seen by the chi square test with its p-value > 0.05. The first 2 questions based on the positive agreement strength ranking are related to monetary benefits as seen by their high factor loadings in factor 2. The other 8 questions relate to the work culture of the organization as seen by their high loadings in factor 1.

Table 2.2: Identified commonalities and factors: Extrinsic Factors of Motivation

Questionnaire Questions
My monthly salary affects my level of motivation
My financial incentive package affects my level of motivation
Leadership style in my organisation affects my level of motivation
Level of job enrichment in my organisation affects my level of motivation
The openness and effectiveness of information sharing affects my level of motivation
The quality of the work environment affects my level of motivation
The nature of the relationship between my line manager and I affect my level of motivation
The nature of the relationship between my team members and I affect my level of motivation
The degree to which promotion opportunities exists in the organisation affects my level of motivation
The nature of my job role affects my level of motivation

Monetary Benefits

Work Culture

Factor Analysis of Intrinsic Factors

Table 3.1: Factor Analysis Summary of Intrinsic Factors

	Factor 1	Factor 2
SS Loadings	2.238	1.718
Proportion Variance	0.224	0.172
Cumulative Variance	0.224	0.396

- The chi square statistic is 36.38 on 26 degrees of freedom.
- The p-value is 0.0849

From the results above, 2 factors are also sufficient to explain the 10 variables as seen by the chi square test with its p-value > 0.05. Factor 1 relates to job importance/satisfaction while factor 2 relates to recognition as seen by their high loadings. Scores and detail of the analysis is presented in Table 3.2.

Table 3.2: Identified commonalities and factors: Intrinsic Factors of Motivation

Questionnaire Questions	
I am more motivated when I am recognised and appreciated for my contribution	Job Importance / Satisfaction
The high skill demand of my role increases my level of motivation	
I am more motivated when I feel I am being treated fairly at work	
The degree to which I am trained and developed enhances my motivation at work	Recognition
The level of autonomy (freedom to take decisions) enhances my level of motivation	
I believe my work is meaningful and this motivates more	
I am more motivated by the degree of trust at work	
Monthly performance feedback from my line manager increases my level of motivation	
The amount of responsibility I have on my job has increased my level of motivation	
I am more motivated to do my job as I consider it contributes significantly to the organisation	

Factor Analysis of Performance Factors Influenced by Motivation Levels

Table 4.1: Factor Analysis Summary of performance factors influenced by motivation levels

	Factor 1	Factor 2
SS Loadings	1.274	1.258
Proportion Variance	0.255	0.252
Cumulative Variance	0.255	0.506

- The chi square statistic is 6.46 on 1 degrees of freedom.
- The p-value is 0.011

From the results above, 2 factors are not sufficient to explain the 5 variables at 5% ($p<0.05$) significance level but they are at 1% as seen by the chi square test with its p-value > 0.01. We can see that factor 1 relates to performance behaviours at work while factor 2 relates to learning agility as seen by their high loadings.

Table 4.2: Identified commonalities and factors: Performance Influence of Motivation

Questionnaire Questions	
I believe absenteeism on the field is linked to degree of motivation	Performance Behaviour
The degree of my motivation has a direct impact on my level of productivity	
The level of motivation in the organisation contributes to the attrition rate	Learning Agility
The degree to which I exhibit stress is as a result of my level of motivation	
The rate at which I learn new skills, tasks and knowledge is related to my level of motivation	

Based on the above factor analysis, the following variables of motivation have emerged

Table 5: Identified Variables of motivation

Type of Motivation /Influence of Motivation	Identified Variables of Motivation
Extrinsic Factors of Motivations	Monetary Benefits
	Work Culture
Intrinsic Factors of Motivation	Job Importance/Satisfaction
	Recognition
Performance Influence of Motivation	Performance Behaviours
	Learning Agility

In order to the influence of these six new variables on Age Group, Sex and Time in Field a Kruskal-Wallis rank sum test was conducted to determine if there are any differences in the observed reported indices of motivation among the different age groups surveyed. The results of the analysis are presented in Tables 6.0, 7.0 and 8.0, respectively.

Influence of Factors of Motivation on Sales Representatives by Age

Kruskal-Wallis rank sum test was conducted to determine if there are any differences in the influence of the above six new variables on motivation in the different age groups surveyed. The age groups surveyed are 20 – 25, 26 – 30, 31 – 35 and 36 – 40. The hypothesis is that there will be a statistically significant difference across the age groups of the influence of the performance indicators of motivation. Results of the analysis is presented in Table 6.0.

Table 6.0: Influence of Factors on Motivation on Sales Representatives by age

Variables of Motivation	Analysis Parameters	Comments
Monetary Benefits	Kruskal-Wallis chi-squared = 3.9635, df = 3, p-value = 0.2654	The hypothesis that all age groups have same median is rejected (p<0.05). **This implies that monetary benefits influenced motivation levels in all age groups sampled.**
Work Culture	Kruskal-Wallis chi-squared = 2.2246, df = 3, p-value = 0.5271	The hypothesis that all age groups have same median is rejected (p<.05). **This implies that work culture influences motivation in all age groups surveyed.**
Job Importance / Satisfaction	Kruskal-Wallis chi-squared = 1.8267, df = 3; p-value = 0.6091	The hypothesis that all age groups have same median is accepted (p>0.05). **This implies that job importance / satisfaction sparingly influence level of motivation in all age groups surveyed**
Recognition	Kruskal-Wallis chi-squared = 4.7729, df = 3, p-value = 0.1892	The hypothesis that all age groups have same median is rejected (p<0.05). **This implies that recognition as a factor of motivation is statistically relevant in all age groups surveyed.**
Performance Behaviour	Kruskal-Wallis chi-squared = 5.3169, df = 3, p-value = 0.15	The hypothesis that all age groups have same median is rejected (p<0.05). **This implies that performance behaviour is impacted by motivation levels in all age groups surveyed.**
Learning Agility	Kruskal-Wallis chi-squared = 0.67942, df = 3, p-value = 0.878	The null hypothesis that all age groups have same median is accepted (p<0.05). **This implies that learning agility is not a significant indicator of motivation among the all age groups surveyed.**

Influence of Factors on Motivation on Sales Representatives by Gender

Kruskal-Wallis rank sum test was conducted to determine if there are any differences in the influence of the above six new variables on motivation in both gender groups surveyed. Genders surveyed were male and female. The hypothesis is that there is no difference in the influence of the factors of motivation in both gender groups. Please refer to Appendix 4b for graphical representation of the results of the analysis.

Table 7.0: Influence of Factors on Motivation on Sales Representatives by Gender

Variables of Motivation	Analysis Parameters	Comments
Monetary Benefits	Kruskal-Wallis chi-squared = 0.013378, df = 1, p-value = 0.9079	The null hypothesis that gender groups have same median is not rejected (p>0.05). This implies that monetary benefits impact level of motivation in both gender groups surveyed.
Work Culture	Kruskal-Wallis chi-squared = 1.323, df = 1, p-value = 0.2501	The null hypothesis that gender groups have same median is not rejected (p>0.05). This implies that work culture influences motivation in both males and females to the same statistical measure.
Job Importance / Satisfaction	Kruskal-Wallis chi-squared = 2.9155, df = 1, p-value = 0.08773	The null hypothesis that all gender groups have same median is not rejected at 5% (p>0.05) significance level but it is rejected at 10% significance level. This implies that job importance / satisfaction is statistically equally relevant as a motivator in all gender groups surveyed; however, it should be noted that there is a probability that it differs due to the closeness of the p-value to the significance level (0.08773 and 0.05 respectively). in the event of this probability (significance level of 10%) males are more motivated by job importance/ satisfaction than females.
Recognition	Kruskal-Wallis chi-squared = 0.21958, df = 1, p-value = 0.6394	The null hypothesis that both gender groups have same median is not rejected (p>0.05). This implies that recognition is equally relevant as a motivator in both gender groups surveyed.
Performance Behaviour	Kruskal-Wallis chi-squared = 2.6161, df	The null hypothesis that both gender groups have same median is not rejected (p>0.05).

	= 1, p-value = 0.1058	This implies that performance behaviour is impacted by motivation levels in both gender groups surveyed.
Learning Agility	Kruskal-Wallis chi-squared = 2.981, df = 1, p-value = 0.08425	The null hypothesis that both gender groups have same median is not rejected at 5% (p>0.05) significance level but it is rejected at 10% significance level. This implies that Learning agility is statistically equally influenced by level of motivation in both gender groups surveyed; however, it should be noted that there is a probability that it differs due to the closeness of the p-value to the significance level (0.08425 and 0.05 respectively). In the event of this probability (significance level of 10%) males are less likely to be open to learning if motivation levels are low.

Influence of Factors of Motivation on Sales Representatives by Time in Field

Kruskal-Wallis rank sum test was conducted to determine if there are any differences in the influence of the above six new variables on motivation based on length on the job role i.e. time in field of the medical representatives surveyed. The following time in field groups were surveyed: Less than 1 year, 1 – 3 years, 3 – 5 years, above 5 years. The hypothesis is that there is no statistically significant difference across the time in field groups on the influence of the factors of motivation. Please refer to appropriate graphical representation of the results of the analysis.

Table 8.0: Influence of Factors on the Motivation of Sales Representatives by time in field

Variables of Motivation	Analysis Parameters	Comments
Monetary Benefits	Kruskal-Wallis chi-squared = 3.4786, df = 3, p-value = 0.3235	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05). **This implies that monetary benefits influence level of motivation in all time in field groups surveyed.**
Work Culture	Kruskal-Wallis chi-squared = 3.0546, df = 3, p-value = 0.3833	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05). **This implies that work culture influence level of motivation in all time in field groups surveyed.**

Job Importance / Satisfaction	Kruskal-Wallis chi-squared = 7.1756, df = 3, p-value = 0.06651	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05) significance level but it is rejected at 10% significance level. **This implies that job importance / satisfaction statistically equally influences motivation across all time in field groups surveyed; however, it should be noted that there is a probability that this influence differs across the groups due to the closeness of the p-value to the significance level (0.06651 and 0.05 respectively). In the event of this probability (significance level of 10%) job importance/ satisfaction influences motivation of MSRs below 1 year on the field most.**
Recognition	Kruskal-Wallis chi-squared = 0.33712, df = 3, p-value = 0.9529	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05). **This implies that recognition influences level of motivation in all time in field groups surveyed.**
Performance Behaviour	Kruskal-Wallis chi-squared = 0.98291, df = 3, p-value = 0.8054	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05). **This implies that level of motivation influences performance behaviours in all time in field groups surveyed.**
Learning Agility	Kruskal-Wallis chi-squared = 4.1326, df = 3, p-value = 0.2475	The null hypothesis that medical sales representatives grouped according to time in field have same median across the groups is not rejected (p>0.05). **This implies that level of motivation influences learning agility in all time in field groups surveyed**.

Extrinsic Vs Intrinsic Factors

A median analysis was undertaken using the factor analysis scores to compare strength of responses of both extrinsic and intrinsic with a view to determine which of the types of motivation is more important to the medical sales representatives.

Chart 4.0: Median Analysis of Extrinsic and intrinsic factors of motivation
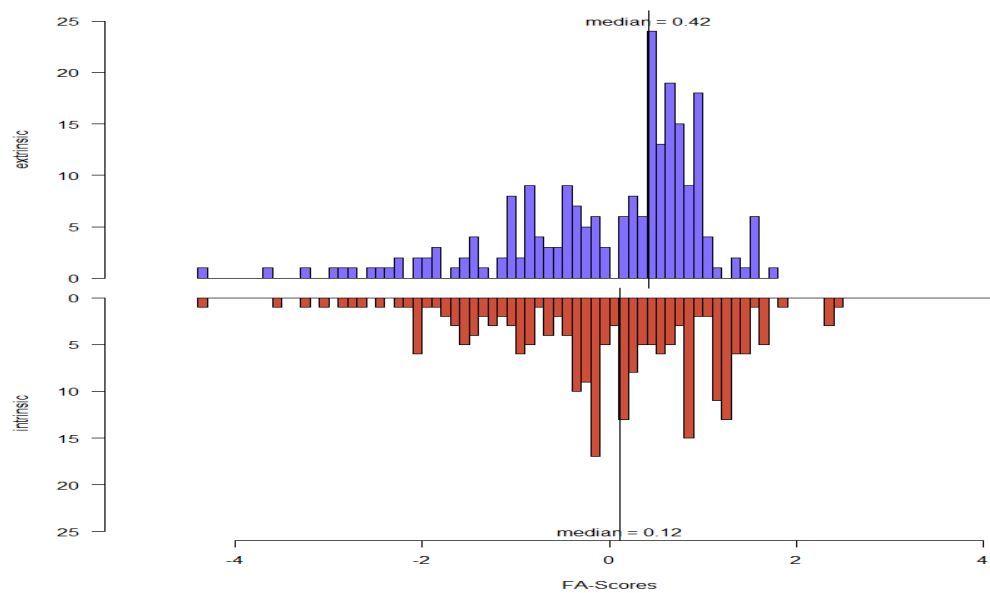
From the above extrinsic factors of motivation related to monetary benefits and work culture influence the medical sales representatives in the pharmaceutical company in Lagos, Nigeria being investigated more than intrinsic factors of motivation related to job importance/satisfaction and recognition.

Motivation Influence on Performance

To determine the relationship between level of motivation and performance of the medical sales representatives in the Lagos, Nigeria based pharmaceutical company a correspondence analysis was undertaken. The findings show that level of motivation impacts level of productivity (perf. 2) more than other elements of performance investigated, however attrition rate (perf. 3) and learning new skills, tasks and knowledge (perf. 5) also showed strong affinity for both extrinsic and intrinsic factors of motivations investigated. Absenteeism (perf. 1) and stress (perf. 4) related to level of motivation show less affinity for external and internal factors of motivation investigated.

Chart 5.0: Correspondence Analysis showing affinity of factors of motivation to performance
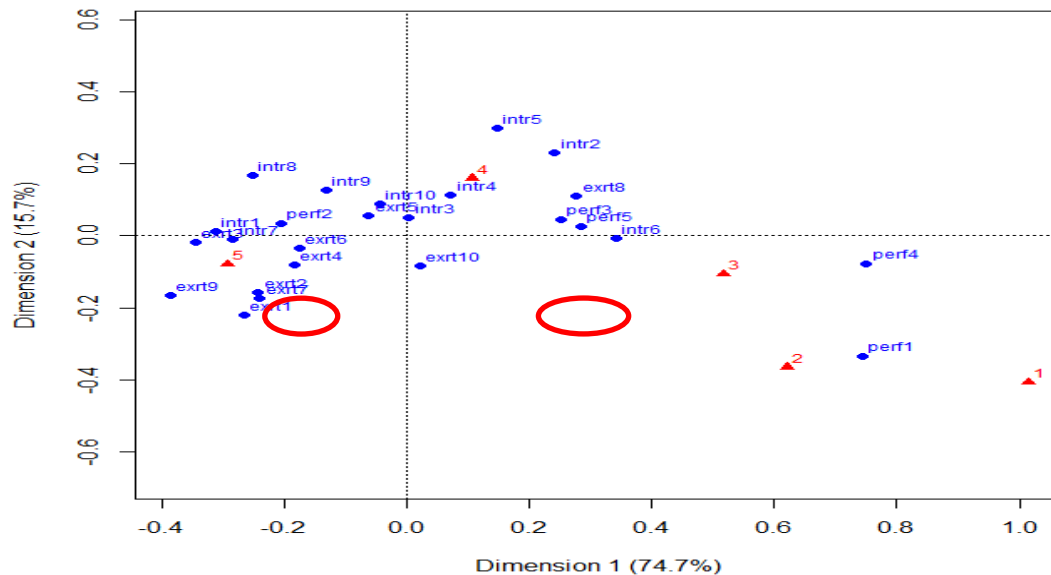
Discussion

The objective of the study was to determine the intrinsic and extrinsic factors that influence motivation of sales teams and the influence of this on their performance among some sales forces personnel of some selected pharmaceutical company in Lagos. An overview of the frequency data indicate clearly that both intrinsic and extrinsic factors influence motivation of sales force personnel as reported by about 87% of respondents thereby accepting hypothesis one which stated that there will be a positive significant relationship between intrinsic and extrinsic factors and sales force performance.. However, and expectedly more respondents strongly agreed that extrinsic factors influenced their motivation (53%) relative to the 43% of the respondents that strongly agreed to the intrinsic factors, which further amplify the findings of Anderson and Oliver (1987), Chowdhury (1983), Dubinsky, et al., (1994) and Walker et al (1977) respectively.

One major finding from our study was that extrinsic factors influence motivation more than intrinsic factors and it is very consistent with the finding reported by Cravens et al, (1993) as well as that of Ryan and Deci (2000). This was confirmed by the median analysis which examined reported responses related to extrinsic factors which yielded a median index of 0.42

relative to 0.12 for intrinsic factors. This result is apt and suggests inter-alia that sales management need to ensure monetary benefits such as market competitive salaries and attractive financial incentive schemes are implemented in combination with a work culture that is moulded by positive leadership style, openness, acceptable work environment, good relationships and fosters job enrichment policies to motivate their sales teams. This finding indirectly implies that intrinsic factors are not valid predictors of motivation among the sampled sales force personnel, which is very instructive particularly for human resources management practitioners in Nigeria.

Further, correspondence analysis conducted revealed that level of intrinsic and extrinsic motivations influence performance of sales teams, the hypothesis was confirmed as the performance variables showed high affinity for both intrinsic and extrinsic factors of motivation as hitherto earlier suggested by Deci (1972), Amabile (1993) and Ramlall (2008). Performance factors of absenteeism and stress showed the least affinity, relative to impact of motivation on productivity, attrition rate and learning. It is indeed plausible that a motivation and stress do not correlate as a sales representative may exhibit stress whether or not he/she is motivated, the same applies for motivation. More work needed to be done in this very aspect to expand our understanding and also to proffer more practical solutions to further empower both sales representatives and sales management teams.

Factor analysis conducted to investigate the extrinsic factors which relate to salary and financial incentives. Salary and financial incentives were analysed as monetary benefits while factors that related to prevailing leadership style, job enrichment practice, information sharing, work environment, vertical and horizontal relationships, promotion opportunities and job role nature came in with high factor loadings and were classified as work culture. Intrinsic factors that addressed recognition and appreciation, role skill demand, sense of equity, training and level of job autonomy where clustered as job importance and satisfaction; while questions that related to meaningfulness of work, trust, feedback received, level of responsibility and sense of contribution where clustered as recognition. These intrinsic states represent the sales representative psychological response to varying job elements and serve to provide managers with an indication of the best approach to effective sales management. Monetary benefits, job autonomy, responsibility and recognition had significant higher loading, which by implication means that these factors are valid predictors of sales performance among sales force personnel.

Further, factor analysis was also undertaken for the performance questions/responses as well, leading to two clusters namely, performance behaviour, a cluster of factors which include absenteeism, level of productivity, attrition rate and stress while learning agility represents the factor that addresses learning of new skills. It needs to be emphasised that these clusters were an output of statistical analysis and found to be statistically relevant and applicable. To appreciate the dynamics of the findings the responses were analysed based on the demographic data provided by the respondents, namely age, gender and length of time in field as a sales representative. The results following Kruskal Wallis chi squared determination reveal that irrespective of the age of the sales representative between the ages of 20 and 40 monetary benefits, work culture, job importance and recognition are predictors of motivation therefore policies in a sales organisation need address these factors and incorporate elements that drive these names predictors positively. On examining the variables in the context of gender, male and female surveyed monetary benefits, work culture and recognition are predictors of motivation to both genders to the same statistical measure; however there is a probability that males are more motived by job importance / satisfaction than females. Based on this males have a higher need to be recognised and appreciated for contribution and probably interpret this as a measure of fairness. They are driven by the role being perceived as demanding high skill and require training. This may be linked to disproportionate power structures in gender and the need for the male to be considered and treated as superior.

Variations in time in field was also assessed for the predictors of motivation, it was identified that for the three groups identified; below 1 year, 1 – 3 years, 3 – 5 years, 5years and above monetary benefits, work culture and recognition are predictors of motivation to the same statistical measure; however there is a probability that young sales representative below a year in field are seek job importance / satisfaction and are driven by recognition, appreciation, fairness, perception of demand for high skill and training. Being new to the job these factors may indeed be exciting to fresher's and would serve well to be used to advertise sales representative roles with a view of attracting the best talent. Sales representative that have been in field for 5 years and above often have started to consider other roles and job importance / satisfaction tends to diminish.

The study also considered the influence of motivation levels on performance, where performance refers to doing the required on the role. Performance behaviours and learning agility were assessed for impact by motivation based on age, gender and time in field. In terms of age and time in field, the impact of motivation on performance behaviours and learning agility is statistically same across all age groups and time in field brackets surveyed. Nevertheless, gender analysis reveals that though the performance behaviour of male and female sales representatives are statistically equally influenced, learning agility may not be as the study shows that male sales representatives are less likely to be open to learning if motivation levels are low. The implication of this is that for sales management to ensure that new skills are learnt and practice with the view of achieving higher sales for the organisation the need to ensure adequate motivation is present in the team especially among male sales representatives is critical. As the study reveals job importance/satisfaction is a key predictor of motivation for male sales representatives, effort must be made to ensure policies are implemented to drive this.

Conclusion

This study has demonstrated that the intrinsic and extrinsic factors that influence motivation of sales teams are: Extrinsic Factors: salary and financial incentives, prevailing leadership style, job enrichment practice, information sharing, work environment, vertical and horizontal relationships, promotion opportunities and job role nature. While, Intrinsic factors are: recognition and appreciation, role skill demand, sense of equity, training, level of job autonomy, meaningfulness of work, trust, feedback received, level of responsibility and sense of contribution, thereby supporting the validity of Hackman and Oldhamns (1976) model of employees motivation and job satisfaction.

Furthermore the outcome of the study showed that extrinsic factors affect motivation of sales representatives more than intrinsic factors and motivation levels influence performance of sales teams. The study was however limited by a number of factors and more studies need to be carried out to provide more context for the different variables, identify stronger correlation and causation of the predictors and understand the underlying reason and driver of the different predictors. The study has revealed that for management to increase performance and productivity the medical sales representatives need to be motivated and this can be done effectively by

developing initiatives and policies that offer acceptable and fair remuneration and attractive incentive packages, means must be sought to build stronger relationship with leadership and promotion opportunities that drive job enrichment and satisfaction need to be created furthermore a system and culture needs to be created and built that drives effective giving and receiving feedback on performance, builds trust, recognises and rewards good work.

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HOPELESSNESS AND TRAUMATIC EVENTS AS CORRELATES OF SUICIDAL IDEATION AMONG MALE INMATES OF A MAXIMUM CORRECTIONAL FACILITY IN LAGOS, NIGERIA

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Abstract

This study examined hopelessness and history of traumatic events as correlates of suicidal ideation among male inmates of a Maximum-security correctional facility. A sample of 243 participants was used for the study, and a battery of psychological tests consisting of Beck's Hopelessness Scale(BHS), Trauma History Questionnaire(THQ)and the Scale of Suicidal Ideation (SSI) were instruments used. Data gathered from participants were analyzed using Pearson product-moment correlation. The results from the analyses revealed that the relationship between hopelessness and suicidal ideation was significant. Furthermore, the results showed that there is a significant relationship with suicidal ideation. Thus, it was concluded that as hopelessness increased, and with a history of traumatic events, there was a greater propensity towards suicidal ideation among male inmates in a maximum-security correctional facility. These results were discussed in line with past literature and recommendations made for future research.

Keyword: Hopelessness, Traumatic Events, Suicidal Ideation, Correctional Facility

Introduction

When people go through stress, difficult or unprecedented situations, when they have mental or physical challenges or events in life, they sometimes tend to have feelings or thoughts of ending their lives. These thoughts about taking one's life may or may not include a plan is what is referred to as suicidal ideation. Suicidal ideation, therefore, refers to thinking about, considering, or planning a suicide (Klonsky, 2016). Suicidal ideation could also be regarded as thoughts or intent to terminate one's life which may then progress to suicidal behaviour and has led to the death of many individuals. Many people believe that suicidal thoughts may be a symptom of an underlying problem as these thoughts are disturbing and may lead to suicide if not properly managed by a mental health professional. According to the World Health Organization (WHO

2014), suicide is one of the leading causes of death across the world. A study conducted by (Stokes, McCoy, Abram, Byck & Teplin, 2015), showed that suicidal behaviour and ideation are major mental health concerns and that suicidal ideation is not limited to a particular race, nationality, religion or culture. Many studies have shown predisposing causes of suicidal ideation, including hopelessness and traumatic events. The link between traumatic events and suicidal ideation has been explored by researchers, e.g. Stein, Chiu, et al. (2010) reported that there exists a unique association between a series of traumatic events and the subsequent occurrence of suicidal ideation, plans, and attempts by comparing data from different countries.

Hopelessness refersto a system of cognitive schemas whose common factor is undesirable expectations about the future (Beck, Weissman, Lester, & Trexler, 1974). In other words, it is a state of mind in which one's expectation that highly desirable outcomes will not occur and that one is powerless to change the situation (Schneider, 2012).Individuals with suicidal ideation have been negatively impacted by Hopelessness as a risk factor, owing to the fact that individuals have lost the ability to cope with adversity thereby hindering their ability to achieve expected goals (MacLeod, et al (1998). A number of negative events which include loss, death, failures, and disappointments have been known to lead persons to the negative expectation of future events. Marsiglia, Kulis, & Parsai,(2011). Sokero, Eerola, Rytsälä, Melarti & Leskelä 2006) reported that hopelessness is one of the leading causes of suicide in almost global dimensions.

People who are incarcerated are already traumatised by the very loss of their freedom made worse by additional factors including ill-treatment from prison wardens, poor feeding, being wrongfully convicted, delayed justice (awaiting trial), lack of finance, emotional detachment, a draw back in social support especially from family members, and the number of years incarcerated in the facility, etc. According to Kubiak, Covington, & Hiller (2017), the majority of persons who encounter the criminal justice system including prisons, jails and detention centres tend to have a history of traumatic experiences sometime in their lifetime. Thus according to the theory of the cycle of violence, individuals that are incarcerated are first victims before they became offenders whereas confinement is intended for perpetrators (Miller & Najavits, 2012; (Widom& Maxfield 2001). Thus, people who are confined, carry along with them private histories of trauma experience and become further traumatised. These can further

lead to intense feelings of fear, helplessness and horror thereby further depreciating their mental health. The connections between traumatic events at an early age and future criminal behaviour, both in infancy and adolescence, have been studied by some researchers(e.g. Ardino,1999; Foy et al, 2011 & Widom, 1989).They showed that a significant number of young offenders had suffered at least one traumatic event in the past, while more than half of the incarcerated adults had suffered some moderate to severe trauma**.** Other studies comparatively, (Kerig, Ward, Vanderzee, & Arnzen- Moeddel 2009.; Charles, Abram, McClelland, & Teplin, 2003) have looked at incarcerated females, and also reported a significantly high prevalence of post-traumatic stress disorder, being victims of family violence during their childhood or adolescence (Browne, Miller&, Maguin 1999). These studies have provided evidence that childhood adverse experience is very much present within the justice system, both among men and women.

Suicide is a public health issue that touches all levels of society globally, although not equally. Compared with adults in the general population, imprisoned offenders are at a bigger risk of deliberately attempting, and dying by suicide, which places considerable weight of the morbidity and mortality on the prison system, especially when compared with non-incarcerated people in the society(Fazel, Ramesh, &Hawton, 2017).Larney, Libby, Indig., O'Driscoll & Greenberg, (2012) in a study to estimate the prevalence of suicidal ideation and attempt among Prisoners in Australia, reported that it is more prevalent among prisoners compared to the general community.

Researchers like Suominen, Isometsä, Suokas,Haukka, Achte &Lönnqvist (2004) have opined that suicidal ideation is not only highly prevalent in the general population but it is also a strong risk factor for suicide. Madianos, Madianou-Gefou & Stefanis (1993)carried out a study in Greece on the prevalence of suicidal ideation and reported that 6.8% of females and 2.8% of males had thoughts about suicide in the preceding 12 months. Another cross-national study byNock et al. (2008) found that individuals who had experienced suicidal ideation had a 29% chance of attempting suicide and those with a 60% history of suicide attempts did so within one year of suicidal ideation.

Studies have shown that hopelessness is a major risk factor in suicidal thoughts and attempt which make up suicidal behaviour. (Klonsky, May & Saffer, 2016). Kuo, Gallo, & Eaton (2004)

in an extensive study over a 13-year period, found that hopelessness predicted suicidal thoughts, suicide attempts, and death by suicide. Another study among geriatric patients on the role of hopelessness on suicidal ideation by Uncapher, Gallagher, Osgood & Bonger, (1998) found that those who reported moderately higher levels of depressive symptoms were more likely than those with mild or lower depressive symptoms to experience suicidal ideation with increasing hopelessness. Sokero, Melartin, Rytsälä, Leskel, Lestelä-Mielonen, & Isometsä (2003), explored risk factors for suicidal ideation and attempts in psychiatric patients with major depressive disorder and found hopelessness to be an independent risk factor for suicidal ideation, suicidal intent and suicide attempts. It seems that suicidal ideations may present in a "waxing and waning manner", to the extent of complicating the early warnings of suicidality thereby making early intervention difficult for professionals.

Different traumatic experiences such as general disaster, violence, abuse, and loss have been recognized as increasing the risk of suicidal thoughts and behaviour. Some research evidence (e.g. Guo, Luo, Wang, Huang, Xu, Gao, Lu,& Zhang, 2011, Ásgeirsdóttir et al 2018, Zhang, Wang , Xia, Liu, & Jung, 2016; Chan, Wang, Ho, Qu, Wang, Ran, 2012) have shown that losing a child can be particularly traumatic and heart breaking for parents, which can activate a lot of emotional responses, including post-traumatic stress disorder, depression and even risk of suicide. Furthermore, some studies have highlighted an association between adverse childhood experiences and subsequent suicidal behaviour (Brodsky, & Stanley, 2008).Another study by Bruffaerts et al., (2010) about the onset of suicidal behaviour, its persistence and risk factors related to Childhood adversities, found that sexual and physical abuse were constantly the toughest risk factors for both the onset and persistence of suicidal behaviour, more so in adolescence. In other words, Childhood adversities (especially invasive or hostile adversities) were highly predictive of the start and perseverance of suicidal behaviours. Dube et al (2001) also discovered that there were partially mitigating factors such as alcoholism, depressed affect, and illicit drug use, which also showed a strong association with adverse childhood experiences. WHO (2022) reported that mental health and traumatic events are common in all nations, occurring among 2.1–30.5% of respondents in each of the selected countries that participated in their survey. The commonest among the reported traumatic events was the loss of a loved one which is (30.5%), closely followed by witnessing violence (21.8%). A fairly significant

respondent reported interpersonal violence (18.8%), accidents (domestic and vehicular) (17.7%), exposure to crises/war is lower compared to accidents. Overall, other traumas were not significantly represented as much as traumatic events.

Kwon, Nam, Ko, Lee & Choi (2019) conducted a study on reasons leading from disturbance to suicidal ideation in a sample of Korean adolescents. They reported that those adolescents that passed through trauma had a higher probability of developing symptoms of trauma which may subsequently lead to depression and suicidal ideation. Furthermore, (Atienzar, 2019) reported that most prison inmates who had experienced childhood trauma are significantly high among the populace, consequently making it a significant risk factor in this population. Also, Fergusson, Woodward, & Horwood (2000) in a longitudinal study explored suicidal behaviour in adolescents and young adults and were able to link the risk of suicidal behaviour later in life to a stressful life in adolescence which resulted from trauma in childhood. Stein et al., (2010) pooled data from several countries in a study exploring links between several traumatic events following suicidal ideation, plans, and attempts and concluded that only sexual and relational violence predicted the development of suicide ideation into suicide proposal and attempt. Consequently, suicidality (e.g. suicidal thoughts, suicidal self-harm and suicide attempts) is one of the most important risk factors for completed suicides (Christiansen & Jensen, 2007). (Nock, Borges, Bromet, Alonso, &Angermeyer 2008), reported in a study that the lifetime prevalence of suicidality in the general population was up to 9% for suicide ideation, 3% for suicide planning and 3% for suicide attempts.

Belik, Cox, & Stein (2007) in an explorative study of the socio-demographic risk factors of suicidal ideation in a community sample, 38% of the risk for suicidal ideation was attributed to exposure to traumatic events. They found that interpersonal traumas and exposure to some life-changing events were particularly associated with suicidal acts. It was also reported that the age of exposure to traumatic events and socio-demographic factors was responsible for the incidence-of suicidal behaviours in the majority of the respondents. However, it does appear that there are not many studies that have examined how different types of traumas are uniquely predictive of suicidal behaviour or the extent to which different traumatic events predict the progression from suicide ideation to plans and attempts (Borges, Bagge, Cherpitel, Conner, Orozco & Rossow, 2017).This is the gap the present study aims to fill.

Therefore, highlighting the significant relationship between, hopelessness and traumatic events, will contribute to a better understanding and development of suicidal ideation.

Objectives of the study

The objectives of the present study are to:

(1)   investigate the relationship between Hopelessness and Suicidal Ideation

(2)   examine the relationship between traumatic events (General Disaster) and Suicidal Ideation.

Method

Permission was sought and obtained from the authorities in charge of the Maximum-Security Correctional Facility, Lagos state. The purposive sampling technique was used to select 243 male inmates from a Maximum-Security Correctional Facility in Lagos state which cut across different age groups to participate in the study. Section A of the questionnaire included Participants'socio-demographic details such as gender, age, marital status, educational qualification, religion, nature of the offence, number of prior offences, number of months served on the current sentence and years of the sentence.

The distribution and collection of the questionnaires were done within the space of four weeks using a total of 300 questionnaires out of which 243 questionnaires were successfully retrieved giving a response rate of 90%. Of these, the total number of awaiting trial inmates was 119, while convicted inmates were 124.The researchers informed the participants of the voluntary nature of the study before data collection began and the consent of prospective respondents was obtained before they were allowed to fill the questionnaires.

The following research instruments were used:

The Beck Hopelessness Scale(BHS): The BHS was originally developed by Beck (1978) for adults, aged 17–80to assess three main aspects of hopelessness: feelings about the future, loss of motivation, and expectations. It consists of 20 items with a forced-choice of true or false questions. Each item indicating hopelessness receives a score of 1 while a score of zero indicates non-hopelessness, giving the highest possible score of 20. These scores are summed up and

interpreted as follows: A score of 0–3 is viewed as normal; while 4–8 is considered as mild hopelessness; 9–14 as moderate and above 14 is considered severe hopelessness (Beck and Steer, 1993a).Steed (2001) reported a Cronbach's alpha coefficient .88 and a correlation of .57 between BHS and perceived stress when compared with the Life Orientation Test (LOT).

The Trauma History Questionnaire (THQ): to measure lifetime exposure to traumatic stressors. It is primarily designed as a self-report measure for PTSD-related events and contains 24 yes or no items specifically addressing three key areas: (a) crime-related events (e.g., robbery, mugging), (b) general disaster and trauma (e.g., injury, disaster, witnessing death), and (c) unwanted physical and sexual experiences. The participant responds by selecting the item that shows whether they have experienced any of the listed stressors and, if yes/no, the number of times and the age at which the exposure(s) happened. There are six items for sexual and physical trauma each for which the participants were to indicate how often and at what age they experienced it. Thus, the THQ is most useful for measuring lifetime exposure to life-threatening events like assaults on physical integrity, tragic accidental loss of loved ones, and witnessing death or violence (Green, 1993). The reliability coefficient and psychometric properties of the scale were reported which fall within 0.70. and .90

Suicide Ideation Questionnaire (Adult)(ASIQ): this instrument was developed by Reynolds, (1987) to measure the frequency of suicidal thoughts among adults ages ranging from 18-88 from clinical and non-clinical populations. It consists of 25 self-report items rated on a 7-point scale ranging from 0 (never had this thought) to 6 (almost every day) with a built-in scoring key. The author reported internal consistency and test-retest reliability coefficients of between .96 to .97 and .85 to .95 respectively.

The data collected were subjected to statistical analysis using the product-moment correlations from SPSS version 26. The questionnaire was designed to get an adequate response from the respondents and was structured in such a way as to allow for ease of coding and analysis of findings.

Results

Table 1

Summary Table of correlation statistics showing the relationship between hopelessness and suicidal ideation among the participants.

Variable	Mean	SD	r
Hopelessness	20.86	4.75	.176
Suicidal Ideation	4.51	15.75	

From the result above, it showed that there is a significant relationship between hopelessness and suicidal ideation (r = .176, df = 243, p<.05).

Table 2

Table of correlation statistic showing relationship between traumatic experience (General Disaster), and suicidal ideation among male inmates

Variable	Mean	SD	r
1. Traumatic Experience	15.49	3.05	.259*
2. Suicidal Ideation	34.09	14.75	

From the result above, it shows that there is a significant relationship between traumatic.

Experience on suicidal ideation (r= .259, df = 243, p<.05) The hypothesis is hereby accepted.

Discussion

The focus of this study was to investigate the relationships between hopelessness and the history of general trauma and suicidal ideation among male inmates of a maximum-security prison. The findings showed that both concepts correlated significantly with suicidal ideation.

The first hypothesis stated that there will be a significant relationship between Hopelessness and Suicidal Ideation among male inmates was accepted. The results from the statistical analysis showed that the relationship between hopelessness and suicidal ideation was significant. Earlier studies by Sokero et al. (2006) are in agreement with this finding because they showed that hopelessness is a strong independent risk factor for suicide in addition to alcohol etc. Also, findings from a sample of depressed male and female adolescents by Wolfe, Nakonezny, Owen,

Rial, Alexandra, Moore head, Kennard, & Emslie, (2017) reported that hopelessness was a predictor of suicide ideation. They concluded that early identification of hopelessness is important to reduce suicidal ideation and consequently prevent suicide. Likewise, another study conducted by Britton, Duberstein, Conner, Heisel, Hirsch, & Conwell (2009) showed that the relationships between hopelessness and suicidal ideation was stronger and more severe among those persons with great responsibility to their family. Since most of the participants in this study are males and are likely to be heads of homes or responsible for family upkeep, their stay in the prison may likely make them more susceptible to suicidal ideation.

The second hypothesis which states that there will be a significantly positive relationship between Traumatic events (General Disaster), and Suicidal Ideation amongst prison inmates, was accepted as the result revealed a significant relationship between traumatic events (General Disaster) and suicidal ideation. A study by Wang et al (2019) found that the prevalence of traumatic experiences is positively associated with suicidal ideation thereby lending support to the present findings. Another study conducted by Stein et al. (2010) reported that diverse types of traumatic events were connected with the onset of suicidal ideation which is also in agreement with the current study. In other words, inmates with a history of traumatic events in the area of general disaster manifested a higher level of suicidal ideation. Despite the geographical/ ethnic differences, the present result still resonates with the findings from other climes showing that the effect of trauma is universal.

There are many other studies that agree with the present findings e.g. Sorsdahl et al (2014), Belik, Stein, Asmundson, and Sareen, (2009) have revealed that traumatic events such as sexual violence, witnessing violence and other interpersonal traumatic events etc. are linked with lifetime suicidal ideation and attempt, as well as being significant predictors of suicidal attempts. On the contrary, Belix, Cox, & Stein, (2007) in their study on lifetime traumatic exposure reported that the experience of traumatic events such as combat or peacekeeping operations was not significantly related to a bigger risk of suicidal ideation and attempts.

Conclusion, Limitations and Recommendation

Hopelessness and history of traumatic events were investigated to find out if they were correlated to suicidal ideation among inmates of a maximum-security correctional facility in Lagos,

Nigeria. This is a very difficult task to achieve because of issues of ethics and accessibility. Despite several limitations, this study has been able to establish that there is a link between hopelessness, history of traumatic events (general disaster) and suicidal ideation.

It is recommended that future research can focus on the effects of other types of traumatic events on the general mental health of incarcerated individuals and how this can be mitigated. Also noteworthy is the need for our maximum-security correctional facilities to be adequately equipped with the presence of mental health practitioners especially Psychologists who can easily understand and pay attention to the mental health of inmates and likewise provide improved psychosocial support to them to reduce the issue of hopelessness and other psychological problems. There is also the need for some additional knowledge in the area of psychology and regular refresher courses for correctional officers because they typically have more frequent interactions with inmates on a day-to-day basis and so need to be adequately trained. A study (Salvatore, & Bartuski, 2017) has suggested that mental health professionals working in correctional facilities can help inmates acquire appropriate coping strategies thereby reducing the probability of thoughts of suicide and attempts. As a result, officers are more likely to learn about negative or stressful situations experienced by inmates. Lastly, further research on the effects of other domains of Adverse Childhood Experiences and Suicidality in individuals in incarceration is important.

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JOB FRUSTRATION AS A PREDICTOR OF WORKPLACE DEVIANCE BEHAVIOUR IN SOME SELECTED ORGANIZATIONS IN LAGOS METROPOLIS, NIGERIA.

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Abstract

This article examined job frustration as a predictor of workplace deviance behaviour in some selected organizations in Lagos metropolis, Nigeria. Three companies were selected and two hundred and forty four (244) participants (Male= 131, 53.7%; F=113, 46.3%) duly completed the battery of psychological tests used for the study. Data were collected using Spector's Organization Frustration Scale (OFS) and Bennett & Robinson's Workplace Deviance Scale (WDS). The data were analyzed using regression analysis and independent t-test. The findings revealed that job frustration significantly accounted for 31% variance in deviant behaviour in workplace; male participants reported a significantly higher deviant behaviour compared to their female counterparts. However, there were no significant differences across age and marital status in workplace deviance behaviour. These findings were discussed alongside existing literature with recommendations made accordingly.

Key words: Deviance, Behaviour, Frustration, Workplace

Introduction

Workplace deviance can be defined as a deliberate behaviour that negates the organizational norms and values which may endanger the employee's well-being and/ or other employees as well as smooth operation of organization's activities (Robinson & Bennett, 1995; Zheng, Wu, Chen & Lin,2017). Thus, the outcome of workplace deviance behavior amongst the employees in organizational setting has the tendencies to dampen the growth of productivity as well as the

survival of the organization (Mazni & Roziah, 2011). The foregoing underscores the need for management of organization to do the needful in order to curtail deviant behaviour at workplace. According to Mazni and Roziah 2011, workplace deviance behaviourcan be categorized into two, which are: constructive and destructive deviance behaviour. Constructive deviance occurs when employees choses the alternative course of action in a way that stimulates creativity in organization. Positive deviance also include non- adherence to dysfunctional directives and lampooning the superior's ineptitude which enhance competitive advantages of the organization while destructive deviance occurs when employees deliberately violates the organizational norms which are injurious to organization and other employees like taking a French-leave, or leaves without permission, yelling aggressively to other employees, withholding information, theft, sexual harassment, vandalism, and insubordination, gossiping among others.

Workplace deviance refers to those voluntary behaviours that breech the standard, expected and acceptable actions and reactions of an organization. These behaviours serve as guides to expected and acceptable behaviours within the organization that enhance goals and objectives achievement (Abdullah & Marican, 2017). Whereas, when workers act and react according to these norms and standard behaviours, it make smooth running of the organization possible, as well as enhance productivity.

Therefore, any organization that wants to be above board and excel in today's competitive world should always endeavour to promote ethical behaviour and committed employees. This due to the fact that workers behavior hinges on their emotion, commitment, loyalty and positive attitudes which affect the organization in many dimensions (Sharma, Schuster, Ba, & Singh, 2016).

According to Zheng, Wu, Chen, & Lin (2017), workplace deviance behaviour has the tendency to inhibit the progress and productivity of any organization, because it turns out to reduce overall performance and cause a significant reduction in productivity. Furthermore, workplace deviance has becomes problematic for most organizations, so much so that workplace stress and materialism have all increased the incidence of deviant behaviourin workplace (Kaur, Sambas, Ivan, &Kumar, 2013).

The causes of deviant behaviour are not limited to personal, group or social factors, but could also be attribute to other factors such as job frustrations, perceived injustice and unethical practices and stress. According to Jiang, Chen, Sun & Yang (2017), these deviant behaviours among workers can be expressed in form of absenteeism, conflicts, harassment, bullying, poor work attitude, conflict with co-workers or bosses and other counterproductive behaviours.

Research has shown that when employees exceeds his or her capacity to meet or cope with numerous demands and expectation from the job or significant others like the supervisor(s) or manager(s),such a worker could act or react negatively which is seen as inimical to the behavioural standards and expectations of the organization (Andalib, Darun & Azizan, 2013). According to Akuffo (2015), job frustration is a function of ones inability to attain a set goal which then leads to acting and reacting in negative manner that result into harm to oneself or others. Similarly, job frustration could occur when the individual is prevented from attaining a set target or goal, or in other terms, when individual or organizational these goals are obstructed by some obstacles or events, which may be beyond the control of such individual or group (Kafetsios, Nezlek & Vassilakou, 2012).

It is important to note that most frustrated actions tend to lead to or accompany deviant behaviour, which could then go on to inhibit the growth and development of an organization (Damoah & Ntsiful, 2016). Frustration is frequently accompanied by four major reactions-emotional outbursts of wrath and increased physiological arousal, aggressiveness, withdrawal, and attempting new approaches to action (Freudenthaler, Turba & Tran, 2017). The first three are maladaptive, resulting in deviant conduct such as abandoning a target goal, withdrawal syndrome, conflicts and other related counterproductive actions (Demerouti, & Bakker, 2011).Consequently, the violation of rules, regulation and norms of organization by the workers can be seen as the deviant behaviour amongst the employees. Any activities of employees that go beyond the well accepted norms of the organization, and which appear to be antithetical to organizational survival can also be seen as employee's workplace deviant behaviours (Astrauskaite, Notelaers, Medisauskaite, & Kern, 2015).

The daily occurrence of deviant behaviour in organization such as use of verbal and/or physical violence and attempts to humiliate a colleague is worrisome. According to Appelbaum, Iaconiand

Matousek (2007), deviant behaviour is predominant in all industries; however, the types and manifestation of this deviant behavior is relative, in that it differs from individual to individuals as well as from one organization to the others.

In the Nigerian context, the level of severity of deviant behaviour also varies from minor to serious dimensions and tends to tends to have a counterproductive effect on the organization. Thus, it important for managers and employers of labour to seek to understand the source(s) causes and management of workplace deviance in order to avoid a chaotic work environment and poor productivity. This gap in knowledge is what this study aim to fill up by examining the influence of job frustration on workplace deviance behaviour in some selected organizations in Lagos metropolis.

In view of the foregoing, the under listed hypotheses were tested in this study:
   i. Job frustration will significantly predict workplace deviance behaviour
  ii. Male participants will significantly report higher workplace deviance behaviour compared to their female counterparts.
 iii. Younger participants will significantly reports higher workplace deviance behaviour compared to their older counterparts.
  iv. Single participants will significantly reports higher workplace deviance behaviour compared to their married counterparts.

Method

Research Design
The study adopted a survey research design. This is due to the nature of the study as it sought to establish the relationship between the independent and dependent variables and none of the variables were manipulated. The independent variable in this study is job frustration while the dependent variable is workplace deviance behaviour.

Research Settings
The research was conducted at the following organizations:
- PULKIT Alloy and Steel Limited: A company into the melting and fabrication of metals into steel and iron.

- Great Walk Limited: Footwear Production Company.
- Focus Development Company Nigeria limited: A project and finance management Company.

Instruments

A battery of psychological test consisting of Workplace Deviance and Organization Frustration Scales was used to collect relevant information from the participants.

Workplace Deviance Scale:

The Workplace Deviance Scale developed by Bennett and Robinson (2000)was used to measure deviant behaviour in this study. The scale consists of nineteen (19) items. Some Examples of items include "He/she has taken property from work without permission", "deliberately slowed down work", "purposely did work incorrectly", etc. Items were rated on a 5-point Likert-type scale ranging from 1 (Never) to 5 (Everyday). The scale asked participants to indicate the frequency with which they believed they and their co-worker engaged in organization-directed deviant behaviours. The scale had internal reliability of $\alpha = 0.81$. Higher score indicates higher deviant behaviour while lower score indicates lower deviant behaviour.

Job Frustration Scale:

Organization frustration scale (OFS) was developed by Spector (1975). The scale developer reported an internal consistency (Cronbach alpha) of $\alpha = .72$. This study reported a local reliability of $\alpha = .74$. The scale consists of twenty-nine (29) items, scored on a six (6) points scale was used to find out how workers feel in their Organization. Some Examples of the items here include "I feel trapped in my job", "people act nasty towards me at work", "Policies at work are not fair", "My job is boring and monotonous", etc. The 6 point scales ranging from 1 (disagree completely) to 6 (agree completely). Higher scores indicate higher rate of organizational frustration, while lower scores indicate lower rates of organizational frustration.

Sampling Technique

Convenience sampling technique was used to elicit responses from the participants. This is because the researchers have already decided the type of respondents to take part in the study as well as the study location.

Procedure

The researchers approached the organizations where this study was to be carried out and sought for approval from the Human Resource Managers in charge of various organizations. On the basis of the approval obtained, interested participants were briefed about the purpose of the study. A total number of three hundred (300) copies of a battery of psychological tests were distributed to the consented participants in the selected organizations after adequate rapport was established them. Each respondent completed the tests at his or her own privacy without any form of compulsion or manipulation.

Results of Data Analyses

The data gathered from the battery of psychological tests administered to participants were analyzed using Statistical Package for Social Science version 21 (SPSS) and the hypotheses were tested using 0.5 level of significance.

Results

Demographic Information of the Participants

Table 1: Showing the Demographic Characteristics of the participants

	Levels	**Frequency**	**Percentage**
Gender	Male	131	53.7%
	Female	113	46.3%
	Total	**244**	**100%**
Age	18 – 30years	68	27.9%
	31 – 40years	134	54.9%
	41year and above	42	17.2%
	Total	**244**	**100%**
Marital Status	Single	135	55.3%
	Married	109	44.7%
	Total	**244**	**100%**
Years of experience	1-5 years	130	53.3%
	6years and above	114	46.7%
	Total	**244**	**100%**

Table 1 shows the demographical characteristics of respondents. On gender, male respondents were 131 representing 53.7% of the total respondents, while female respondents were 113 representing 46.3%. On age range, its shows that respondents between the ages of 18-30 years

were 68 representing 27.9% of the total respondents, the respondents between the ages of 31-40 years were 134 representing 54.9% of the total respondents; the respondents aged 41 and above were 42 representing 17.2% of the total respondents. On marital status, it shows that single respondents were 135 representing 55.3% of the total respondents, while married respondents were 109 representing 44.7% of the total respondents. On years of experience, 130 respondents representing 53.3% of the total respondents had 1-5years work experience, while those with working experience of 6 years and above were 114 representing 46.7% of the total respondents.

Test of Hypotheses

Hypothesis 1: Job frustration will significantly predict workplace deviance behaviour in organizations.

Table 2: Summary of simple regression analysis showing the contributions of job frustration to the prediction of workplace deviance behaviour

Variable	B	Beta	t	Sig.	R	R^2	F-ratio	Pv
Job frustration	.265	.556	10.416	.01	.556	.310	108.485	P<0.05

The Table showed that job frustration significantly contributes to the variance in workplace deviance behaviour (Beta= .556, r= .556 p<0.05). Job frustration yielded significant coefficient of regression R^2 = .310 (p<0.05). This shows that job frustration accounted for 31.0% of the observed variance on workplace deviance behaviour. So therefore the hypothesis one that stated that job frustration will significantly predict workplace deviance behaviouris accepted.

Hypothesis 2: Male participants will have significantly higher report of workplace deviance behavior than female participants

Table 3: showing the Independent t-test comparison of workplace deviance behavior by Gender

Variable	Gender	N	Mean	SD	t	df	Sig.	Pv
Gender	Male	131	18.37	4.82				
	female	113	15.61	4.02	-4.815	242	<.05	Sig

From the Table above, the mean score of the two groups shows that male participants scored higher on workplace deviance behavior compared to female participants. Further analysis with t-

independent test confirmed that the differences in mean scores of male participants is (M=18.37; SD.4.82) and female participants (M=15.61; SD=4.02)is statistically significant at df =242, t= -4.815, p<0.05. Thus the hypothesis is accepted.

Hypothesis 3: Younger participants will have significantly higher report of workplace deviance behaviour than older participants.

Table 4: Independent t-test comparison of workplace deviance behavior **by age**

Variable	Age Groups	N	Mean	SD	t	Df	Sig.
Age	18-40 years	202	17.53	4.76			
	41 years and above	42	16.58	4.52	1.592	242	>.05

From the Table above, the mean score of the two groups shows that of age group of participants on workplace deviance behaviour. Mean of participants within age group 18-40 years of age (younger participants) is (M=17.53; SD.4.76) and participants of age group 41 years and above (older participants) is(M=16.58; SD=4.52). Further analysis with t-independent test confirmed that the differences in mean scores of not significant at df =242, t= 1.592, p>0.05. The hypothesis is rejected.

Hypothesis 4: Single participants will have significantly higher report of workplace deviance behavior than married participants

Table 5:   Independent t-test comparison of workplace deviance behaviourby marital status

Variable	Marital status	N	Mean	SD	t	Df	Sig.
Marital status	Single	135	17.47	4.47			
	Married	109	16.62	5.15	1.417	242	>0.5

From the Table above, the mean score of the two groups shows that of single participants and married participants on workplace deviance behaviour, mean of single is (M=17.47; SD.4.47) and married participants,(M=16.62; SD=5.15). Further analysis with t-independent test confirmed that the differences in mean scores is not significant (df =242, t= 1.417, p>0.05). Thus the hypothesis is rejected.

Discussion

The findings showed that job frustration accounted for 31% variance in workplace deviance behaviour, this implies that the more employees encounter job frustration, the more they will exhibit negative attitudes towards the job, that is, manifest workplace deviance behaviour. This finding was in agreement with McEachern, & Snyder (2012) and Ntsiful, Damoah & Ofori (2018), who reported that job frustration reduces organizational citizenship and produced more counterproductive work behaviour. The afore stated findings highlighted the negative consequences of employees experiencing frustration in the organization. Job frustration makes the employees jittery, unsatisfied and showing nonchalant attitude towards the job and significantly accounted various workplace deviance behaviours that is prevalent in most Nigerian organizations such as threat, Sexual harassment, aggression, delayed promotion and transferring of the employees from one place to the other without prior notice and sabotage.

The findings of this study also showed that male employees reported a significantly higher rate of workplace deviance behaviour compared to female employees. This finding agrees with Valentine & Rittenburg (2007) who found that women are more caring, seeks peaceful co-existence, and cooperative behaviours while men tend to be competitive in nature and derive much satisfaction in competition and completion of task as well as getting external or extrinsic motivation in the form of money, status and other financial rewards. Furthermore, when confronted with problems or ethical dilemmas, men and women tend to see things from different perspectives. Women appear to view problems or ethical dilemmas with empathy and sympathy for others, whereas men appear to view such dilemmas with logic and equity. In other words, women are more likely to have higher values, which mean they are less likely to engage in unethical and illegal behaviour (Valentine & Rittenburg, 2007).

However, the findings showed that there was no significant difference between younger participants and older participants on workplace deviance behaviour. This indicates that age does not play significant role when it comes to workplace deviance behaviour. This finding however, disagrees with the another study done by Rogojan, (2009), who reported that older employees tend to be more honest and ethical than younger employees due to what he called the moral laxity or decline of the younger generation. This is probably so because the older generation use

their earlier youthful experiences to guide and correct erring youths as well as avoiding their repetition of those youthful mistakes.

In the same vein, the findings showed that there was no significant difference between single and married participants on workplace deviance behaviour. This finding implies that marital status does not play role in workplace deviance behavior being exhibited in an organization. This finding disagrees with the findings of Burt (2010) who reported that marriage reduces the rate of antisocial behaviours, in other words, marriage inhibits workplace deviance behaviour. These discrepancies in findings may be due to differences in study locations and /or other extraneous variables which other studies may help to identify.

Conclusion and Recommendation

From the findings of this study, it is obvious that job frustration significantly accounts for variance in workplace deviant behaviour. It therefore recommended that employers of labour should as a matter of necessity tackle or resolves issues that could frustrate their employees, as this will to a large extent curb or reduces the exhibition of deviant behaviours among the employees. In other words, any organization that does not control job frustration will experience high rates of workplace deviance behavior from her employees.

Furthermore, it is recommended that future studies in this area should take into consideration the major limitations associated with all survey research studies like this present one, which precludes any inference of causality. This is due to the fact that paper and pencil tests are void of manipulation of independent variable(s) thus; it cannot establish cause-effect relationships between variables as it is done experimental studies.

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SOCIO-DEMOGRAPHIC DETERMINANTS OF DEPRESSIVE SYMPTOMS IN NON-PSYCHIARIC CLIENT IN OAUTHC

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Abstract

The study examined the influence of socio-demographic variables (that is Age, Sex, Family Type, Level of Education and Marital Status) on the development of depressive symptoms among non-psychiatric patients in Obafemi Awolowo University Teaching Hospital Complex (OAUTHC). This study was a cross-sectional survey using primary data. The study population consisted of 402 inpatients and out patients in the General Outpatient Department, Obstetric and Gynaecological, Surgical and Medical wards of OAUTHC in ratio of 4:3:2:1 of the General Outpatient Department, Obstetric and Gynaecological, Surgical and Medical wards respectively. A standardized psychological instrument namely, Beck Depression Inventory (B.D.I) was used to collect data from the respondents. Data collected was analyzed using a Two-way Analysis of Variance. The result show that socio-demographic factors like Age, Sex, Family Type, Level of Education and Marital Status had no statistically significant influence on the prevalence of depressive symptoms among patients. However, religion had a statistically significant influence on the experience of depressive symptoms. The study concluded that patients attending non-psychiatric departments/wards also suffer from depressive symptoms. From the finding of this study, it is recommended that health practitioners need to be conscious of this, so that adequate intervention can then be planned.

Key Words: Depression, Depressive Symptoms, Prevalence, Non-Psychiatric Patients, and Religion.

Background to the Study

Depression dates back to ancient times, it is common in all societies of the world, much more common than most people realize (McPherson & Armstrong, 2021; Asuni, Schoenberg, & Swift, 1994). Depression can be defined as a mental state characterized by a pessimistic sense of inadequacy and a despondent lack of activity American Psychological Association (APA, 2020). Depression is common, it is considered as the common cold of psychopathology in Europe and America (Oladimeji, 1996). Data from the World Health Organisation (WHO), suggest that, about 300 million individuals in the world suffer from depression (WHO, 2017). Major depression is the most frequently diagnosed and most common depressive illness, (Evans-Lacko et.al, 2018; Tollefson, 2009; Buchwald & Rudick-Davis, 2008; Keller, 2008; Easton, 2007). Depression is prevalent, with about one in every ten people suffering depression around the world, (WHO, 2017).

It presents with a feeling of guilt or low self-worth, loss of interest or pleasure, depressed mood, low energy, poor concentration and disturbed sleep or appetite, (APA, 2020). The above symptoms might manifest as recurrent or chronic and can result, to considerable impairment in a person's ability to control his/her daily activity. At the height of depression, people might commit suicide (WHO, 2015). Depression like syndrome is encountered in different cultures. In many cultures with languages different from English, various names have been used to describe mixed somatic and affective symptoms and signs, which bear close similarities to the clinical features of depression. Some examples as cited in (Morakinyo, 1998) include: Yorubas – *"Irewesi okan"* Meaning depressed mind**,** Latin Americans – *Nervios* and in Korea – *Hwa byung*.

The incidence of depression in Western cultures is about 25%, that is, the possibility that an individual might experience depression at a time of his or her life is one in every four persons (WHO, 2017; Scully, 1990; Asuni, et al 1994). For a long time it was assumed that Africans rarely suffered from depressive illness (Oladimeji, 1996; Binitie, 1987). This rarity of depression among Africans have been argued to be linked to the community living of most African cultures, which encourages 1) communal living, 2) allows for mourning and guilt, 3)   the protective and grief sharing benefits of the extended family system and 4) presence of collective (tribal)

superego instead of individual superego, (Mendel, 1970). However, early research studies have not confirmed this assumption, (Field, 1967) reported that depression is common among the Ashantis in Ghana, (Collomb, 1967) reviewed reports of various parts of Africa and found incidence rate of between 11 and 15%. Also, (German, 1968) and (Ebie, 1972) found that depression in various forms is very common on the list of psychiatric clinics and hospitals in Africa.

Although, depression is experienced across all ages, culture or background, the risk of becoming depressed is greater among the poor, the unemployed, problematic drug and alcohol use, physical illness, those who experience loss such as, a relationship break-up and death of a loved one (WHO, 2017). The present study is interested in the influence of socio-demographic factors such as sex, religion, age, marital status level education, and type of family has on the experience of depressive symptoms in individuals. According to the 6th edition of the Oxford English Dictionary, (Oxford, 2012)age is defined as the length of time an individual has lived or a thing has existed. In their study of major depressive episodes (MDE), in a national co morbidity survey among 1,457 adult participants in the United States, from 2001 to 2002, (Kessler, et al., 2010), found age being a significant risk factor for major depressive episode. In another study, (Blazer & Hybels, 2005), found that older adults experience less depression than younger adults despite having a greater predisposition biologically for major depression due to vascular changes.

The present study also, considered sex as a determinant of depressive symptoms. Studies, suggest that, males are less lightly to suffer from depression compared to females, (Lewinshon, et al., 1993). Also, (Kessler, et al., 2010), found that females reported significantly more depressive symptoms than males. Past studies have pointed to females being more lightly to experience depression than males. Worldwide report revealed that the one year prevalence of major depression was 3.5% in males and 5.8% in females (Ferrari et al., 2013). Sex difference in the experience of depression was found to be almost twice as many in females when compared to males, (WHO. 2017; Weissman & Klerman, 1977).

Religion, simply defined, is an organized system of practices and beliefs in which people engage. Religion, according to the Oxford Advanced Learner's Dictionary (Oxford, 2012), may be defined in three ways. First, is a belief in the existence of a God or gods, especially the belief that they created the universe and gave human beings a spiritual nature which continues to exist after the individual dies. Second a particular system of faith and worship based on religious beliefs, for example, Christianity, Judaism and so on. Third a controlling influence on one's life, a thing that one feels very strongly about Oxford (2012). According to (Speck, 1988), religion is the outward practice of spiritual system of belief, values, codes of conduct; and rituals.

A survey of the American population two decades ago, suggest that, religion holds a central place in the lives of many Americans (Gallup, 1990). Ninety-five percent of Americans believe in God. More than 50% pray daily, and almost 75% of Americans say that their approach to life is grounded in their religious faith (Bergin & Jensen, 1990; Princeton Religious Research Centre, 1994).

In Nigeria, religion seems to have become a very potent force in the life of the people; many writers assert that, Nigerians have become increasingly and deeply religious (Amaraegbu, 1995, Onumah, 1995). This suggests that religion now influences, to a great extent, the understanding and explanation of the behaviour and worldview of Nigerians. Psychologists have long recognised that religion permeate virtually every aspect of a person's life, it provides the integrative framework by which reality is understood, managed or pursued (Jones, 1994). This is because it provides a set of fundamental beliefs through which people view the world and their behaviour (Jones, 1994). Some authors assert that, concern with spirituality provide a high rate of psychological security as reflected in many facets of the individual's life and behaviour (Fiske & Chiriboga, 1990). Some authorities have begun to speculate that the reason Nigerians are future-oriented despite the massive drop in their quality of life may be found in their deep religious orientation (Ake, 1995, Fafowora, 1993, Yakubu, 1995). This is akin to Freud's (1927) notion that religion can serve as defence against the forces of privation and suffering and an uncertain future. It has thus become apparent that religiosity has become a very potent variable in attempting to understand the psychology of the Nigerian.

Religion provides many clients with social support as well as a clinically effective cognitive schema that enhance well-being and lower distress (MacIntosh, Silver, & Wortman, 1993). Religious involvement predicts successful coping with physical illness (Keonig *et al.,* 1992, Koenig, George, & Peterson, 1998). High intrinsic religiousness predicts more rapid remission of depression, an association that is particularly strong in clients whose physical function is not improving (Koenig, *et al,* 1998). Williams, Larson, Buckler, Hechman, and Pyle (1991) found that using religious beliefs as a coping resource was related to a reduced likelihood of major depression.

Marital status is an individual's circumstance, as single, married either divorced or separated and widowed, (Oxford, 2012). Past studies have pointed to mixed conclusions about the marital status, (Jokena, 2004) found that, single mothers reported the least psychological distress with depression scores followed by married and cohabiting mothers among impoverished, rural mothers. While, (Behne, 2013), investigation on how depression is influenced by living arrangements and marital status among older adult male veterans, using existing hospital data to identify patterns of factors commonly occurring in veterans with depression. The sample size of the study was 39 veterans diagnosed with at least one depressive disorder. The result of the study, indicate that, there is no association between marital status and depression.

Finally, the study was also interested in how family type influences one's experience of depression, (Shepard, 2012), found that women from polygamous homes experienced more depression or depressive symptoms when compared to women from monogamous marriages, also, (Bahari, Norhayati, Nik Hazlina, shahirul Aiman & Arif, 2021) in their study to know the Psychological impact of polygamous marriage on women and children involving a systematic review and meta-analysis of past studies found that women and children from polygamous marriages suffer a higher rate of depression compared to children and their mothers from monogamous marriages**.**

The above facts and figures are an indication that one of the major mental illness Africans experience is depression, and Nigerians also experience depression. Some authors have also pointed to somatic and bodily symptoms, like sensation of crawling in the body, heat in the body,

heat in the head, tightness, as symptoms which African patients present with and this may mislead the physician (Binitie, 1975; Morakinyo, 1982; Binitie, 1987).

Depression is associated with enormous morbidity, mortality, disability, functional impairment and costs (WHO, 2016). Numerous safe and effective antidepressant medications and psychotherapies now exist, physicians concentrate on managing the physical symptoms presented by patients, missing the psychological implications (WHO, 2016). However, most individuals experiencing depressive symptoms do not receive the treatment they need, this may be because the problem is not identified, especially in patient groups presenting with various forms of physical and surgical illnesses, (Lemma, Mulat, Nigussie, Getinet, 2021; Ying, et al., 2020; Balestrieri, Bond, Clayton, Dumas, 2002). For example, heart disease and resolving a heart attack, have been found to predispose sufferers to depression, though it is not often identified in patients who suffer heart conditions and therefore under-treated in patients with heart disease (Lemma, Mulat, Nigussie, Getinet, 2021; Ying, et al., 2020; Balestrieri, Bond, Clayton, Dumas, 2002). Depression has been linked to immune functions and mortality in patients with chronic illness (Lemma, Mulat, Nigussie, Getinet, 2021; Ying, et al., 2020; Haile, Nefsu, Biftu, & Firehiwot, 2018, Torpey & Klein, 2008; Katon, Lin, & Kroenke, 2007; Yi *et al.*, 2006; Kilbourn, Justice, Rollman, Bruce & Keller 2002; Nemeroff, Musselman, & Evans, 1998). Balestrieri and co-workers observed that 195 of 1039 19% were identified as depressed by medical and surgical general hospital physicians (Balestrieri, Bond, Clayton, Dumas, 2002).

It is against this background that this study was designed to focus on depression among adult patients in the teaching hospital environment other than psychiatric unit. The study found out information on severity, types and number of patients who suffer from depression in other hospital departments other than psychiatric unit. As earlier mentioned, previous authors have confirmed the prevalence of depressive illness in the Nigerian environment (Iloh., & Aguocha., Amadi., & Chukwuonye, 2018; Morakinyo, 1998; Odiase, 1987; & Binitie, 1987). However there is paucity of information as to factors that can contribute depression, the types and the number of patients who suffer from depression among other hospital groups, apart from psychiatric clinics.

A review of literature, indicate that there is a high prevalence of depressive symptomatology among patients attending non psychiatric units in hospitals. (Lemma, Mulat, Nigussie, Getinet,

2021) in their study to determine the prevalence and associated factors of unrecognized depression among 314 patients who visited non-psychiatric outpatient departments in the University of Gondar specialized, teaching hospital in North West Ethiopia. Using case history interview and the patient health questionnaire (PHQ-9) to measure depression, they found the prevalence of depression was 15.9%. Also, (Udedi, 2014) in a prevalence study of depression among patients and its detection by Primary Health Care Workers at Matawale Health Centre (Zomba) involving 350 patients using a Structured Clinical Interview for DSM-IV Axis I disorders Non-Patient Version (SCID-NP) administered verbally to the participants. He found a prevalence of 30.3%, while detection rate of depression by the clinician was 0%.

The study by (Obindo, et al., (2017), on the prevalence of depression, associated clinical and socio-demographic variables in persons living with lymphatic filariasis, in Plateau State, Nigeria. Using 98 participants, who completed the Patient Health Questionnaire (PHQ-9) and were interviewed using the Depression module of the Composite International Diagnostic Interview (CIDI). Their findings show that 26% of the participants meet the criteria to be diagnosed for depression. Also, (Salihu, & Udofia, 2016) studied the prevalence and associated variables of depression among Outpatients in a general tertiary Institution in Kano, State, Nigeria among 402 patients. The Schedule for Clinical Assessment in Neuropsychiatry (SCAN, version 2.1) and the Hamilton depression rating scale was used to assess depression. They found a prevalence rate of 49.8% among the patients

In their study, (Poe, Fred, Lowell, Henry & Fox, 1980) examined the rate of depression in patients who reported to the General Hospital, 192 patients, both men and women who were seen in the General Hospital Outpatient Clinic were used as sample, 52% of the 192patients who were seen during a routine psychiatric consultation were found to be depressed. There was higher incidence of depression among patients for whom psychiatric consultation was requested, pointing to the fact that patients who do not report to psychiatric units also have symptoms of depression.

While (Sherry, Grace, Abbey et. al., 2005) longitudinally examined the prevalence and cause of depressive symptoms among women and men a year after a cardiac event, 913 myocardial infarction patients from twelve coronary care units were recruited. Data were collected at six and twelve months. Measures included CR participation, medical usage and Beck Depression

Inventory (BDI). At baseline 31.3% had elevated depressive symptoms 25.2% had depressive symptoms at six months and 21.7% had it after a year. Longitudinal analysis revealed all subjects experienced reduced depressive symptoms over their year of recovery because of treatment.

In Turkey, (Nahcivan & Demirezen, 2005) examined depressive symptoms among Turkish older adults with low income in rural communities. A sample of 132 older adults (55years and above) was studied. Data was collected through structured interview conducted in their homes using Geratric Depressive Scale, 50% had high depressive symptoms compared with non depressed individuals. Depressive symptoms were more common in women and widows and depressed participants were suffering from chronic health conditions compared with non depressed participants.

Hypothesis

1. Socio-demographic variables (age, sex, religion, level education, marital status and type of family), would have no significantly influence the experience depression among patients. Such include:

Method

Participants and Sampling

The sample for the present study comprised 402 inpatients and outpatients made up of patients in the general outpatient department, Obstetrics and Gynaecological, Medical, and Surgical wards of the OAUTHC, Ilesa and Ile-Ife, calculated to be 14,899. Going by Leslie's formula $n = \dfrac{Z^2 \, P(1-P)}{d^2}$ and using the general population prevalence of depression of 5.2%, standard deviation of 1.96% and a precision level of 0.05, a sample size of 320 was obtained. This was rounded up to 402.

The sample for the study consisted of 402 patients who could read and write drawn from the General Outpatient Department (160), with a mean age of 38.8 and standard deviation of 10.7, Obstetrics and Gynaecology Department (127), with a mean age of 34.2 and a standard deviation

of 10.21, Surgical Ward (70), with a mean age of 33.7 and a standard deviation of 10.6, and Medical Ward (45), with a mean age of 37.9 and standard deviation of 10.3 years. Two hundred and forty four (244) that is (61%) of the participants were females while One hundred (158) that is (39%) are males.

Instruments: A pencil and paper questionnaire that included items that elicited demographic information including items that required participants to fill the their Age, Sex, Religion, Marital status, Family Type Level of Education Ward/Clinic, Date of presentation and Presenting Complaints, while Beck Depression Inventory (BDI), developed by (Beck, 1972) measured depressive symptoms. BDI is a 21 item scale describing human feeling with short statements. All items have 5 statements to which participants are expected to tick the statement that describes their present feeling. Each item is arranged in ascending order of 0, 1, 2c, 2b, and 3, according to severity symptoms experienced. Scoring is done by summing up the number ticked for each item by the participant to obtain a total score and interpreted as 30-63 severe depression, 20-29, moderate- severe, 16-19 mild/moderate, 10-15 mild, , and 0-9 normal range . (Steer & Beck, 1988) pointed to scores form 19 upwards on the BDI suggest depressive symptoms among normal adult persons. Internal consistency was demonstrated by significant relationships between each item and BDI total score An odd-even item correlation of 0.86 was established along with Spearman Brown correlation of 0.93. Split half reliability ranging from .78 to .9 was reported by (Beck, 1987).

Design and Statistical Analysis
 A cross-sectional survey design of both inpatients and outpatients in the four Departments/Units involved in the study was employed. This is because the present study was interested in examining the influence the independent variable (Age, Sex, Religion, Marital status, Family Type and Level of Education) as on the dependent (depressive symptoms). The study made use of a mixed design strategy. The descriptive strategy gave information about the presence or absence of depressive symptoms among participants and t- test was used to analyse the hypothesis.

Procedure

Questionnaires were administered to potential respondents on clinics days in the departments selected for the study and in the wards for those on admission during the period of study. This was preceded by the approval of an application for permission from the Ethical and Research Committee of Obafemi Awolowo University Teaching Hospitals Complex. A space of three months was given to complete administration of questionnaires.

Result

The hypothesis which stated that socio-demographic variables have no significant influence on depressive symptoms among patients was tested by means of two-way ANOVA. The result of the analysis is set out in Table 1.

Table 1:   Summary of 2-way ANOVA on Depression by Sex, Religion Marital Status, Family type and level of Education

Source	Sum of Square	Df	Mean Square	F	P
Corrected Model	13143.61[a]	105	125.18	1.61	.001
Intercept	6542.83	1	6542.83	83.90	.000
Ages	112.35	2	56.18	.72	.487
Sex	147.49	1	147.49	1.89	.170
Religion	592.89	2	296.95	3.81	.023
Marital	8.313	2	4.16	.05	.948
Family types	409.36	3	136.46	1.75	.157
Education	268.20	2	134.10	1.72	.181
Ages * Sex	446.75	2	223.38	2.86	.059
Ages * Religion	525.71	2	262.86	3.37	.036
Sex * Religion	707.54	2	353.77	4.54	.011
Ages * Sex * Religion	215.71	1	215.71	2.77	.097
Ages * Marital	147.75	2	73.88	.95	.389

Sex * Marital	253.17	1	253.17	3.25	.073
Ages * Sex Marital	287.88	1	287.88	3.69	.056
Religion * Marital	29.36	1	29.36	.38	.540
Sex * Religion * Marital	164.05	1	164.05	2.10	.148
Ages * Family type	161.50	5	32.30	.41	.839
Sex * Family type	353.08	3	117.69	1.51	.212
Ages * Family type	273.00	2	136.50	1.75	.176
Religion * Family type	1151.18	4	287.78	3.69	.006
Ages * Religion * Family type	3.25	1	3.25	.04	.838
Marital * Family type	439.97	3	146.66	1.89	.133
Ages * Marital * Family type	50.32	1	50.32	.65	.422
Sex * Marital * Family type	458.56	2	229.28	2.94	.054
Ages * Education	437.97	4	109.49	1.40	.233
Sex * Education	4.837	2	2.42	.031	.969
Ages * Sex * Education	158.21	3	52.74	.676	.567
Religion * Education	257.98	3	85.99	1.103	.348
Ages * Religion * Education	491.32	1	491.32	6.300	.013
Sex * Religion * Education	182.73	1	182.73	2.343	.127
Marital * Education	435.93	2	217.97	2.695	.063
Ages * Marital Education	.001	296			
Error	23084.14	402	77.99		
Total	84650.00	401			
Corrected Total	36227.75				

The table show that there is no statistically significantly main influence of Age on depression (F {2,296} = 720, p >.05). This finding suggest that the Age of patients is not related to the number of depressive symptoms that they self reported. The result presented in Table 1 also indicates,

that there is no statistically significant main influence of sex on depression (F {1,296} = 1.891, p > 05). This finding suggests that the sex of patients is not related to the number of depressive symptoms that they self report.

The results further indicate that there is a statistically significant main influence of religion on depression (F {2,296} = 3.808, P < .05). This finding suggests that the religion to which a patient belong, to some extent, determine their depressive symptoms. An example of the means scores of the religious groups showed that patients who claim other religions (x = 46.500, SD = 27.577) had the highest rate of depressive symptoms, followed by the Muslims (x = 34.654, SD = 11.499) while the Christians (x = 32.392, SD = 9.016) had the least.

The results presented in the Table above also indicate that there is no statistically significant main influence of marital status on depression (F{2,296}) = 0.053, P > .05) This finding suggests that there are no marital status differences in the self-reported depressive symptoms of patients. Furthermore, the Table above indicates that there is no statistically significantly main influence of Type of family on depression (F {3,296} = 1.750, P>.05), the finding suggest that the type of family of a patient is not related to the number of depressive symptoms that they self report. Finally, there was no statistically significant main influence of patient's level education on depression (F {2,296} = 1.7200, P>.05). This finding suggests that, the level of education of patients has no influence on the number of symptoms of depression that they self reported.

The results of the tested hypothesis are mixed, while there is evidence in support of the hypothesis that there is no significant influence of sex, marital status, Age, types of family and level of education on the number of depressive symptoms participants self-reported, the reverse is the case with respect to religion. Therefore, the hypothesis can neither be wholly rejected nor accepted.

Discussion

According to the results of this study presented in the earlier section, there were interesting findings. From the finding of this study, there is a high rate of depressive symptoms among patients in non psychiatric units. The possible explanation is that, whatever illness that resulted in seeking medical help is distressing enough and might make such individuals worry about

their health. This might lead them to be preoccupied with their condition and they might pay less attention to normal activities like eating, sleeping and so on. This in turn can result to signs and symptoms that are related to depressive illness (APA, 2020). According to (Lemma, Mulat, Nigussie, Getinet, 2021; Ying, et al., 2020; Haile, Nefsu, Biftu, & Firehiwot, 2018, Torpey & Klein, 2008; Katon, Lin, & Kroenke, 2007; Yi et al, 2006; Kilbourn, Justice Rollman et al., 2002) depression is linked to immune functions and mortality in patients with chronic illness. Another explanation might be the fear various medical and surgical illnesses bring to the mind of patients and thereby increase their anxiety. Anxiety is closely related to depression, the anxiety that is caused by the fear of patients about their medical or surgical conditions might result to insomnia, lack of appetite and so on, which are symptoms associated with depressive illness WHO, (2016).

Further findings obtained in the present study was mixed: while age, sex, marital status, family type and level of education of patients were found to have no influence on the self-reported depressive symptoms of patients, the religion to which a patient belong or practised was found to have an influence on his/her self-reported depressive symptoms. The findings show that, patients who claimed other religions apart from Christianity and Islam self-reported more depressive symptoms, followed by patients who claimed they are Muslims. Finally patients who claimed Christianity as their religion had the least symptoms of depression. One can view this finding from the fact that, people who practice a particular religion, especially Christians and Muslims: belief and seek for God's intervention when faced with life's challenges and most often have the faith of divine healing which might make them calmer despite their illness, (Koenig, George, & Peterson, 1998; Ake, 1995; Amaraegbu, 1995; Onumah, 1995; Yakubu, 1995; MacIntosh, Silver, & Wortman, 1993 Fafowora, 1993; Keonig *et al.,* 1992; Bergin & Jensen, 1990).

Also, irrespective of an individual's age, sex, marital status family type and level of education, people generally experience one form of challenge or another during the course of their daily lives. In the case of this study, the various medical or surgical conditions that required people to visit the hospital might cause them to worry. An implication of the above finding is that patients who are religious especially Muslims and Christians tend to accept whatever their situation with a more positive response (Ake, 1995; Yakubu, 1995; Fafowora, 1993; Gallup, 1990). Further the

inter-relationship between the socio-demographic variables and depression were not different when the variables were explored in pairs.

Conclusion

Conclusively, this study made an attempt to find out the relationship between socio-demographic variables (age, sex, family type, level of education and religion) and the experience of depressive symptoms among non-psychiatric patients in a Nigerian teaching hospital. Interestingly, the study established that some patients attending non psychiatric departments involved in the study meet the criteria to be diagnosed for depression by the instrument used for the study. Some others reported some symptoms of depression of the standardized instrument used for the study.

Analysis of data collected and interpretation show that, five out of six socio-demographic factors tested that is; age, sex, family type, level of education and marital status had no influence on the experience of depressive symptoms among the patients, while religion the sixth socio-demographic factor tested had an influence on the depressive symptoms self-reported by the patients.

Implication of Findings

The outcome of this study has a number of implications. The present study established that there is a significant experience of depressive symptoms among non psychiatric patients. The result has implication for Doctors, Psychologists and nurses especially, those serving in non-psychiatric units in hospitals to consider co-morbidity of disorders in their patients. The management of hospitals should also engage professionals like psychologists, social workers and other health professionals that can help in identifying other psycho-social issues patients might be experiencing. Also, this study, suggest a need for synergy among medical professionals in the care for patients. .

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PERSONALITY AND CONFORMITY TO FEMININE NORMS AMONG FEMALE UNDERGRADUATES IN A NIGERIAN UNIVERSITY SETTING

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Abstract

This study was conducted to examine the influence of personality factors and age on conformity to feminine norms amongst female undergraduates. The main goal of the study was to understand the role personality traits could play on the ability of participants to accept and obey feminine norms in society. The sample comprised female undergraduate (N=197) of the Faculty of Social Sciences, University of Lagos. The research design was a cross-sectional survey design and the instruments used were the Big Five Inventory which contained 44 items that assessed personality traits. The Conformity to Feminine Norms which consists of 45 items that measured conformity. Based on the results, it was seen that personality traitshad a positive influence on conformity to feminine norms as it jointly accounted for 12.3% of the variation in conformity to feminine norms. It was also observed thatolder participants conform to feminine norms more than younger participants. The limitations of the study are highlighted, and direction of further research suggested.

Keywords: Age, Conformity, Feminine norms, Lagos, Personality

Introduction

Personality is a very profound area of study in psychology, likewise conformity. The term personality has various definitions given by different individuals. Personality can be described as a relatively permanent and unwavering mode of behaviour, which can be internal or external and affects the way an individual relates to the environment around him or her (Aparicio-García & Alvarado-Izquierdo,2018). Apart from that, personality is a distinctive set of cognitions, behaviours and poignant patterns that come from environmental & biological factors. (Corr& Matthews, 2009). Furthermore, personality is a collection of psychological traits and systems within an individual which are largely sustaining and structured (Larsen &Buss, 2005). Mayer (2005) identifies personality as an organised, budding system residing in a person that characterizes a summary of actions of his/her foremost psychological subsystems. Tests have been designed to measure dimensions personality. One of such tests is the Big Five personality model.

The Big Five personality test or model (John& Srivastava, 1999; McCrae& Costa, 1985, 1987). The Big Five Model consists of the following traits dimensions: neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness.   These traits are present in varying degrees in everyone (Costa & McCrae, 1992; Goldberg, 1990, 1992; John, 1990).Past research suggest that there is a relationship between personality and gender roles (Orlofky et al., 1985)

Neuroticism largely refers to some personality traits with negative effects such as depression, emotional, instability, irritability, self-consciousness, anxiety, and anger (Widiger, 2009). Poor response to environmental stress, seeing minor frustrations as largely overwhelming, and interpretations of ordinary situations as threatening are characteristics of individuals who have high levels of neuroticism (Widiger & Oltmanns, 2017). Among the domains of personality traits, neuroticism is a well-established and experimentally validated trait with a good number of studies to prove its ability to be transmissible, ephemeral stability across the lifespan, childhood predecessors, and universal presence (Widiger, 2009; Widiger & Oltmanns, 2017).This trait however, is not automatically a sign of neurosis in an individual as people can score high on this trait and not have a debilitating psychological illness (Feist & Feist, 2008). Furthermore,

individuals who possess neuroticism as a dominant trait tend to be easily upset by rejection (Downey & Feldman, 1996; Malone et al, 2012) and find less satisfaction in romantic relationships (White et al., 2004). They are also apprehensive when it comes to self-presentation (Seidman, 2013) and may present themselves in ways different from their own self-perceptions (Leary & Allen, 2011).

Extraversion is characterised by talkativeness, outgoing and energetic behaviour (Thompson, 2008). This trait is linked with sociability (Mervielde & Asendorf, 2000), as well as positive affectivity and a reduction in behavioural inhibition (McCrae & Costa, 1989). People with this trait seem to be dominant in social settings (Friedman & Schustack, 2016), which leads to higher levels of experience (Dragoni et al., 2011), particularly in conditions where they can discover their learning environment autonomously (Orvis et al., 2011). Extraversion has been said to be related to self-examination(John et al., 1996) and public self-awareness(Trapnell & Campbell, 1999).It has also been linked to good moods (Stafford, et al., 2010) with physical health benefits (Cohen et al., 1998) and a lowered rate of mortality especially when advanced in age (Wilson et al., 2005). People who score low on this characteristic are said to be introverted.

Openness to experience consists of six aspects which are intellectual curiosity, an inclination for variety, aesthetic sensitivity, attentiveness to feelings within, and an active imagination (Costa &McCrae, 1992). Research has shown that these six dimensions are significantly correlated (McCrae, John & 1992). People with this trait are concerned with cognitive adventure and abstract information processing (DeYoung et al., 2012). Also, openness to experience has been largely related with a heightened use of the social media (Correa et al., 2010).

The agreeableness trait is composed of six dimensions; altruism, compliance, modesty, straightforwardness, and trust (Costa & McCrae, 1995). People with this trait are optimistic, friendly, and considerate but are not useful with issues that require complete objective or difficult choices (Williamson, 2018). Research has also shown that people with this trait have success in relationships (Asendorpf & Wilpers, 1998) or romance (White et al., 2004). Agreeable individuals put forward a stable and original in their actions (Leary & Allen, 2011). In contrast, people with low levels of agreeableness are characterised by a lack of empathy and selfishness (Bamford & Davidson, 2017).

Conscientiousness is characterised by being organised and dependable, a show of self-discipline, and planned behaviour (Kivimaki, Batty & Jokela, 2018). Conscientious people are liable to conformity (DeYoung et al., 2002). High levels of conscientiousness can manifest as workaholic, perfectionist, and compulsive behaviour (Carter et al., 2015). Researchers have discovered that conscientious people tend to portray themselves in a way that shows consistency with gender norms (Eagly & Chrvala, 1986; Leary & Allen, 2011). However, people with lower levels of conscientiousness exhibit laidback predisposition and are less goal-oriented and are likely to engage in crime and antisocial behaviour (Ozer & Benet-Martinez, 2006).

On the flipside, conformity is one of the elements of social influence and is explained as an alteration in behaviour or belief in response to some real or imagined group pressure especially when there is no direct demand to comply nor cogent reasons to validate a change in behaviour (Siegel & Calogero, 2019; Zimbardo & Leippe, 1991). Earlier researchers had generally identified conformity as the propensity of an individual to succumb to influence from a group; in other words, to allow a person's behaviour to be determined by some external force. Over the years, research has shown that factors that influence conformity include group size (Asch, 1955; Bond, 2005), task complexity and prominence (Baron et al., 1996), culture (Bond and Smith,1996), incentive (Griskevicius et al., 2006),differential personality styles in women and men (Sanchez-Lopez et al., 2012)and mood which can have a relationship with gender norm (Tong et al., 2008).

Gender norms or roles are a form of social norms. Although social norms have diverse definitions, they all involve expectations and rules set by a group of people in a particular region or clime which indicate how people ought to or ought not to behave. Social norms are described as a joint illustration of satisfactory conduct of a group plus individual perspectives of group behaviour (Lapinski & Rimal, 2005). They are more or less a product of one's culture and symbolize a person's knowledge of what others do or what they think they should do (Cialdini, 2003). Furthermore, Cialdini (2003) classified social norms into two: 'injunctive norms' which is what individuals believe themselves and others are supposed to do and 'descriptive norms' which is what individuals do. A gender role or norm is a concept that covers an array of behavioural activities and attitudes that are commonly thought of as appropriate or pleasing for people in a community(Alters & Schiff, 2009; Gochman, 2013). Gender norms are formed on the

foundations of masculinity and femininity (Eagly & Chrvala, 1986), with differences and exemptions varying from one culture to the other (Alters & Schiff, 2009; Sanchez-Lopez et al., 2012). The process by which an individual learns the expectations and rules of the society that pertains to their gender is called gender socialisation (Adler et al., 1992).

Gender norms are important as they help to offer directions on how people are supposed to think, feel, and conduct themselves. It also provide restrictions on what behaviours are not acceptable (Gilbert & Scher, 1999; Sanchez-Lopez et al., 2012). Past studies show gender roles and their impact on the lives of women (Sanchez-Lopez, et al., 2012). However, traits such as sexual fidelity, modesty, domesticity, amongst others, have been said to be connected to conformity to womanlike norms (Mahalik et al., 2005; Padovani, 2016). Conformity to feminine roles has also had a tremendous effect on women's career goals and self-concept (Eagly & Chrvala, 1986) Orlofsy et al., 1985; Rudman & Phelan, 2010). As a result of this, women pursue lifestyle habits and behavioural patterns that are associated with femininity, thereby accounting for the significant disparities between both gender in different areas of life such as employment, sports, etc (Bettio et al., 2009; (Sanchez-Lopez et al., 2012). This is a subject of interest in this study.

Here in the Nigerian context researchers Ogueji et al., (2020) researched the relationship between gender norm attitudes and psychological wellbeing. . Results indicated that psychological wellbeing was improved by traditional gender norms rather than egalitarian norms, however, the psychological wellbeing of individuals are unconsciously affected by the negative effects of traditional gender norms (Oguejiet al., 2020).

The degree to which people fail to conform to gender-based social prohibitions concerning behaviours or even feelings is known as gender non-conformity (Martin-Storey &August, 2016; Swann, 1987; Wood et al., 1997)Parents' modelled behaviour can be said to contribute to or shape early attitudes and expectations of conformity (Halpern & Perry-Jenkins, 2016). This consists of interests, traditional gender features within marital relationships or domestic partnerships, and occupation that may be seen as gender dissimilar behaviour (Cook et al., 2013; Orlofsky et al., 1985). In this study, emphasis will be placed on feminine gender norms, which refer to informal rules and expectations of the society that guide how females should behave and how females think they should behave (Swann, 1987; Wood et al., 1997)..

Statement of Problem

Many countries in Africa, including Nigeria, are deeply rooted in patriarchy. Patriarchy is a social system where men are placed as superior to women, thereby making men the authorities and women their subordinates (Tijani-Adenle & Oso, 2015). Patriarchy is based on the belief that women are weaker vessels, lacking in intelligence, emotional and psychological capacities, and unable to handle serious issues or positions of authority (Dubber, 2005). However, objectification, which involves seeing a human being as an instrument to be used for the attainment of goals, usually sexual (Fredrickson & Roberts, 1997; Nussbaum, 1999), can be said to spring from gender norms. Objectified women are seen as lesser human beings, who deserve less moral treatment (Heflick et al., 2011). This has led to an increased rate of men's eagerness to commit sexually aggressive crimes towards women (Blake et al., 2016) and a reduced perception of suffering in incidents of sexual assault (Loughan, et al., 2010).

Many institutions have helped in the sustenance of patriarchy. Conventionally, the responsibility of being a breadwinner is allocated to the man, while that of a homemaker is given to the woman (Gerber, 1988).Religious bodies also enable patriarchy by stressing the ''God-endowed'' power of the man, and the media supports these roles (Millette, 1997). For example, Hinduism gives different views on the roles of women as some texts see them as goddesses, while others relegate them to role of mother, daughter, and wife (Olivelle, 2009).

Women have been hyper-sexualised in the media, either by depicting them in little or no clothing, or by showing them as secondary or submissive to men, which may in turn cause negative effects on women's body image, self-esteem and emotional wellbeing (Collins, 2011). Women are made to conform to images on television, advertisements, and music videos to be considered as attractive (Dittma & Howard, 2004). Further research has revealed that distinctive feminine norms originate from social stereotypes of women are regularly sexualised with typical outfits (Collins, 2011). Other studies have shown that women tend to interpret some kinds of abusive behaviours shown in films as romantic and these are prevalent in the mass media (Papp, et al., 2017). On the flipside, age and educational status had no significant effort on conformity to feminine norms (Esteban-Gonzalo et al., 2020), even though previous studies have shown that well educated females are less likely to adapt to known gender norms (Patel &Buiting, 2013). In

this study, we are interested in age, and it is hypothesised that age will impact the nature of conformity amongst female undergraduate. This is an indication that gender norm conformity can impact lifestyle habits, and the development of these norms can change social structures in the society (Eagly & Chrvala, 1986).

The society, its laws and the government also give predilection to men (Tijani-Adenle & Oso, 2015). In countries like Nigeria, marital rape is not essentially taken seriously by the law (Obidinma & Obidinma, 2015), thus implying that women have little or no control over their bodies once they are married. Therefore, one can say that patriarchy goes ahead of the government and economy just to control the actions of men and women alike, by stipulating which actions are gender appropriate (Johnson, 2006). For that reason, there is a need to study the influence of personality features on conformity to feminine norms in the Nigerian context. It is essential for research to be carried out on why and how people conform to these norms and the factors that influence them.

Research Hypothesis

1.   Personality traits will be positively correlate to conformity to feminine norms.
2.   Age will generally have a significant relationship with conformity to feminine norms.
3.   Older participants will conform to feminine norms more than younger participants.

Method

The participants for this study consisted of 197femaleundergraduate of the Faculty of Social Sciences. Participants were aged between 16-30 years and recruited through convenience method of sampling to gather data in a cross-sectional survey research design. The Big Five Inventory was standardised in Nigeria to ensure its significance and suitability for the Nigerian population (Omoluabi, 2002).

The Conformity to Feminine Norms Inventory (CFNI) is an 84 Likert-type test that measures the cognitive, behavioural, and affective components that concern conformity to feminine norms (Gamst et al., 2011). It was established by Mahalik et al., (2005) to assess women's conformity to a number of feminine norms pertinent to the North American culture (Parent & Moradi, 2010). The construction of the questionnaire started with the isolation of feminine gender-role norms displayed in existing studies (Parent & Moradi, 2010).

The final version of the CFNI has 8 subscales, 84 items (42 of which are reverse items) and is graded on a 4-point Likert scale. These 8 subscales include, Care for Children, Domestic, Modesty, Nice in Relationships, Thinness, Sexual Fidelity, Romantic Relationship, and Invest in Appearance. It has a Cronbach's alpha coefficient ranging from .77 to .92 (Gamst et al., 2011) and convergent validity was established through significant positive relationships with the Feminist Identity Composite—Passive Acceptance subscale (Fischer et al., 2000) and the Bem Sex Role Inventory—Feminine Score (Bem, 1981), and significant negative relationships with the BSR Inventory—Masculinity Score (Bem, 1981).

The CFNI-45 (Parent & Moradi, 2010) contains 45 items, and each item is scored on a 4-point Likert scale with 0 = Strongly Disagree and 3 = Strongly Agree. This self-report inventory functions as a short and effective tool for the measurement and discussion of the components of feminine gender norms (Parent & Moradi, 2020). Furthermore, the CFNI-45 is administered in survey research works where the use of multiple tests may occur, and the likelihood of test taker exhaustion or boredom is of great concern (Parent & Moradi, 2010). Unlike the CFNI, the CFNI-45 contains 9 subscales namely, Thinness, Domestic, Invest in Appearance, Modesty, Relational, Involvement with Children, Sexual Fidelity, Romantic Relationship, Sweet and Nice. The Cronbach's alpha for the CFNI-45 is said to be .80, which is a positive sign of substantial consistency in the constructs measured.

To the best of our knowledge there is very little literature of the use of this scale on a Nigerian sample. This development necessitated a pilot study to test for the validity and reliability of the scale on a Nigerian sample. In a pilot study of 50 participants, the total scale measured.81 alpha Cronbach. Questionnaire administration process began with the second researcher explaining the purpose of the study and how the participants' honest responses played a salient role during the research. Consent forms were distributed, which the subjects had to sign before partaking in the study. The participants were not given any monetary compensation or any other form of remuneration for taking part in the research. A description of the process of the study was given, and the participants were informed of their liberty to withdraw their consent at any point in the research without any negative consequence. Also, the researcher assured the test takers of their anonymity. The average time required to complete the test was 30-40 minutes. After prior

instructions were given, survey packets were handed out which contained items that addressed their age, personality traits, and ability to conform to feminine norms.

The study was carried out in accordance with the ethical guidelines by the American Psychological Society (APA). First, the consent of the participants was obtained by the researcher. To ensure the validity of the test takers' consent, a consent form was given. This form contained a statement that verified the assent of the subject to his/her voluntary involvement in the study and an assurance that a refusal to partake would not result in harmful consequences. Next, the participants were enlightened about the purpose of the research, the procedures, its benefits, and the duration of the test. Furthermore, the researcher ensured that the subjects were protected from harm (physical and psychological) and their identities and responses were kept anonymous during the study. Finally, in a bid to dispel any misconceptions and worries the participants may have had during the study, the researcher debriefed the participants after the test.

Results

Descriptive Statistics

The respondents included female undergraduate students from the Faculty of Social Sciences at the University of Lagos. The intended number of participants was 200, causing 200 survey packets to be given out. Yet, only 197 survey packets were employed for this study as 2 survey packets were declared invalid because they were filled improperly, and 1 survey packet was not returned by the participant. Below is a representation of the demographic information of the participants.

Table 1: *Age Description of Participants*

Age	N (197)	Mean	Standard Deviation
16-20	69	93.09	19.63
21-25	111	96.92	16.79
26-30	9	99.00	13.09
30 and above	8	113.88	6.73
Total	197		

Table 1 shows the age distribution of participants. The age of participants was categorised into 16-20 years, 21-25 years, 26-30 years, and 30 years and above. Out of 197 participants, 69 women (Mean = 93.09) were 16-20 years of age, 111 women (Mean = 96.92) stated that they were 21-25 years, 9women (Mean = 99.00) participants were 26-30years, and 8 women (Mean = 113.88) were aged30 and above.

Hypothesis Testing

This section presents the hypotheses tested and results analysed. Three hypotheses were tested in this study. Hypothesis 1 was tested using Multiple Regression Analysis. One-way ANOVA was used to test Hypothesis 2. Lastly, Hypothesis 3 was tested using independent t-test statistics.

Hypothesis 1: Personality traits will be positively linked to conformity to feminine norms.

Table 2.

Multiple Regression Analysis Table for Personality Traits and Conformity to Feminine Norms

Variables	Mean	SD	B	β	T	R	R^2	F ratio	P
Extraversion	21.56	4.47	**-**.147	**-**.037	4.91	.351	.123	5.36	<.05
Agreeableness	32.92	5.29	.454	.135					
Conscientiousness	30.04	6.12	.783	.269					
Neuroticism	25.57	4.80	**-**.302	-.082					
Openness	35.77	5.33	**-**.271	-.081					

Dependent variable: conformity to feminine norms.

Note: SD = Standard Deviation

From the results of the regression, it is evident that personality traits are positively linked to conformity to feminine norms, as it jointly accounted for 12.3% of the variation in conformity to

feminine norms. The model was a significant predictor of conformity to feminine normsF(5,191) = 5.36, p = <.05. All the personality traits contributed significantly to the model (B=.351, P<.05), thus hypothesis 1 is accepted.

Hypothesis 2-Age will have a significant relationship with conformity to feminine norms.
Table 3

One way ANOVA results on Age and Conformity to Feminine Norms

Age	N	Mean	SD	*Df*	F ratio	P
16 – 20	69	93.09	19.63	3	3.59	.015
21 – 25	111	96.92	16.79	193		
26 – 30	9	99.00	13.09			
30 and abv.	8	113.88	6.73			

p >.05

Note: SD = Standard Deviation

The result above shows age differences in conformity to feminine norms. The difference is seen to be highly significant as F (3,193) = 3.59, p<0.05. Therefore, Hypothesis 2 which states that "Age will have a significant relationship with conformity to feminine norms." is accepted.

Hypothesis 3: Older participants will conform to feminine norms more than younger participants.

Table 4

Table of Independent t-test Comparing Older Participants and Younger Participants on Conformity to Feminine Norms

Age	N	Mean	SD	T	*Df*	p-value
16-20 years	69	93.09	19.63	-2.96	75	0.019
30 and above	8	113.88	6.73			

There was a significant difference in the conformity of Younger participants (Mean = 93.09, SD= 19.63) and Older participants (Mean = 113.88, SD = 6.73); t (75) = -2.96, p = 0.019.A p-value of 0.012 which is less than the significant level of 0.05 (p <0.05)allows the hypothesis which states that "older participants will conform to feminine norms more than younger participants." to be accepted.

Discussion

The aim of this study was to explore the concept of gender norms (particularly gender norms) and examine the influence of the Big Five Personality traits (Openness, Conscientiousness, Extraversion, Agreeableness, and Neuroticism) on these norms. This study also observed the impact of socio-demographic factors on conformity to feminine norms.

The hypothesis initially suggested that there will be a significant relationship between personality factors and conformity to feminine norms. This hypothesis was later accepted as there was in fact a significant link between these variables. This study therefore agrees with the study carried out by Orlofsky et al., (1985). The research which focused on the relationship between the sex role attitudes and personality traits, derived its theoretical framework from the principles of the Gender Schema Theory by Bem (1981), discovered a moderate association between gender-specific personality traits and sex-role attitudes/behaviours (Orlofsky et al., 1985).The result of this study also supports the findings of Sanchez-Lopez et al. (2012) on the relationship between the differential personality styles of men and women, and gender norm conformity. Their study concurred with existing literature on the differences in gender and gender norms, and how these concepts significantly affect personality (Sanchez – Lopez et al., 2012).

In this study, the demographic variable focused on was the age of the participants. Hence, the researcher hypothesised that age would have a significant relationship with conformity to feminine norms. It was also predicted that older participants will conform to feminine norms more than younger participants. With the aid of one-way ANOVA and independent t-test Statistics, both hypotheses were accepted. For this reason, it can be stated that this study agrees with the study carried out by Eagly and Chrvala (1986) on sex differences in conformity in terms

of gender role and status interpretations. Their findings conclude that the age and sex of participants influenced their levels of conformity (Eagly&Chrvala, 1986).

Gender norms are the pivot of human development and identity. They are standards and expectations that the society places upon men and women. Conformity to these norms brings about respect and acceptance by members of one's group. On the other hand, nonconformity to these norms leads to exclusion and rejection by members of the society. The consequences of nonconformity can be life-threatening and dangerous for the individuals affected. During this study, male and female gender norms were explored with timelines dating back to the rulings of the early Catholic Church till recent times. The current study delved into the ways these norms have affected several institutions in the society, including the legal system and entertainment industry. However, there was a strong interest in feminine norms, causing the researcher to focus mainly on that. In addition, concentration was placed on the concept of gender norms in Nigeria and their impact on women.

Furthermore, there was an attempt to relate conformity to feminine norms to the concept of personality factors. Although personality traits vary distinctly from one person to the next, they can be measured using personality tests such as the Big Five Inventory by John and Srivastava (1999). The researcher also investigated the influence of age on conformity to feminine norms.

Research has shown that women who uphold feminine norms as a personal standard tend to veer towards goals of connection and intimacy unlike men who tend to aim for dominance and independence in their social world (Wood et al., 1997; Swann, 1987). The study hypothesised that personality factors will have a positive impact on conformity to feminine norms. Further research confirmed the hypothesis. This connotes that personality factors (Extraversion, Openness, Conscientiousness, Neuroticism, and Agreeableness) can influence women's conformity to feminine norms. Simply put, the personality styles of women affect or determine whether they will obey the set-down rules of the society for their gender. Next, the researchers studied the influence of demographic variables on the participants' conformity to feminine norms. Huge attention was placed on the ages of the women and how this will affect their conformity. Both hypotheses proved that without a fact, age affects how women conform to

feminine norms. This means that women of a certain age are more likely to conform to these norms than women in other age groups.

This study was limited by quite several factors. First, the advent of the COVID-19 brought about an abrupt end to academic activities. This prevented the researchers from gaining unrestricted access to the preferred sample participants (undergraduate students) at the appointed time. Next, the selected participants for the study were not a proper representation of the population of Nigerian women. The research focused mainly on undergraduate rather than women in other works of life. In addition, the study placed too much emphasis on the demographic factor of age and ignored other variables that could be paramount to the course of the study such as religion, ethnicity, educational background, and socioeconomic factors.

This study strongly recommends the use of a larger sample size. This will help to strengthen the validity and reliability of the study and provide more accurate results. Also, the participants should not be limited to undergraduates but comprise of women from all works of life. This study has highlighted the importance of gender norms, how they develop, and how they affect every area of human interactions. In addition, the study attempted to provide evidence that age and personality factors had an influence on women's conformity to gender norms. In conclusion and for the purpose of further research, a variety of demographic variables should be employed. These variables would broaden the study and provide insights on various factors that can influence conformity to feminine norms.

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POLITICAL PARTICIPATION AMONG NIGERIAN TRADERS IN LAGOS: DO PERSONALITY AND LIFE SATISFACTION MATTER?

BY

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Abstract

Democracy requires participation; participating in politics is perceived to be time-consuming and a waste of time, especially among individuals who earn a daily living from their trade. This study examines the relationship between personality, life satisfaction, and political participation among traders in Lagos. The study recruited a sample of 247 (Male 178: Female 96) respondents through accidental sampling from three purposively selected markets drawn from three different local government areas of Lagos State. The study adopted a correlational research design. Big Five Inventory (BFI), Life Satisfaction Index -Z (LSI-Z), and Political Responsibility Scale (PRS) were used to collect data for the study. The result of the Pearson Correlation and Multiple regression revealed that personality traits (Extraversion, Conscientiousness, Agreeableness, and Openness to experience) have significant positive correlations with political participation (Extraversion, r =.589*, p<0.05; Conscientiousness, r =.670*, p<0.05; Agreeableness r=.123[*]; p<0.05, openness to experience, r =.570*, p<0.05). In contrast, neuroticism had a significant negative correlation with political participation (neuroticism, r= -.655[*], p<0.05). The study also found a positive relationship between political participation and life satisfaction (r=.566*; p<0.05). While personality traits and life satisfaction jointly predicted political participation (R^2 = 0.951; p<0.05). The study concluded that personality traits and life satisfaction play a significant role in political participation among trades in Lagos state. Therefore, we made recommendations based on the findings of the study.

Keywords: Personality traits, Life satisfaction, Political Participation, Traders, Lagos

Introduction

It is evident that every human society puts structures in place for the growth, development, and peaceful coexistence of the people in the society; these structures so put in place are a function of the quality of interaction between the people who inhabit the society and the society itself. This interaction between the people in the community and the interaction between the people and the society itself put in place the legal framework for society's political and governance structure. Thus, the political or government system is developed by interacting with the people who make up society. Everyone in the community needs to participate actively in ensuring that the political

and the governance structure is strengthened and not compromised by playing their roles – political participation.

Political participation is an integral part of human existence. It has existed from the beginning of life. It is ubiquitous – as no human society, whether big or small, is devoid of political participation in one way or the other. Therefore, the need for human interaction within a particular community for administrative governance brought about the concept of political participation. People's continuous interaction and participation in administrative governance maintained the idea of political participation.

Over the year, the Nigerians seeming loss of interest and lack of participation in political activities is evident (INEC,2019) compared to other countries. The number of registered voters who exercised their franchise during the 2019election in Nigeria is a suspected testimonial of the loss of interest. In a situation where the country's population is above 200,000,000, and the number of registered voters is 82,344,207 representing (41.2%) of the total population; The total number of those who were accredited to vote in the presidential election was 29,364,209representing (35.7%) of registered voters, the entire vote cast is 28,614,190which represent (34.8%) of total registered voters (INEC, 2019). The president won the election by securing 15,191,847 votes which represents (18.5%) of the total registered voters(INEC, 2019); this implies that only 18.5% of registered voters decided who becomes the president of the nation.

Furthermore, Lagos, a globally acclaimed city-state that is the commercial nerve centre of Nigeria's economy and home to the highest population in Nigeria, prides herself on many markets, business hubs, and large corporations. Ordinarily, participation and involvement in politics and political activities should be at their peak, but the reverse is the case. A review of the 2019 election report revealed that the Lagos population during the period under review, according to the united nation – world population prospect was 13,903,620, and the total number of registered voters was 6,570,291 which represents (47.2%) of the estimated total population of Lagos. The total valid vote for the governorship election was 977,476, which means (14.9%) of registered voters, while the winner of the election secured 739,445, which represents (11.3%) of registered voters (INEC, 2019). This result indicates that only 14.9% of the registered voters and

7% of the total estimated population of the state decided who becomes the governor; these follow the same trend as the result of the presidential election; this is a disservice to democracy.

However, with many markets and businesses in Lagos running for 24hours daily and seven days a week, one question that readily comes to mind is where are the traders, the business operators, and those who kept Lagos alive 24/7?A quick response to this question could be that a large percentage of the traders and business operators depend on daily earnings, which brought about the concept of "bi ose, ko je" (no work, no food) hence no time to spare for participation in politics, but a number of them depend on monthly payments. Although the business operators tend not to have time to participate in politics either at the local level or outside the market; Nonetheless, the issue is beyond the scarcity of time and dependence on daily earnings. Similarly, just as it is for traders and other business owners and workers in Lagos, many individuals today neglect their civic duty of participating in politics or decline to exercise their franchise during elections in Lagos and Nigeria as whole. This refusal by individuals to exercise their franchise have resulted in to a preponderance of voter apathy in Nigeria. It therefore become important to investigate the factors influencing political participation in Nigeria.

Several factors are associated with political participation in different settings. Some human attributes are responsible for people's political involvement, with other overt and covert motivators influencing individual participation decisions. These factors include personality, subjective wellbeing, and socio-demographic variables like age, gender, marriage, level of education, etc.

Personality is the enduring attribute of an individual that differentiates them from others - that is, an individual's behaviours or attitudes that are consistent over time and across apparently unconnected domains (Gosling, 2008). Classifying these behaviours or attitudes in a straightforward concept is called personality dimension, codified into a handful of traits. These traits (OCEAN, i.e., O-Openness to Experience, C-Contentiousness, E- Extraversion; A-Agreeableness, and N-Neuroticism or "the big five") are enduring and determine how an individual behaves, respond or act in any and every situation. Thus, having the potential to predict a wide range of behavioural outcomes, which to a large extent may determine people's decisions for or against political participation. The Big Five approach is one of the feasible

methods and the widely recognized standardized measure of dispositional personality traits. It is a self-reported approach to gathering data on personality traits. Traits such as Extraversion, Openness, Agreeableness, Conscientiousness, and Neuroticism are the focus of the Big Five approach.

Until recently, politics and political participation experts were reluctant to enter psychology by incorporating the big five personality traits into their studies. The practice has gathered momentum among experts from other disciplines. Nevertheless, the last decade has seen a gradual move toward incorporating personality into research on political behaviour.

Another issue to be examined in this paper is the influence of life satisfaction on political behaviour; this is so important because scholars often do not consider the impact of subjective wellbeing or life satisfaction as a factor in political involvement. Although several works have been done on the influence of citizens' happiness and political participation, for instance, (Healy et al, 2009) observed that happiness, a subjective variable, can trigger positive pro-social behaviour, elicit helping behaviour and increase the recall of positive memory. Others, such as (Verba et al. 1995; Rosenstone and Hansen, 1993), have worked on various individual-level factors that influence political participation but not life satisfaction, except for the work of (Flavin and Keane, 2011), who found a non-conflictual relationship between life satisfaction and political participation. For the present study, life satisfaction is the level of enjoyment and psychological satisfaction derived from living or the degree of emotional and social satisfaction derived from life.

It is no longer news that an essential part of the development of any society is for the people to participate in politics. As crucial as this duty is, many citizens, especially the traders and business owners, neither participate in the political process nor play an active role in the political development in many countries, including Nigeria. This lack of participation has further increased voter apathy already experienced, thereby dwarfing the power rotation equation to such an extent that political offices and power only rotate among the few that got the guts to participate in the political process. Several studies have identified factors responsible for this alarming decrease in citizens' political participation. Some of the factors implicated areas follows:

Regular participation in politics is a civic duty that should make participants happy. However, the quest to win at all costs brought political violence, thuggery, and other nefarious activities into politics. These negative additions to politics are now a problem that discourages many citizens who wish to participate in politics(Flores & Nooruddin, 2016:144). To this end, hate, dislike, and mistrust pervade the political space instead of being happy about participation in politics.

Another problem mitigating citizens' participation in Nigerian politics is the Monetization of the political processes (Jacob & Abdullahi, 2007). To this end, citizens who desire to participate in politics refrain from doing so because the stake is higher than it should. It is also presumed to be for the money bags that can provide the required funds and can also manipulate the system in their favour.

Another discouraging factor inhibiting political participation in Nigeria today is the volume of lies, deceit, deception, character, and personality assassination associated with politics. These make many who enjoy their privacy avoid taking part in politics for fear of being maligned and making nonsense out of the reputation they have built over time. Therefore, clean politics is perceived as being dead(Harris, Wyn & Younes, 2010); what exists now is the preponderance of dirty politics.

Another problem of political participation in Nigeria is the high risk-taking behaviour, extreme disappointment, and unrealistic optimism displayed by politicians; This is a major discouraging factor to many who wish to participate but do not have the personality attribute to do so. Therefore, they limit their participation to voting or equate political participation to exercising their franchise because they lack the personality endowment to take a risk and handle disappointment.

Thus, a review of the problem statement revealed a list of personality attributes such as fear of failure, fear of the unknown, lack of self-confidence, and political anxiety as factors against citizens' participation in politics. Others are issues relating to life satisfaction as a significant impediment to political participation. This problem statement will help anchor the present study.

Personality, Life Satisfaction, and Political Participation

Several studies have established an association between personality and political thought (Fatke, 2017), partisanship (Caprara et al., 2006), self-efficacy, and knowledge (Ha et al., 2013). Others have found an association between personality, policy attitude (Schoen & Steinbrecher, 2013; Gerber et al., 2011), and voter turnout (Bloeser et al., 2015; Dinesen et al., 2014;).

That personality attributes can describe people's political behaviour has been established by scholars (Caprara et al., 1999). Thus, they argue the view that attention to personality might also contribute to a better understanding of participatory and deliberative political behaviour. Nevertheless, the question begging for an answer here is, does personality matter in how people feel about democratic activities? Moreso, how do they participate politically in such activities? In line with the question, Mondak et al. (2010)resolved that personality causally influences political behaviour rather than the other way around. Thus, the relationship between personality and political behaviour is unidirectional and not bidirectional. The relationships between personality traits and political behaviour vary depending on the democratic act performed, but evaluating the nature of participation is sacrosanct. The relationship between personality traits and modes of involvement has been established (Gerber et al., 2011). Nevertheless, some scholars have examined the issue of personality and engagement in deliberative democratic activities.

Studies on the association between life satisfaction and political participation are scarce and inconsistent. Some studies suggest that the higher the citizens' satisfaction with life, the higher the likelihood of political engagement, whereas others suggest otherwise. For instance, Flavin & Keane (2012) revealed that the higher the level of citizens' life satisfaction, the higher the rate they turnout to vote, and the more likely they partake in conventional political activities. They also found that the impact of life satisfaction on political participation is more significant than education. Additionally, Zhong and Chen (2002) find that with an increased level of life satisfaction comes the likelihood of voting in village elections among Chinese peasants. Likewise, Bahry and Silver (1990) find that with an increase in life satisfaction derived from material possession comes a possible corresponding increase in political compliance among citizens in the former Soviet Union by voting, doing party work, and serving on a committee of the political party. These findings indicate that the higher the level of citizens' satisfaction, the more likely they will play active political roles, hence no "easy conservatism."

On the other hand, some studies have also specified that higher citizens' life satisfaction levels are associated with a dampened predisposition to participate in political responsibilities such as public demonstrations or strikes against uncommon government policies (Flavin and Keane, 2012; Barnes and Kaase, 1979). These conflicting conclusions suggest that the association between life satisfaction and political participation may depend on the form of political activity reviewed. Thus, the association between life satisfaction and political participation is a function of the reviewed activity.

However, these have led to interrogating the direction of the relationship that exists between life satisfaction and political participation. For example, an increase in life satisfaction may lead to a significant increase in political participation. However, it is also possible that increased involvement in politics will likely result in a higher level of life satisfaction. Weitz-Shapiro and Winters (2006) compared citizens who voted in a referendum to those who wanted to vote but "could not" to examine the issue of directionality on whether voting leads to an increase in "procedural utility" and satisfaction among those who participate in politics. It was discovered from findings that the actual act of voting bears no relationship with life satisfaction: Consequently, they concluded that life satisfaction influences political participation and not the other way around.

Meanwhile, studies on life satisfaction and political participation are inconsistent and jumbled. Researchers have dedicated substantial attention to life satisfaction as a dependent variable. Nevertheless, few researchers have studied the probable political consequences of the individual-level difference in life satisfaction. The finding from these studies that examined the relationship shows inconclusive results.

Theoretical Underpinnings

Numerous available evidence by scholars based their discussion of the relationship between personality traits and political participation on different theories. However, the current study adopted Rational Choice Theory (RCT) to discuss the relationship between personality traits and political participation. Rational choice theory is a theory that is often used to understand social and economic phenomena that guide the how and why individuals make decisions the way they do. The RCT emphasis individual interest and perceived best outcomes. Hence, rationality is

perceived as a subjective phenomenon, which makes the theory suitable for explaining the concept of personality traits and life satisfaction since they are non-cognitive concept.

Consequently, the study aims to examine the relationship between personality and life satisfaction on political participation among Nigerian traders in Lagos. In line with the literature reviewed, we developed three hypotheses to give direction to this study:

1.   There will be a significant positive relationship between personality traits and political participation among Nigerian traders in Lagos.

2.   There will be a significant positive relationship between life satisfaction and political participation among Nigerian traders in Lagos.

3.   Personality and life satisfaction will jointly influence political participation among Lagos traders.

Method

Research Design
The researcher adopted a correlational design for this study. The design allows the researcher to collect quantitative information on personality traits, life satisfaction, and political participation among traders who can read and write across selected markets to discover the relationship among the variables and enable future prediction of events from present knowledge. Also, Correlational design help researchers determine the strength and direction of the relationship between different variable.

Research setting
The research was carried out in three markets selected from three (3) local government areas in Lagos State: Mushin Local Government Area, Surulere Local Government Area, and Somolu Local government area. The three markets selected for the study are; Ojuwoye Market in Mushin, Tejuosho Market in Surulere, and Alade Market in Somolu. Ojuwoye Market in Mushin is estimated to have a population of Three Thousand Two Hundred (3,200) registered traders. It is the first point of call and the most popular market in the local government with an organized leadership known for its involvement in partisan politics. The Tejuosho Market is an ultra-modern market situated in the Yaba area of Surulere and is estimated to have about Two Thousand (2000) Registered traders. It is a market setting that is perceived to be relatively elitist

and dominated by non-indigenous traders. It has a high number of educated traders with less participation in leadership. In contrast, Alade Market in Shomolu is a large market with a history of strong political involvement. It is an essential point of call and rallying ground for political office seekers. The population of traders in the market is estimated to be Four Thousand (4,000). It is located in the middle of the Shomolu local government and surrounded by pockets of small markets. It also has an organized leadership with political affiliations.

Participants/Sampling

The study participants comprised 247 participants consisting of 178 (72%) male and 96 (38%) female within an age range of   20 – 67years from three selected markets in three different local government areas in Lagos State. The study adopted a convenient sampling technique in participant selection. The inclusion criteria for determining the participants are;

i.   The participant must be a shop/space owner at the market.

ii.   Must be a member of the market union.

iii.   Must be aged 20 years or above.

iv.   Must have the ability to read and write.

v.   Must have been selling in the market for five years

vi.   Must be willing or volunteer to participate in the study.

Research Instruments

There are four parts to this section. Section A is a self-developed questionnaire by the researcher to obtain socio-demographic variables such as age, sex, ethnicity, level of education, etc. At the same time, the three other parts consist of standardized psychometric instruments to gather information on the variables of the study; they include:

Big Five Personality Inventory (BFI): The Nigerian version of the Big Five Personality Inventory (BFI) by Omoluabi (2002) was adopted for this study to measure personality variables. It is an adaptation of the original Big Five Inventory (BFI) developed by John, Donahue & Kentle (1991). It is a 44-item inventory on a five-point Likert scale. The psychometric properties for the American sample was provided by John, Donahue & Kentle (1991), while Umeh (2004) offered Nigerian Psychometric properties. Reliability**:** the coefficients of the reliability supplied by John et al. (1991) are: Cronbach Alpha .80 and a 3-month test-retest of .85. The BFI adapted

by Omoluabi (2002) has a mean convergent validity coefficient of .75 with the BFI authored by Costa & McCrae (1992) and .85 with the one written by Golberg (1992). Umeh (2004) obtained .05 Extraversion, .13 Agreeableness, .11 Conscientiousness, .39 Neuroticism, and .24 Openness as divergent coefficients with University Maladjustment Scale (Kleinmuntz, 1961).

Life Satisfaction Index-Z (LSI-Z): The Life Satisfaction Index-Z by N. Neugarten, R. Havighurst & S. Tobin (1961). The LSI-Z was adapted for use in Nigeria by Omoluabi (2002). The scale assesses an individual's psychological satisfaction derived from living. The LSI-Z is an 18-item inventory designed to measure the psychological wellbeing of people over 60 years of age in particular. The original psychometric properties for American sample was provided by Neugarten et al. (1961), while Erinoso (1996) provided the psychometric properties for Nigerian participants. Neugarten et al. (1961) reported excellent inter-rater reliability coefficients when interviewers used the scale to rate respondents. The concurrent validity coefficients obtained by Erinoso (1996) by correlating LSI-Z with the Death Anxiety scale (DS: Templar, 1970) and Religious Affiliation Scale (RAS; Omoluabi; 1995) are 26 and -26, respectively.

Political Responsibility Scale (PRS): The Political Responsibility Scale by Gough, McClosky & Meehl (1952) was adapted for the use in Nigeria by Omoluabi (2002). The scale assesses an individual's potential for taking responsibility for one's political actions, accountability, dependability and integrity in social relations, and a sense of obligation to the group. The coefficients of reliability obtained are an Alpha score of .67 for American samples and .61 for Nigerian participants, a 1-week test-retest reliability of .85, and .74 for American and Nigerian participants, respectively. Gough et al. (1952) reported a concurrent validity coefficient of .47 by correlating PRS scores with criterion ratings of responsibility, while Bolaji (2002) obtained .449 by correlating PRS with the political participation scale.

Procedure

The Researchers met the participants in their respective business spaces in the three markets, namely, Ojuwoye Market Mushin, Tejuosho Market Surulere, and Alade Market Shomolu, between 2:00pm - 4:00pm, to avoid the scenario of being too early the day to attend to a researcher. The researchers explained the purpose and benefit of the visit to the traders and sought their consent for participation. All those who volunteered to participate and meet the

inclusion criteria form the participants for the study. The researcher shared study objectives with the traders individually. The researchers assisted those who could not read the questions while the traders chose the more suitable construct.

Data Analysis

The version 23 of the Statistical Package for Social Sciences (SPSS) was used to analyze the data to obtain descriptive statistics such as the Mean Scores and Standard Deviation while correlation and regression analysis was used to determine the relationship between the variables.

Results

Table 1: Table of the mean and standard deviation of the political participation, life satisfaction, and personality traits (Extraversion, Conscientiousness, Agreeableness, Openness to experience, and Neuroticism)

Variables	N	Mean	SD
Political participation	274	74.71	13.07
Life satisfaction	274	42.22	15.07
Extraversion	274	39.35	2.19
Conscientiousness	274	39.30	1.89
Agreeableness	274	39.08	1.49
Openness to experience	274	38.85	1.84
Neuroticism	274	38.95	4.17

Table 1. shows the mean and standard deviation for political participation, life satisfaction, extraversion, Conscientiousness, Agreeableness, openness to experience, and neuroticism. Political participation had a mean of (M=74.71; SD=13.07), Life Satisfaction had a mean of (M=42.22; SD=15.07), extraversion had a mean of (M=39.35; SD=2.19), Conscientiousness, had a mean of (M=39.30; SD=1.89), Agreeableness, had a mean of (M=39.08; SD=1.49), openness to experience, had a mean of (M=38.85; SD=1.84), while neuroticism had a mean of (M=38.95; SD=4.17).

Hypotheses Testing

Hypothesis 1: There will be a significant positive relationship between personality types and political participation.

Table 1: Correlation matrix of personality types and political participation

Variables	Mean	SD	PP	EX	CO	AG	OP	NE
Political participation	74.71	13.07	1					
Extraversion	39.35	2.19	.589*	1				
Conscientiousness	39.30	1.89	.670*	.804[*]	1			
Agreeableness	39.08	1.49	.123*	-.556[*]	-.227[*]	1		
Openness	38.85	1.84	.570*	.522[*]	.718[**]	.293[*]	1	
Neuroticism	38.95	4.17	-.655*	-.213*	-.402*	-.607*	-.839*	1

*indicate P<0.05

Table 2 above summarizes the Pearson Correlation analysis of the variables measured in this study. The results above show that personality traits-extraversion, Conscientiousness, Agreeableness, and openness to experience have a significant correlation with political participation (extraversion, r =.589*, p<0.05; Conscientiousness, r =.670*, p<0.05; Agreeableness r=.123[*]; p<0.05, openness to experience, r =.570*, p<0.05). In comparison, neuroticism significantly negatively correlates with political participation (neuroticism, r= -.655[*], p<0.05). Thus, hypothesis one, which stated that there would be a significant relationship between personality types and political participation, is accepted.

Hypothesis 2: There will be a significant positive relationship between life satisfaction and political participation

Table 3: Table of Correlation between life satisfaction and political participation

Variable	Mean	SD	PP	LS
Political participation	74.71	13.07	1	
Life satisfaction	42.22	15.07	.566*	1

* indicate P<0.05

Table 3 reveals that life satisfaction has significant positive correlation with political participation (r = .566*; p<0.05). The positive correlation is due to higher life satisfaction scores resulting in higher levels of political participation. Thus, hypothesis two, which states that there will be a significant positive relationship between political participation and life satisfaction, is accepted.

Hypothesis 3: Personality types and life satisfaction will significantly and jointly influence political participation

Table 4: Summary of multiple regression analysis showing the contributions of personality dimensions and life satisfaction to predicting political participation.

Variables	B	Beta	T	Sig.	R	R^2	F-ratio	Pv
Extraversion	6.457	1.086	22.725	.01	.975	.951	8.607	P<0.05
Conscientiousness	-8.824	-1.276	-8.478	.01				
Agreeableness	1.424	.163	3.934	.01				
Openness to experience	-.839	-.118	-1.147	.253				
Neuroticism	-2.856	-.911	-21.319	.01				
Life satisfaction	-.947	-1.092	-13.801	.01				

P<.05

The result indicated that extraversion contributed to the variance in political participation (Beta= 1.086, t= 22.725at p<0.05). Conscientiousness, contributed to the variance in political participation (Beta= -1.276, t= -8.478 at p<0.05). Agreeableness, contributed to the variance in political participation (Beta= .163, t= 3.934 at p<0.05). Openness to experience, contributed to the variance in political participation (Beta= -.118, t= -1.147 at p<0.05). Neuroticism, contributed to the variance in political participation (Beta= -.911, t= -21.319 at p<0.05). Lastly, Life satisfaction significantly contributes to the variance in political participation (Beta= -1.092, t= -.13.801 at p<0.05). Jointly, all the variables yielded significant coefficient of regression R^2 = 0.951 (p<0.05). This shows that personality types and Life satisfaction accounted for 95.1% of the observed variance in political participation.

Discussion

The study examines the relationship between personality traits, life satisfaction, and political participation among Nigerian traders in Lagos state. This study showed that personality traits - extraversion, Conscientiousness, Agreeableness, and openness to experience significantly correlate with political participation. This finding affirms the hypothesis that there will be a significant positive relationship between personality traits and political participation among Nigerian traders in Lagos. The result also indicated that life satisfaction has a significant positive correlation with political participation, thus affirming the hypothesis that there will be a significant positive relationship between life satisfaction and political participation. Personality traits and life satisfaction were significant predictors of political participation among the Nigerian traders in Lagos.

In the first hypothesis, the interaction pattern of personality traits and political participation shows that personality, an enduring attribute of individuals, plays a significant positive role in determining the direction of the trader's participation in politics. A critical look at personality as a variable revealed that experience, exposure, culture, and level of education, both formal and informal, play a significant role in determining an individual's personality. Hence, these factors come to bear when deciding on any issue, including political participation. Thus, the finding that personality has a significant correlation with political participation aligns with the findings of (Fatke's, 2017; Mondak et al., 2010; & Ha et al., 2013). However, unlike Ha et al. (2013), the present study found four personality traits significantly correlated with political participation. Therefore, the finding from the first hypotheses indicated that personality traits - Extraversion, Conscientiousness, Agreeableness, and openness to experience positively correlated with individual participation in politics.

The second hypothesis establishes a significant positive relationship between political participation and life satisfaction. The result demonstrates that life satisfaction- the psychological satisfaction derived from living, influences the Nigerian traders' levels of political participation. This result is accounted for by life satisfaction: Life satisfaction is the aggregation of factors such as improved physical health, social status, financial status, career status, and community support, which play an essential role in determining people's ability to make an independent and

informed decision on issues including participation in politics. This finding in the present study aligns with (Zhong & Chen, 2002; Bahry & Silver, 1990). On the other hand, results from Barnes and Kaase (1979) conclude that increased life satisfaction is associated with a reduced disposition to participate in public demonstrations and strikes against unpopular policies. Nevertheless, the present study's finding seems to imply that satisfying life makes people participate in politics either directly by voting or by taking part in any other political activities such as representing their wards, going for posts, or being patriotic.

The third hypothesis revealed that personality types and Life satisfaction jointly accounted for almost 100% of the observed variance in political participation. Consequently, personality traits and life satisfaction jointly influence political participation among Nigerian traders in Lagos. Personality traits such as Conscientiousness, Agreeableness, Openness, Neuroticism, and life satisfaction contribute significantly to the variance observed in political participation. Although we could not find any study directly supporting our findings on the third hypothesis, there are pieces of evidence supporting our results, such as (Veenhoven, 1988) and (Mondak & Halperin (2008). Therefore, with the right personality traits (Veenhoven, 1988), individuals with higher levels of life satisfaction (Mondak & Halperin, 2008) begin to look outward and beyond their personal needs and participate more actively in the political process.   Therefore, personality traits and life satisfaction are joint predictors of political participation.

Conclusion
Personality is the enduring attribute of an individual that differentiates them from others; it influences people's way of life. It determines how they relate to themself, the people around them, situations, and the environment. This enduring attribute influences numerous life outcomes, including political behaviour. Researchers have not devoted considerable attention to the influence of personality in previous political science research. Hence, the current study appraised the role of personality traits and life satisfaction on political participation. However, the study revealed the importance of personality traits on various aspects of political behaviour and ideology, as measured by the Big Five model. The study showed that personality traits - Extraversion, Conscientiousness, Agreeableness, and Openness to experience- significantly positively correlated with political participation. The second hypothesis's result revealed a significant relationship between political participation and life satisfaction. Lastly, the result of

the third hypothesis showed that personality and life satisfaction are joint predictors of political participation among the Nigerian traders in Lagos.

Recommendations

This study nonetheless shows that overlooking the impact of personality on political participation may be very expensive, albeit the effect varies depending on specific traits and the kind of participation under review. In agreement with the findings of this study, we recommended replication of this study among other groups of people in the society, e.g., people in the formal sector of the economy, those in the educational sector, and the civil and public service.

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ASEESSMENT OF INDICES OF RELASPE AMONG CLIENT WITH SUBSTANCE USE DISORDER IN DRUG TREATMENT CENTRES IN LAGOS

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Abstract
This study investigates the indices of relapse among substance use disorder clients in Lagos State. Twenty (20) items questionnaires were administered to assess the indices of relapse among substance abused clients in three (3) treatment centres in Lagos. One hundred (100) clients presently going through a rehabilitation program in the centres were used for the study. For the purpose of this research four hypothesis were formulated to guide the study, the responses were collected while data was analyzed using stratified random sampling techniques. The result of the four hypothesis indicates a significant relationship between socio economic status of family, lack of social skills, psychiatric disorder, and peer pressure with relapse prevention among substance abusers in Lagos State. Recommendation was made to ensure adequate drug education to prevent any form of relapse among client with substance use disorder. The discussion and psychotherapeutic implications for the study were essentially highlighted to ensure great awareness on the danger of substance abuse and the major factors that lead to early relapse among clients treated for substance use disorder in Lagos State rehabilitation centresvis-à-vis Nigeria in general.

Key Words: Substance use Disorder, Relapse, Clients, Psychotherapy.

Introduction

Substance use disorder is a condition in which the use of one or more substances leads to clinically significant impairment or distress in an individual. The problem of drug abuse in Nigeria is as old as mankind. Although, the use of alcohol is being regarded as a social drug but at the same time it could be abused by an individual which could lead to medical challenges. The abuse of all forms of substances caught across the nook and cranny of the society. The major disorders among substance abusers includes alcohol use disorder, tobacco use disorder, cannabis use disorder, stimulant use disorder, hallucinogen use disorder and opioid disorder. The above stated substances could lead to one form of psychological disorder or general medical impairment that could affect the psycho-social functioning of an individual.

Substance use disorder refers to medical conditions that can be directly attributed to the use of a substance. Substance related psychiatric disorders are common and causes significant medical, social and psychological problems among users and people around them. The use of psychoactive substances could have serious effect on the health, occupation and social functions on the users (Omokhodion&Pemede 2000). Addictive behaviour is a behaviour based on the pathological need for a substance use that may involve the abuse of substances such as cannabis, cocaine, alcohol, nicotine, ecstasy, etc.

Substance use disorder is one of the most prevalent and difficult mental health problems that face our society today. And it is important to note that the most common problem in substance abuse is that it affects the mental functioning of the central nervous system of an individual.

Substance use disorder or drug abuse is a pattern of drug use that are harmful to the individual and others in the community. Similarly, drug abuse is a situation where drug is taken in excess which affects the behavior of the user, the continuous use of which leads to dependence. (Bolarinwa and Badejo (1997).

The term substance abuse has a huge range of definitions related to the use of psychoactive substances or performance-enhancing drugs for a non-therapeutic or non-medical effect. This definition connotes negative judgment of the drug use in question compared to people adjudged as responsible drug users.

Some of the drugs most often associated with drug abuse include cannabis, alcohol, amphetamines, barbiturates, benzodiazepines, cocaine, methaqualone and opioids. The increased use of these substances leads to criminal penalty, physical, social and medical problems and in extreme cases mental illness. Substance abuse is prevalent with an estimated 120 million users worldwide of hard drugs such as cocaine, heroin, cannabis and other synthetic drugs (NIDA, 2012).

A relapse consists of a return to using a previously abusive substance or a turn back to behaviour as gambling, compulsive shopping or sexual compulsion which had previously been brought under control. Relapse is generally, when a person returns to using drugs or alcohol after a period of sobriety. It is a condition when an individual makes a full-blown return to drinking or use of any form of substances.
During relapse state, individual usually experience negative emotional responses, such as anger, moodiness and anxious feeling and they sometimes experience eating and sleeping problem as a result of drug use.

It is important to note that drug relapse does not occur suddenly but there are warning signs and other factors that will be experienced by the drug abusers. And the earlier the individual concerned learn how to identify some of these factors, the better for the person to prevent relapse. Some of the factors that could lead to relapse include; Destructive thoughts, compulsive behaviour neglect of coping skills, psychiatric disorder, return to unhealthy behaviour and environmental, mood swings, recurrence of depression or anxiety, isolation from groups and activities.

Generally, findings from substance use disorder rehabilitation programs have indicated that the longer the rehabilitation care the better the outcomes with individuals with substance-use disorder (McKay, 2005).

To the best of my knowledge, few studies have examinedthe indices of relapse among clients receiving drug treatment in rehabilitation centres globally.This prospective study was however

designed to examine the indices of relapse among clients presently receiving treatment in drug treatment centres in Lagos state.

Statement of the Problem

The federal government at various levels has made series of effort to provide drug education through its agencies. Despite all these efforts the abuse of all form of substances persisted in all nook and cranny of the society. The problem now is how did we reduce or stop in totality the abuse of substances in our society and how can we care for those affected with substance use disorder and consequently reduce the rate of relapse among substance abusers in Nigeria. The study therefore was premised on assessing the indices of relapse among substance abusers in Drug Treatment Centresin Lagos and consequently finding a lasting solution as regard the factors that leads to early relapse among substance abusers in Lagos vis-à-vis Nigeria in general.

Purpose of the Study

The main purpose of this study is to investigate indices of relapse among clients with substance use disorder in drug treatment centres in Lagos. Specifically, the study sought to investigate:

1. The effect of socio-economic status of the family and relapse prevention among clients treated for substance use disorder in Drug Treatment Centres in Lagos.
2. The effect of lack of social skills and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.
3. The effect of psychiatric disorder and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.
4. The effect of peer pressure and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Research Questions

In the course of this study, the following questions will be asked:

1. How will socio economic status of the family influence relapse prevention for client treated for substance use disorder in Drug Treatment Centres in Lagos?
2. How will lack of socio skill influence relapse prevention for client treated for substance use disorder in Drug Treatment Centres in Lagos?

3. How will psychiatric disorder influence relapse prevention for client treated for substance use disorder in Drug Treatment Centres in Lagos?

4. How will peer pressure of clients influence relapse prevention for client treated for substance use disorder in Drug Treatment Centres in Lagos.

Research Hypotheses

The following research hypothesis are meant to guide the information on relapse prevention for client treated for substance use disorder in Drug Treatment Centre in Lagos. In order to make the hypotheses testable statistically, it was reverted into null-form and split into the following four null hypotheses:

1. There will be no significant relationship between socio economic status of the family and relapse prevention among clients treated for substance use disorder in Drug Treatment Centres in Lagos.

2. There will be no significant relationship between lack of social skills and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

3. There will be no significant relationship between psychiatric disorder and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

4. There will be no significant relationship between peer pressure and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Population of the Study

The population of the study shall include all clients admitted at the three Drug Treatment Centres in Lagos. We have three centres in which the research are carried out which include the Federal Neuro-psychiatric Hospital, Yaba, Finger of God, rehabilitation centre, Ijaiye, Lagos and Nature Crest Rehabilitation Centre for drug addicts, Ijanikin, Lagos.

Research Instruments

The questionnaires were in three parts.

Section A: was meant to ask questions on relapse indices among clients admitted for substance use disorder in Drug Treatment Centres in Lagos.

Section B: Will include the following psychological test materials as stated below;

i. The Drug abuse screening test (DAST), authored by H. A. Skinner, this is a 20-item questionnaire that asks questions on aspects of drug use that could be problematic to the patient. The Reliability Measure was r=0.92.

Section C: The third section of the instrument takes more of the period of treatment of a patient, the rate of improvement as at the time of discharge as well as relapse indices before patient is readmitted for the rehabilitation programs.

Validity of Instruments

In order to validate the instrument to be used for the study, it was presented to experts in testing and psychiatrist for ascertaining the content validity as well as their comprehensiveness. Inter-rater measures was used in determining the final ratings of the test, while corrections suggested wasbeing effected and the final test was adapted to suit the environment and conditions in the domain of interest.

Reliability of Instruments

In order to establish the reliability of instruments, the questionnaire was trial-tested. This wasinvolving a test-retest method whereby the instrumentswasadministered to 20 randomly selected clients at the Drug Treatment Centres in Lagos, who were not substance abusers but was admitted for other psychiatric conditions that are settle enough to participate in the study. The procedure was repeated after two weeks on the same set of participants. The coefficient of the reliability of the instrument was determined by correlating the scores obtained from respondents on the two occasions to obtain the Pearson product moment correlation coefficient (r) of 0.75.

Method of Data Analysis

The data collected were analyzed and presented in the table below

Test of Hypothesis One

Hypothesis one had stated that:

There will be no significant relationship between socio economic status of the family and relapse prevention among clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Variable	Mean	SD	r-value	LS	DF	t-crit. Value	t-calc. value
Socio-economic status	11.6	1.886	-0.272	0.05	198	1.9845	3.9709
Early relapse	14.9	1.549					

Source: Researchers 2022

Table 1.The above table shows that, the calculated t-value is greater than the table t-value i.e. 3.9709 > 1.9845, hence hypothesis one which states that Socio-economic status of clients could lead to early relapse among SUD patients is hereby accepted. This goes to say that significant correlation exists between socio-economic status and early relapse of SUD patients. The negative r-value obtained above further implies that the high socio-economic status of patients the higher the level of relapse among clients.

Hypothesis Two

Hypothesis two had presented that:

There will be no significant relationship between lack of social skills and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Variable	Mean	SD	r-value	LS	DF	t-crit. Value	t-calc. value
Social skill	11.6	1.886	-0.174	0.05	198	1.9845	2.0497
Early relapse	11.4	1.719					

Source: Researchers 2022

It could be observed from table 2 above that, the calculated t-value is less than the table t value i.e. 1.0497 < 1.9845, hence hypothesis two which states that lack of social skill could be major factors for early relapse among substance use disorder clients is hereby accepted. Furthermore, the negative r-value obtained above implies that a negative correlation exists between the two variables of social skill and early relapse. This invariably means that the high social skill may not result in early relapse among SUD clients, which impolitely indicates that lack of socio skill could lead to early relapse among clients with substance use disorder.

Hypothesis Three

Hypothesis three had presented that:

There will be no significant relationship between psychiatric disorder and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Variable	Mean	SD	r-value	LS	DF	t-crit. Value	t-calc. value
Psychiatric disorder	11.6	1.886	0.4035	0.05	198	1.9845	6.2049
Early relapse	12.5	5.566					

Source: Researchers 2022

As shown by table 3 above, it could be observed that, the calculated t-value is greater than the table t-value i.e. 6.2049 > 1.9845, hence hypothesis three which states that psychiatric disorder could be a strong factors that could lead to early relapse among substance use disorder clients is hereby accepted. This goes to say that significant correlation exists between psychiatric disorder and early relapse of SUD patients. The positive r-value obtained above further implies that the severe psychiatric disorder could lead to early relapse among clients if not properly managed by the care givers.

Hypothesis Four

Hypothesis four had presented that:

There will be no significant relationship between peer pressure and relapse prevention for clients treated for substance use disorder in Drug Treatment Centres in Lagos.

Variable	Mean	SD	r-value	LS	DF	t-crit. Value	t-calc. value
Peer pressure	11.6	1.886	-0.191	0.05	198	1.9845	2.743
Early relapse	14.1	2.534					

Source: Researchers 2022

As shown by table 4 above, it could be ascertained that, the calculated t-value is greater than the table t-value i.e. 2.743 > 1.9845, hence hypothesis four which states that peer pressure could be a strong factor that could lead to relapse among substance use disorder patients is hereby accepted. This goes to say that significant correlation exists between peer pressure and early relapse of

SUD clients. The negative r-value obtained above further implies that increased peer pressure will lead to earlier relapse of SUD clients.

Discussion of Result

The findings of this study indicates a significant relationship between socio-economic status of the family, lack of socio skill, psychiatric disorder, peer pressure and relapse prevention among clients treated for substance use disorder in drug treatment centres in Lagos state as indicated below.

Hypothesis one posited that socio-economic status of the family could be a strong factor for early relapse among substance use disorder clients. This study was in line with a published study by the American Journal of Preventive Medicine in 2014 that revealed that individual living in higher income neighborhood had higher rate of alcohol and marijuana use than those who live in lower income neighborhood. In the same vain Brown et. al (1989) has found in their study that over 75% of all drug relapses were found related to inter personal struggle, socio economic risk factors, lack of social and family support and negative psychological states.Hosseini et. al., (2014), Dereck et al (2017). Also found in their study a significant relationship between socio-economic status of family and early relapse in patient treated in addiction centre in Iran.

Hypothesis two states that lack social skills could be a major factor for early relapse among substance us disorder patients, the result indicates that lack of social skill of individual that has no any form of skill tends to relapse early among substance use disorder clients. This study was in line with Ramlagan et. al. (2010) Pozven& Saleh (2020), that found in their study that poverty and unemployment and lack of social skill as major factors that leads to relapse among drug abusers. Similarly, this study was also in line with Mohammadpooraslet. al. 2012, found in their study that the major reasons why client relapse to their old habit to include having drug user in the family, lower hope, guilt, stay connected with old friends and lack of social skill/unemployment were major factors associated with relapse among patients admitted to addiction treatment centre in Maraghe, Iran.

The hypothesis three posited that psychiatric disorder could be a strong factors that could lead to early relapse among SUD clients. The result indicate that significant correlation exist between psychiatric disorder and early relapse of SUD clients. This study was in line with SAMHSA'S

2014 National on Drug use and Mental Health states that appropriately 7.9 million adults in United State had co-occurring disorder in (2014). Similarly, Kesler et. al., (1996, 1997) and Regier (1990) NIDA (2020), found in their study a significant relationship between mental illness and substances use disorder in United State of America.

Hypothesis four posited that peer pressure could be a major factors for early relapse among substance use disorder patients. The result indicates that peer pressure could be a strong factor that leads to early relapse among substance use disorder patients.

This result was in line with Mohammadpoorasee et al (2012) Biracyazam et al (2021), found in their study that the major reasons why patients relapse to their old habit could include having a drug user in the family, stay connected with old friends (peer pressure) and unemployment were the major factors associated with relapse among patients admitted for addiction in treatment centre in Iran.

Similarly, Rolinda et al (2015), their study was also in line with the outcome of this study, which found peer pressure to have a significant relationship with rate of relapse among substance abuser while family conflict, limit setting and positive family experiences were not related to obstinence outcome. In the same vain, Wadhwa (2009) in his study found that 71.1% of male and 66.7% of female respondents indicated peer pressure as predisposing them to relapse.

Implication for Psychotherapeutic Intervention

In our quest for national transformation on drug abuse the importance of clinical psychologists and other mental health professionals cannot be over emphasized. The following are some of the importance of psychotherapeutic intervention in drug rehabilitation centres.

➢ Clinical psychologists should have enough of education on the major causes of substance abuse and be familiar with various ways of helping people that have problem with drug abuse.

➢ Clinical psychologists should develop an effective psychotherapeutic technique to help their clients to solve their various psychological problems that leads to substance abuse and provides practicable ways of solving their problems.

➢ The finding of this study should guide Clinical psychologists on some of the indices that could lead to relapse among clients treated for substance use disorder.

➢ The study also reveals that peer pressure played a significant role in early relapse among substance abuser. Parent and guardians should pay adequate attention to their wards in the area of making friends that will lure them into drug habit.

➢ The psychologists are now well informed on some of the major factors that could lead to relapse among substance abusers in Nigeria.

➢ People that has problem with substance abuse should have access to appropriate treatment and proper reintegration back to the society after the rehabilitation programs.

➢ Drug abuse is a serious problem in any given society, the clinical psychologists and other mental health workers should use their expert knowledge to psycho-educate our youths and young adults on the dangers of drug abuse in our society.

➢ Good parenting and drug education in schools, mosque, churches, market place, Motor Park, hotel and other important places should be well advocated by the responsible authority through a professional psychologists.

➢ Government should see the need to train more professional clinical psychologists and other mental health personnel to reduce the menace of drug abuse in our society.

➢ Family life psychotherapy should be encouraged for parents to be well equipped with required skill to handle their children and wards respectively on the dangers of drug abuse.

➢ Government should see the need for the inclusion of drug education in primary, secondary schools and tertiary institutions as a separate subject and not incorporated into other subjects as presently indicated in the current school curriculum.

Recommendations

Based on the above findings, the following recommendations are made:

1. The government should enforce legislation already enacted to combat drug abuse in the society with particular emphasis on sales restriction of any form of drug to under age children or adolescents respectively. Adequate legislation should be applied in case of any form of abuse while those who came down with mental illness should be referred for appropriate care/treatment and rehabilitation program accordingly.

2. Adequate enlightenment campaign needs to be put into consideration like drug education, radio program seminar, workshop, hand bills and awareness campaign to educate youth and other population at risk on the negative effects of substance abuse in our society.

3. Professional guidance counselors, school psychologists, clinical psychologists in our secondary schools and tertiary institutions should be alerted to their responsibilities of enlightening the major stakeholders on the need to accelerate the current tempo of education on our youth on the danger of substance use among the general population as this will help to compliment the federal government war against drug abuse in Nigeria as implemented by NDLEA and other relevant authority respectively.

4. Drug education should be incorporated into the schools educational curriculum to enable the school authority to educate both children and adolescents on the effects of substance abuse on their health and other psychosocial problems.

5. Both primary and secondary schools should be involved in educating children of school age on the danger of substance abuse through organized school drug free club and other positive activities as this will help the children to stay away from drugs and other socio-vices both in the school and at home respectively.

6. Lack of social skill tend to correlate significantly with early relapse in this study. The need for all hand to be on deck for government, private organisation to provide work for our numerous unemployed youths as the fast majority of the participants belong to adolescents and young adult population in Nigeria.

7. Socio-economic background of the family tends to be implicated in this study. As participants from high socio-economic status tend to experience early relapse compared to low socio-economic status. The affluent in the society should therefore be careful in giving their wards too much money to finance their drug habit.

8. Psychiatric disorder has a serious implication in this study as people that suffer from mental illness tend to relapse faster than those that did not suffer from psychiatric disorder. The caregivers should give adequate support to their psychiatric patient that had co-morbid substance use disorder. The caregivers should monitor the use psychiatric medication to avoid early relapse among people that had problem with substance use disorder.

9. The treatment package used for this study would assist addicts post-rehabilitation program and as well give possible information as regard how addicts could abstained from substance use after their rehabilitation program or hospitalization.

10. Mental health professionals should actively engage family members in relapse prevention process and provide insight in major factors that precipitate early relapse among substance abuser in Nigeria.

11. People that has problem with substance abuse should have access to appropriate treatment and proper reintegration back to the society after the rehabilitation programs.

Conclusions

Based on the findings of this study, almost all the variables used for this study had a significant relationship with early relapse among substance use disorder clients. Variables like psychiatric disorder, lack of social skills, peer pressure, and socio-economic status of family correlates with early relapse among substance use disorder clients as highlighted in this study. It is therefore important for parents, care givers, schools, NGO's, and other relevant authorities to pay special attention to this important factors that leads to early relapse among substance abusers. Hence, the need for adequate measure to be put in place to control the trends and consequently reduce the menace of substance abuse in Nigeria.

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"WHAT WE DO NOT SEE OR HEAR DOES NOT HURT US": AN APPRAISAL OF PSYCHOPATHOLOGY AMONG YOUNG ADULT USERS OF SOCIAL MEDIA IN LAGOS METROPOLIS.

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Abstract

The use of social media has become a significant part of almost everyone's life, particularly the adolescents and young adults. Although social media engenders huge opportunities for social and emotional support, innovations, creativity, and learning; emerging body of evidence suggests that social media has unintended negative consequences on the psychological and mental health of users. This paper reports an investigation of the relationship between social media usage and depression among adolescents and young adults in Lagos. The sample comprised 209 adolescents and young adults from University of Lagos. Participants completed Social Media Usage Scale and Beck's Depression Inventory. Test of key propositions of the study with Pearson Product Moment correlation analysis and independent t test revealed that there was a significant but negative influence of social media usage on psychological well-being; high social media usage was significantly associated with increased level of depression and reduced life satisfaction. High usage of Instagram and Facebook platforms was significantly related to increased depression compared to high usage of Twitter and Snapchat platforms. These results were discussed in the light of reviewed literature.

*Keywords***:** Social media usage, Social media platforms, Life satisfaction, Depression

Background to the study

Whether we choose to embrace it or not, social media has become a massive part of our lives. A survey conducted by Global Web Index (2019) on social media usage, which include Facebook, WhatsApp, Twitter, Facebook Messenger, LinkedIn, Skype, Snapchat, Instagram, YouTube, Pinterest, among others,revealed that Nigerians spend an average of three hours, thirty minutes daily on social media. While an average internet user around the world, on a daily basis, spent 2 hours and 22 minutes, it is evident that social media platforms and their usage have become a huge part of our existence. Although social media provides a lot of opportunities for social and emotional support, innovations, creativity, and learning and so on, it also has the potential to hurt, such as cyber bullying, feeling of missing out, loneliness, privacy challenges, all of which can negatively impact the psycho-social and mental wellbeing of users. More so, the peer experiences, which social media also stimulates, play a critical role in the onset and maintenance of psychopathology. This may be due to the fact that the intensity, and frequency of interactions among peers in the social media environment can be significantly high (Nesi, 2018).

It appears that the more time spent on these social platforms, the more likely it is that one would experience a form of psycho-social issues or another. It may therefore be suggested that since spending more time on social media exposes young adults and adolescents to arrays of information about other people and events in their lives through messages, pictures, audios and videos posts, it may also inadvertently encourage social comparison and self-evaluation and judgement.

Comparing our lives with others is considered a fundamental drive in all human, which may serve several beneficial functions with differing outcomes. For instance, Misra, et al. (2014) argued that just the mere presence of mobile devices (without use), affects the quality of conversation between friends, which lowers the amount of empathy exchanged. In the same vein, Fox (2018) attributed the rising rate of depression among teens and young adults to them spending more time in front of a screen (social media) than in front of people. Several other reasons have also been put forward for why social media usage might lead to psychopathology challenges such as depression, loneliness, anxiety among the adolescents and young adults. These include; the pressure to fit in to the crowd. Social media tend to magnify teenagers' feelings to fit in with their peers. Users of social media platforms such as Facebook and

Instagram write about, and post pictures of, social events such as birthdays, concerts, travels, vacations, and other milestones, which portray them as 'living the life', leaving out unpleasant and disappointing moments in their live. When teenagers and young adults scroll through their social media news feed, they assumed that their peers are 'perfect' and have it all, making them feel left out and inadequate (Nalin, 2017). Other reasons include cyberbullying, decreased social skills, increased feeling of inadequacy, difficulty in communicating in person, and feeling of missing out (FOMO) (Nalin, 2017; Jacob, 2015; Beckerman & Nocero, 2003)

Although social media has its negative sides but also has its benefits. Studies have shown evidence that social media can help reduce symptoms of depression, particularly by providing emotional and social support (Shaw & Larry, 2002; Baker & Algorta, 2016; Farpour, et al, 2017), It also provides a sense of acceptance, thereby making us feel good about ourselves (Mackenzie, 2016), Increases bonding and make us happy (Dave, 2017).Social media usage is also considered an important determinant of happiness or life satisfaction (Apaolaza, et al, 2013; Dogan, 2016). And that it is associated with low levels or symptoms of depression (Baker & Algorta, 2016, Shaw & Larry, 2002).However, there are also evidence that contradicts these findings, suggesting that high social media use is strongly correlated with depression and unhappiness (Kross et al, 2013; Pantic, 2014; Sidani, 2016).

These heterogeneous findings form a strong basis for this investigation. Furthermore, studies focusing on effects of social media on mental and psychological well-being among adolescents and young adults, especially in Nigeria, are very few.In this study, it is reasoned that the longer adolescents and young adults stayed glued to social media, the stronger the likelihood that they would access information (see and hear things)that would encourage negative social comparison, negative self-evaluation and bullying, which could lead to feeling of missing out and inadequacy and subsequently, poor psychological and mental wellbeing. Hence the saying that "what one does not see or hear does not hurt".

Therefore, the primary aim of this study is to examine the relationship between time spent on social media and life satisfaction and depression. To achieve this, it examines the relationship between social media usage and life satisfaction; it examines the relationship between social

media usage and depression. It also examines how the use of different social media platforms influences depression.

Theoretical Framework

Festinger's social comparison theory (1954) describes social comparison as the process of thinking about the self in relations to others. The theory provides a theoretical frame work for this study. The theory posits that our personal and social worth is largely determined by our perception of how we measured up to others. It has been argued that individuals possess an intrinsic motivation "to know if one's opinion are correct and to know precisely what one is capable of doing and not doing" (Lim, 2013).We do every day by weighing our opinions and abilities compared to those in close proximity to us or those in our society. This process is similar in social media interactions. We compare ourselves to our followers, those we follow, and other social media users, which we either think are better or worse than us (upward and downward comparison). When we perceived that we are better in such a social comparison, especially in downward comparison, we become elated, happy, and experienced a feeling of high social and personal worth. But when we come short in such a social comparison, especially in most upward social comparison, we become sad, anxious and experienced a feeling of low self-esteem and reduced self-worth.

Social comparison has motivational benefits, but it also has many drawbacks. Social comparison has been cited to have the ability to motivate people to do their best and attain higher heights. It presumably gives a reality check "We may not even realize what is even possible without the model of other people; the example of other people can expand our sense of what we can imagine for ourselves" (Sisson, 2014). However, comparing ourselves to others could have some detrimental effects on our mental well-being. Depression, insecurity and low self-esteem can be linked to social comparison, especially on social media. Adolescents or young adults who access information and posted contents (videos, pictures, and audios) of peers' seemingly exciting life and compares it to theirs, which they may believe is boring, will most likely experience feelings of sadness. In a research that investigated Instagram social media platform, investigators cited social comparison as 'a thief of joy' (Vries, et al, 2018).

Empirical Review

Several scholars have developed a number of theoretical approaches to explaining social media use and its many influences. Studies have investigated the relationship between social media use and depression; social media use and life satisfaction; and social media platforms and depression. These studies give insight into whether or not these variables are related to each other.

A large number of studies have found significant evidence of correlations between social media usage and depression. Bashir & Bhat's (2017) reported that individuals' excessive use of social media leads individuals to disastrous results that usually starts with anxiety and ends in depression. A person who is depressed usually experiences several of the following symptoms; feelings of sadness, hopelessness, pessimism, lowered self-esteem, loss of appetite and disturbed sleep or insomnia (Jayavardhini, 2015). Negative thoughts, which are generated by dysfunctional beliefs are typically considered as the primary cause of depressive symptoms (Merrell, 2013). The more negative thoughts an individual have, the more depressed the person will be (Nemade, et al, 2007).

Pantic (2014) suggests that prolonged use of social media potentially exposes users to dysfunctional beliefs which contributes to depression. In a study that examined 1700 adults in the United States (850 females, 850 males) in which participants reported how often they use social media each day and filled out standard questionnaires about their depression, the results showed that the group that reported the highest rate of social media use had "significantly increased odds of depression" (Sidani, 2016). Another study, which links depression and social media usage studied 1,787 people aged between 19 and 32, and found a strong relationship between how long people spent on social media sites daily and the number of depressive symptoms they experienced. In other words, the more the media usage, the more hopeless and helpless they felt (Riley, 2018).

The major challenge with studies on social media usage and depression is that of causality. Most of these studies do little in explaining whether it is social media usage that causes the depression seen in the respondents or whether it just happens to be that depressed people log on to these platforms than those who are not depressed. However, Kross, et al (2013)suggests a causal link between the two variables. They found that using Facebook resulted in making people less happy. The researchers used a test-re-test design, which ruled out the explanation that people

turn to Facebook when they are feeling sad by testing people's well-being before and after using the site. The results of the study showed that there was a significant increase in respondents' level of sadness after using Facebook. Sadness and depression are not the same thing; it should therefore be noted that the findings of the study did not entirely explain whether or not using Facebook causes depression.

However, there are empirical studies that indicate that social media is also associated with life satisfaction and happiness. For instance, researchers such as Rettner (2018) suggested that the way social media is handled other than the use itself, may explain why influences of social media are not only negative but positive as well. In a study, which analyzed information given by 500 undergraduate students who actively used Facebook, Twitter, Instagram and Snapchat, it was found that depression was not just linked to social media usage, but specifically to 'how' it was used (Rettner, 2018).

If people use social media for positive purposes, they would also reap some of the positive influences and vice versa. Shaw & Larry (2002)study on the relationship between internet communication and depression, loneliness, self-esteem and perceived social support, demonstrated that social interaction online can improve self-esteem and decrease depression.

Baker & Algorta (2016) noted that positive outcomes of social media use across multiple studies, might indicate that, for some that used it for positive purposed, online social networking may act as a resource in depression management. For example, a study on the impact of social media on depression in cancer patients found that there was a beneficial effect of social media on the depression and anxiety of cancer patients (Farpour, et al, 2017). Social media provides social, emotional, or experiential support for individual with chronic diseases and improves patient care Patel, et al (2015). Similarly, Sarasohn-Kahn (2008) found evidence which showed that "social media and the internet are empowering, engaging and empowering health care providers as well as consumers".

Social media consist of a vast array of internet-enabled social networking platforms that enable users to communicate and interact with others verbally and visually (Carr & Hayes, 2015). These platforms include; Facebook, Instagram, Snapchat Twitters, YouTube, Wassap, Instagram, Tiktok, and so on. Instagram is a solely image-based social network site with over 700 million

active users and an estimate of 80 million images are reportedly uploaded per day (Ratcliff, 2016). Snapchat is a mobile messaging service from Snap Inc. that enables users to sends photos, videos and messages that remain on the platform for up to 10 seconds, to each other (Christensson, 2016). Facebook is a social networking site that allows registered users to create profiles, upload photos and video, send messages and keep in touch with friends, family and colleagues (Rouse,) Twitter is a free social networking platform that allows users to share information about their experiences, thoughts and so, in a real-time news feed (Mistry 2011) It is doubtful if these variegated social media platforms will have similar effects on the psychological and mental well-being of users.

A study by Royal Society for Public Health and Young Health Movement (2017)which asked children to score how each of the social media platforms they use impacts upon 14 health and wellbeing related issue found that Instagram and Snapchat are the social media platforms that have the worst impact on children's mental health. In the report, YouTube had the most positive impact and Instagram and Snapchat were the most detrimental to young people's mental health and wellbeing. The negative mental health impacts include anxiety, depression and loneliness. Because both platforms are very image-focused, they may inadvertently be driving feelings of inadequacy (Shead, 2017). These feelings of inadequacy may be as a result of negative social comparison and interactions.

Method

This research was carried out in various Departments and Faculties of University of Lagos. Nigeria. A total of 209 adolescents and young adults who were selected using convenience sampling technique participated in the study. Their ages ranged between16 – 30 years.

This study employed correlational design, as there was no manipulation of variables. This design was chosen to help describe the relationship between the independent variable (social media usage) and the dependent variables (life satisfaction and depression).

The following instruments were used for data collection:
Social Media Usage Scale: This is 7-item scale developed by the researcher to measure the length of time an individual use of social media. All 7 items are adapted from Young's Internet Addiction Scale (IAS)(1998). A pilot study on the scale using 147 respondents showed a

Cronbach alpha reliability of .87. Each item's score was added to form one respondent's score. Participants with total scores above the mean were rated as having high social media usage, and those that scored below were rated as low social media usage.

Satisfaction with Life Scale (SWLS): is a 5-item scale used to measure the level of satisfaction in life amongst respondents developed by EdDiener (1984). Respondents were required to answer the items on the questionnaire on a Likert scale 1=strongly disagree to 7=strongly agree. Scores on this scale ranged from 5-35. Okwaraji, Aguwa, Shiweobi-Eze (2015) reported a test-retest correlation co-efficient of 0.82 and an alpha coefficient of 0.87. Each item's score was added to form one respondent's score. Participants with SWLS scores above the mean were rated as having high satisfaction with life while those with scores below the mean are rated as having low satisfaction with life.

Beck's Depression Inventory (BDI) Beck, et al. (1961): It is a 21-item self-report questionnaire, which is used to measure characteristic attitudes and symptoms of depression. Every item on the instrument is scored on a 4-point scale. The questionnaire is scored by adding together the ratings of the 21 items, with scores ranging from 0-63. Okwaraji, Aguwa, Shiweobi-Eze (2015) reported a test-retest reliability of r=0.93, an internal consistency of α=.91. They reported that the scale was positively correlated with Hamilton Depression rating scale r=0.71. Participants with BDI scores above the mean were rated as having high level of depression while those with scores below the mean are rated as having low level of depression.

Procedure: The questionnaires were distributed to available students in the following faculties in University of Lagos: Arts, Business administration, Education, Engineering, Environmental sciences, Law, Science, Social Sciences. But prior to completing the questionnaires, the participants were informed of the purpose of the study and asked for their voluntary participation. Also, the participants were all assured that information they provide will be treated with utmost confidentiality. The data obtained from the participants' questionnaire was analyzed with Statistical Package for Social Sciences (SPSS) using Pearson Product Moment Correlation and independent t test.

Result

Table 1: Pearson Correlation Statistics between Social Media Usage and Life Satisfaction.

	Mean	Std. Deviation	Social Media Usage	Life Satisfaction
Social Media Usage	28.12	10.68	1	
Life Satisfaction	23.26	4.90	-.291[*]	1

*p<0.05

This result shows that there is a significant negative relationship between the social media usage and life satisfaction (r -.29). This correlation indicates that as social media usage increases, respondents' life satisfaction decreases. But as social media usage decreases, respondents' life satisfaction increases.

Table 2: Independent t-test of differences in the degree of Social Media Usage and Life Satisfaction.

	Social Media Usage	N	Mean	SD	t	Df	P<0.05
Life Satisfaction	High Rate Of Social Media Usage	117	22.74	5.92	-1.75*	207	0.00
	Low Rate Of Social Media Usage	92	23.93	3.08			

*P<0.05   t. value -1.75

Result shows a significant difference between high and low social media users on life satisfaction. From the result, the t-test comparison yielded a t-value of -1.75 at p<0.05. This implies that there is a significant difference in life satisfaction between the low media users and high social media users with the low social media users having a significantly higher mean score on life satisfaction compared to high social media users.

Table 3: Pearson Correlation Statistics between Social Media Usage and Depression

	Mean	Std. Deviation	Social Media Usage	Depression
Social Media Usage	28.12	10.68	1	
Depression	8.39	5.51	.190*	1

*p<0.05

This result established the fact that there is a significant positive relationship between the social media usage and depression (r .19).   This correlation indicates that as social media usage increases, depression increases.

Table4: Independent T-Test comparison of Level Social Media Usage by Depression.

	Social Media Usage	N	Mean	SD	T	Df	P<0.05
Depression.	High Rate Of Social Media Usage	117	9.64	5.54	3.797	207	0.00
	Low Rate Of Social Media Usage	92	6.81	5.07			

*P<0.05

Result shows a significant difference between high and low social media users on depression. From the result, the t-test comparison yielded a t-value of 3.797 at p<0.05. This implies that there is a significant difference in depression between the high social media users and low social media users sampled. The result also shows that high social media users have a significant high rate of depression than low social media users.

Table 5: Independent T-Test comparison of Social Media Platform Used by Depression.

	Social Media Platform Used	N	Mean	SD	T	Df	P<0.05
Depression.	Snapchat and Twitter	155	7.52	4.69	-3.99	207	0.00
	Facebook and Instagram	54	10.88	6.82			

*P<0.05   t. value -3.99

Result shows a significant difference between Instagram and Facebook users, and Snapchat and Twitter users on depression. From the result, the t-test comparison yielded a t-value of -3.99 at $p<0.05$. This implies that Snapchat and Twitter users have a significant lower level of depression compared to Instagram and Face book users.

Discussion

The results of the study revealed that there is a significant negative relationship between social media usage and life satisfaction. Low social media users reported higher life satisfaction than high social media users implying that the more the time spent on social media the lesser the reported life satisfaction. Furthermore, the study found that high social media usage is associated with depression. The findings suggest that there is a linear relationship between depression and social media usage, which means that as social media usage increases, depression increases, and as depression increases, social media usage increases. In other words, adolescents who are high users of social media, especially Instagram and Facebook, reported experiencing more depression compared to students who are low social media users. The finding is in consonance with the research of Sidan (2016) who investigated the relationship between social media use and depression in the United States, and found that people who use social media tend to experience higher rates of depression, than individuals who do not use social media as often. The finding of this study corroborates that of Bashir & Bhat (2017) which found that individual's excessive use of social media leads individuals to disastrous results that usually starts with anxiety and ends in depression.

Riley (2018)also found a strong relationship between how long people spent on social media sites daily and the number of depressive symptoms they experienced i.e. the more usage, the more hopeless and helpless they felt. Similarly, Pantic (2014) argues that prolonged use of social media potentially contributes to symptoms of depression. Taken together, these findings indicate that prolonged use of social media leads to depression. One possible explanation for this finding could be that the longer the time spent on the social media, the more likely is the tendency to come across, visual and auditory, information that may hurt and negatively affect an individual's self-evaluation, leading to unhappiness, anxiety and depression. This is likely to be more pronounced, especially for high users of Instagram and Facebook. It is therefore not surprising

that this study found that users of Facebook and Instagram showed a higher level of depression compared to their Twitter and Snapchat counterparts.

However, this finding contradicts the research of Apaolaza, et al. (2013), which investigated the relationship between social networking sites usage and psychological wellbeing in Spain. They found that that social networking sites had positive effect on the psychological wellbeing of its users. The finding of this study is also at dissonance with the findings of Dogan, (2016), which tested the relationship between social networking sites usage and happiness in high school students and found that social networking sites usage significantly and positively predicted happiness in students. These findings indicate that increase in use of social networking sites indicated an increase in happiness which is the opposite of the results of this research. A possible explanation for this contradiction could be that the users sampled in these studies engaged more in positive and good usage of the networking platforms, and also engage more in positive social comparisons (more downward), positive interactions and evaluations. For instance, Seabrook et al. (2016) reported a significant association between negative online interaction and both depression and anxiety.

This study also shows that there is a significant difference in depression between Twitter and Snapchat users, and Facebook and Instagram users. The findings indicate that though Twitter, Snapchat, Facebook and Instagram users reported experiencing depression. However,Facebook and Instagram users showed a higher level of depression than Twitter and Snapchat Users. This finding corroborates reports that Instagram has the most negative overall effect on young people's mental health. It could be that because Instagram and Facebook are predominantly photo and video sharing platforms, users regularly post pictures and videos that are edited to make them look good. This may lead some users to engage in negative social comparisons about their own appearance, abilities and achievements, which in turn leads to poor self-evaluation, anxiety, and subsequently depression. Appel, et al. (2016) reported that passive Facebook use predicts social comparison and envy, which in turn lead to depression.

Conclusion

The study examined social media usage with the aim of identifying its relationship between life satisfaction social media usage, the relationship between social media usage and depression and

as well as the relationship between social media platforms and depression. The findings of this study showed that there was a significant negative relationship between social media usage and life satisfaction. Interestingly, the results showed a significant difference in life satisfaction between low social media users and high social media users.The results found a significant positive relationship between social media usage and depression as well. There was also a significant difference in depression among high social media users and low social media users. Results provided evidence revealing that there was a significant difference in depression across social media platforms. According to the findings, the study shows that social media usage generally has a negative impact on mental health as many of them scored high on the depression scale. Also their level of life satisfaction is negatively correlated with their social media usage and this implies that as their social media usage decreases, life satisfaction increases. There is a significant difference in depression levels among rates of social media usage i.e. low social media usage and high social media usage, this implies that one's social media usage can influence their level of depression. The results of this study showed that the individual's choice of social media platforms can influence their level of depression and Facebook and Instagram users were found to have a higher level of depression than Snapchat and Twitter users.

The findings of this study has implications for the psychological and mental well-being of adolescents and young adults (especially undergraduates) that make use of social media in Nigeria. This studyestablishes thathigh usage of the social media could compromise their psychological and mental health. High usage of social media, especially Face book and Instagram could reduce life happiness of adolescents and predisposes them to depression.

 It is therefore important foradolescents and young adult to ensure that they do not spend too much time looking though social media platforms. It would be helpful to engage in simple things like timing the time spent on social media, finding a new hobby, exercise and so on, that would lead to a more positive in-person interactions. Social media platforms may also help by installing a mechanism that alerts users when they stay too long or periodically alert them to the time they have spent on the platform, as part of their social responsibilities to the society.

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