

The Attitude of Health Educators towards their Role as Teaching Professionals in Tertiary Institutions in Southeast Nigeria

Ugwu Cosmas Uchenna*, Ofuebe Justina Ifeoma, Umoke Prince Christian, Samson Olaoluwa Agbaje

Department Health and Physical Education, University of Nigeria, Nsukka, Enugu State, Nigeria

*Corresponding author: uchennacos.ugwu@unn.edu.ng

Abstract The teaching profession is a noble profession that requires a well-defined attitude from the professionals in educational institutions. The study determined the attitude of health educators towards their role as teaching professionals in tertiary institutions in Southeast Nigeria. The study was guided by five research questions and four null hypotheses. Relevant literature was reviewed and properly documented. The study was based on the descriptive survey research method. Two hundred and fifty health educators constituted the sample size. A five-point attitude scale questionnaire, and guided by an extensive literature review was used for data collection. Data were analyzed using descriptive statistics involving mean score, standard deviation and t-Test statistical tools. The result showed that the attitude of health educators towards their role as teaching professionals in tertiary institutions in Southeast Nigeria is favourable. The study also revealed that the attitude of males, above 21 years of teaching experience, urban and higher degree health educators towards teaching profession is favourable while the attitude of females, with less than 21 years teaching experience, rural and first degree health educators is unfavourable. Statistically, it was found that significant differences exist between variables of the respondents. The study concluded that this paper in its modest and humble efforts has attempted to awaken the consciousness of health educators by establishing their attitude towards their role as teaching professionals in tertiary institutions. The favourable attitude exhibited by the health educators in the present study is an indication that all the training, programmes and prospects put in place for their professional development is satisfactorily serving its purposes and therefore buttressing the need for enhancement strategies for sustenance in achieving the goal of health education as a discipline and education at large.

Keywords: variables, attitude, teaching profession, health educators, tertiary institutions, Nigeria

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1. Introduction

Teaching is the specialized application of knowledge, skills and attributes designed to provide unique services to meet the educational needs of the individual and the society [1]. The aim of education is the all round development of a child's personality [2] which includes knowledge, attitude, and behaviour. Thus, the choice of learning activities whereby the goals of education are realized in the school, colleges and universities, is the responsibility of the teaching profession. In the view of the College Foundation of North Carolina [3], the teaching profession is described as a demanding job that requires defined attitude, self-efficacy, in-depth knowledge of subject, content, age-specific pedagogy, and many varied skills such as patience, leadership and creativity, in order to accomplish the goal of education. In addition, education has been proven as an instrument par excellence for effective national development which relies on teacher's

attitude and self-efficacy in the teaching profession [4]. This suggests that educational goals cannot be accomplished without qualified educators in the profession.

At university level, every discipline has its own goal which is achievable through the efforts of trained professionals in the area. Health education is an integral part of human life, growth and development that nurtures one from infancy until death. It is a process that is action oriented and capable of bridging the gap between what is known about health and health practices. As an area of specialization, it is a never ending process, which trains the mind and body and takes care of the physical, social, mental, intellectual, emotional, occupational and spiritual aspects of the individual [5]. Health education further creates awareness that everyone shares responsibilities to protect his/her own health in order to reduce the incidence of diseases, disabilities, and death [6]. Health educators have the potential to shape and modify a person's way of life, habit, attitude and knowledge.

In addition to the conventional professional development of teachers [7] health educators further receive specialized

training in the diverse areas of health. These include: disease prevention, first aid and safety education, family life and sex education, consumer health, emotional and mental health, drug, tobacco and alcohol education, prolongation, restoration, and rehabilitation of health, maternal and child health, health promotion, among others. Health educators, however, seek to promote human health by educating people on appropriate measures in eliminating diseases, disability and premature death. They inform people about the causes and preventive measures to diseases, especially those related to lifestyle.

Health educators prepare the students by equipping them with the right knowledge, attitude, and behaviour in achieving the goals of health education. Nolte [8] observed that the goals of health education include helping people to live zestful and productive lives in an environment that is as free as possible of any threatening or damaging condition. This is in accordance with the goal of the nation on health, as stated in the National Health Policy (1986) [9] which are to have a level of health that will enable all Nigerians to achieve socially and economically productive lives. The expectation is to ensure that the highest level of productivity and social well-being in all citizens is attained. The development and promotion of individual and national self-reliance, as well as peoples' ability to become full partners of health care is among the tasks of health educators. They occupy pivotal positions in the attainment of maximum levels of wellness in individuals and the nation at large. These standards and expectations are reflected in the level of effectiveness and attitude of health educators in tertiary institutions.

Attitude as a concept is a set of affective reactions towards an object that predisposes the individual to behave in a certain manner towards the attitude object [10]. It then follows that the quality of health educator's attitude is judged from the observable evaluative responses he tends to make, in this case towards the teaching profession. Attitudes, however, have the tendency to influence performances, quality of services, self-efficacy and commitment to teaching tasks. This is reflected in the students' academic performances and the quality of education of a nation. Health educators are the pivots and implementers of health programmes both in schools and out-of-school settings.

The attitude of health educators is crucial in accomplishing the goal of health education especially in developing regions of the world such as Nigeria.

Given that this is the first descriptive survey on attitude of health educators in tertiary institutions, it is still unknown as to whether this attitude differs based on socio-demographics of the health educators. Available studies have shown that the attitude of college teachers towards their role as teaching professionals is neither more favourable nor unfavourable [2], yet little is known on the attitude of those in special areas in tertiary institutions, like the health educators. There are reports that about 75% of teachers have more favourable attitudes towards their profession. It is also indicated that statistical differences exist between male and female teachers, urban and rural teachers among others [2,11]. In addition, there is a general speculation that health educators, notwithstanding are dissatisfied with their profession in spite of their training, programmes and prospects. Thus, the need for the present study which provides answer to the question:

The attitude of health educators towards their role as teaching professionals in tertiary institutions in Southeast Nigeria. This was the gap the present study filled. This study was restricted to tertiary institutions of Southeast Nigeria.

1.1. Statement of the Problem

The problem for the present study is specifically stated as follows: - Attitude of health educators towards Teaching Profession in Tertiary Institutions of Southeast Nigeria.

1.2. Review of Related Literature

Literature relevant and related to the present study were properly reviewed and documented. Barwal [11] studied attitude of secondary school teachers towards the teaching profession and found that: there is significant difference in the attitude of male and female; graduate and post graduate; rural and urban secondary school teachers towards the teaching profession. Dabdas and Santosh [2] recently conducted a study on "The attitude of college teachers towards the teaching profession. Their study found that: The attitude of college teachers of Cooch Behar District of West Bengal is neither more favourable nor unfavourable towards the teaching profession. Their study further revealed that there is a significant difference between the attitude male and female; Arts and Science Streams; general caste and SC/ST college teachers towards the teaching profession. The study also found that: there is no significant difference between the attitude of rural and urban; less than 5 years and above than 5 years; General caste and OBC; permanent and part Time College Teachers towards Teaching Profession. Saxena [12] studied "Teacher effectiveness in relation to adjustment, job-satisfaction and attitude towards the teaching profession" and found that teachers in private colleges have better attitudes towards the teaching profession than government colleges. Banerjee, Srijita & Behera, [13] have conducted a study on "The attitude of secondary school teachers towards the teaching profession in the Purulia District of West Bengal, India." The study revealed that: The attitude of secondary school teachers of the Purulia district of West Bengal is neither more favourable nor unfavourable towards the teaching profession. There is a significant difference in the attitude towards the teaching profession between male and female teachers, rural and urban teachers. The study also revealed that: there is no significant difference in the attitude of trained (pedagogical training) and untrained (no Pedagogical training); social and general science teachers towards teaching profession. Zayapragassarazan, and Pughazhendi [14] determined the perception of B.Ed. student-teachers towards the teaching practice programme and found that there was an overall favourable perception among the student-teachers of different education colleges of Pondicherry and Karaikal region. Their study further revealed that: there were no significant difference between male and female; language and science group; arts and science group; arts and language B.Ed. student-teachers perception of teaching practice programme. Oruc [15] studied 80 trainee teachers studying at state university's Faculty of Education of English Language Teaching Department in Turkey. The study revealed that the attitude

of the participants towards teaching profession were very positive.

1.3. Significance of the Study

In recent times, there are general speculations or feelings that health educators do not have favourable or desirable attitude towards the teaching profession. Reasons were attributed to the increasing rates and spread of both preventable and communicable diseases in schools, colleges, and universities. However, it is a known fact that the attitude of health educators towards teaching profession has the tendency to propagate preventive measures against diseases, promote health and wellness [5,6].

In addition, it also influences the job performance, level of job satisfaction, quality of service delivery and achievements in the profession. A favourable attitude towards the teaching profession, not only encourages high level of productivity, efficacy, and team spirit, but to a great extent, is more satisfying and professionally rewarding. Thus, a favourable attitude is desired in teaching profession for effective discharge of duties. An unfavourable attitude, however, makes the teaching job unpleasant, harder, tedious, unrewarding and creates dissatisfaction. On the part of the students, their concentration and interest during teaching-learning processes is usually dependent, to a large extent, on the attitude of the health educator. This is an indication that the attitude of health educators in tertiary institutions influences the rate at which the students cope, gain knowledge, acquire skills, and competencies needed for health promotion and disease prevention. Therefore, the need to find out the health educators' attitude towards teaching profession in tertiary institutions of Southeast Nigeria becomes very expedient for the present study.

The result from the present study is significant to educational institutions and government. The finding will help the educational institutions to develop measures and appropriate strategies on how to develop and sustain favourable attitude towards teaching profession among the teaching staff in general and health educators in particular. The government through the findings of the study will develop new policies or strengthen the existing one in relation to sustaining favourable attitude on educators in schools, colleges and universities.

The present study did not only reveal a deeper understanding of attitude of health educators towards teaching profession, but also showed the difference within variables of gender, years of teaching experience, location and educational qualification. An attitude is generally referred to as mind-sets to action, an internal readiness to behave or act. It is in this regard that the researchers deemed it fit to review and explore relevant literature and further ascertain the status of health educators' attitude towards teaching profession of Southeast Nigeria. It is hoped that this study will be able to make some significant contributions in the field of health education as a discipline and education at large.

1.4. Purpose of the Study

The purpose of this study is to determine the attitude of health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria; and further verified differences within variables of gender,

years of teaching experience, location and educational qualification.

1.5. Research Questions

The following research questions guided the study:

1. What is the attitude of health educators towards their roles as teaching professionals in tertiary institutions in Southeast Nigeria?
2. What is the difference between the attitude of male and female health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria?
3. What is the difference between the attitude of health educators having less than 21 years and above 21 years teaching experience towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria?
4. What is the difference between the attitude of urban and rural health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria?
5. What is the difference between the attitude of health educators having first degree and higher degree qualification towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria?

1.6. Hypotheses of the Study

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

1. There is no statistically significant difference between the attitude of male and female health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.
2. There is no statistically significant difference on the attitude of health educators having less than 21 years and above 21 years teaching experience towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.
3. There is no statistically significant difference on the attitude of urban and rural health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.
4. There is no statistically significant difference on the attitude of health educators having first degree and higher degree qualification towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.

1.7. Scope of the Study

The study was delimited to only health educators on permanent appointment in tertiary institutions in Southeast Nigeria. The health educators on part-time or contract appointment were excluded for the study. This study was not an in-depth survey rather it was carried out at the surface level. The attitude of the respondents was obtained by administering an attitude scale instrument in the form of questionnaire to the subjects in their respective institutions. The differences within variables of gender, years of teaching experience, location and educational qualification of the respondents were verified

2. Method

The study falls within the paradigm of the descriptive survey research method.

2.1. Population of the Study

All the health educators in tertiary institutions of Southeast Nigeria, with a total of 765 permanent staff comprised the population for the study.

2.2. Sample and Sampling Technique

The sample size for the study consisted of 250 health educators based on the criteria of Cohen, Manion, and Morrison [16]. Two-stage sampling procedure was used. The first stage involved purposive selection of two tertiary institutions (one institution from urban and the other from rural settings) from each of the five states (Enugu, Abia, Anambra, Imo and Ebonyi) making a total of ten institutions. The choice of purposive technique was to ensure that institutions in both urban and rural areas were selected. In the second stage, a simple random selection of 25 health educators from each of the sampled institutions was employed. Hence, total sample of this study consisted of 250 health educators.

2.3. Data Collection Instrument

A five-point attitude scale questionnaire developed by the researchers based on extensive literature review was used for data collections. The scale contains five point response options that is to say that, each of the item statement on the attitude of the respondents has five options for selection.

2.4. Statistical Technique

Mean Scores, Standard Deviation, and t-Test were the statistical tools used to analyze the data and test the null hypotheses. The cut-off point for the weighted mean was 3.00 accrued from five-point response options, hence any item that weighed 3.00 and above signifies favourable attitude while any item less than 3.00 implies unfavourable attitude towards their role as teaching professionals.

2.5. Data Analysis and Interpretation

The results of this study are hereby organized and presented in two sections: data answering the research questions and data testing the null hypotheses.

2.5.1. Answering Research Question One

Table 1. Presenting Attitude of Health Educators

Attitude	N	Mean	S.D	Remark
Average Mean	250	3.40	1.012	FA*

FA*=Favourable Attitude; UA**=Unfavourable Attitude; S.D= Standard Deviation.

From Table 1, it is found that the average mean score of 3.40 and standard deviation (1.012) is above the cut-off point of 3.00 indicating favourable attitude. Thus, this implies that, the attitude of health educators towards their roles as teaching professionals in tertiary institutions in Southeast Nigeria is favourable.

Table 2. Showing significant differences between variables

Variables	N	Mean	S.D	Dec.	tcal	Pv	RK	
G	M	147	3.22	0.81	FA*	1.4	2.15	NS**
	F	103	2.70	0.96	UA**			
YT	-21	113	2.44	0.11	UA**	2.9	0.04	S*
	21+	137	3.01	0.52	FA*			
L	Urban	143	3.12	1.01	FA*	1.6	1.88	NS**
	Rural	107	2.91	0.09	UA**			
EQ	FD	92	2.78	0.17	UA**	2.6	0.01	S*
	HD	158	3.43	1.21	FA*			

Significant at .05 level, *Not Significant at 0.05 level; G= Gender; YT= Years of Teaching Experience; L= Location; EQ= Educational Qualification; FD= First Degree; HD= Higher Degree; M= Male; F= Female; N= Number of Subjects; S.D = Standard Deviation; FA*= Favourable Attitude; UA**= Unfavourable Attitude; Dec= Decision; PV= P-value; RK= Remark.

2.5.2. Answering Research Question 2 and Testing H₀₁

From Table 2, it is indicated that the cluster mean value of male health educators (3.22) is above the cut-off point of 3.00 while their female counterpart indicated (2.70) which is below the cut-off point. This implies that the male health educators have favourable attitudes towards teaching profession in tertiary institutions of Southeast Nigeria while the females indicated unfavourable attitude.

Data in Table 2 also revealed that H₀₁ is accepted since the P-value of 2.15 is greater than 0.05 level of significance. That is to say that, there is no statistically significant difference between the attitude of male and female health educators towards teaching profession in tertiary institutions of Southeast Nigeria.

2.5.3. Answering Research Question 3 and Testing H₀₂

Available data in Table 2 showed that the attitude of health educators towards teaching profession in tertiary institutions in Southeast Nigeria varies with respect to years of teaching experience. As contained in Table 2, the health educators with less than 21 years teaching experience had cluster mean value (2.44<3.00), while those having above 21 years teaching experience showed (3.01>3.00). This signifies that the attitude of health educators having less than 21 years teaching experience is unfavourable while those having above 21 years teaching experience are favourable towards teaching profession in tertiary institutions of Southeast Nigeria.

From Table 2, it is shown that H₀₂ is rejected since the P-value of 0.04 is less than 0.05 level of significance. That is to say that, there is statistically significant difference on the attitude of health educators having less than 21 years and above 21 years teaching experience towards teaching profession in tertiary institutions of Southeast Nigeria.

2.5.4. Answering Research Question 4 and Testing H₀₃

From Table 2, it is found that there is a difference between the attitude of urban and rural health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria. The Table revealed the cluster mean value of health educators in urban (3.12>3.00) and rural (2.91<3.00) location in relation to attitude towards teaching profession. Thus, the attitude of health educators in urban location is favourable while the attitude of those in rural areas is unfavourable towards teaching profession in tertiary institutions of Southeast Nigeria.

From Table 2, it is found that H_0_3 had the P-value of 1.88 which is greater than 0.05 level of significance indicating acceptance. That is to say that, there is no statistically significant difference between the attitude of urban and rural health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.

2.5.5. Answering Research Question 5 and Testing H_0_4

From Table 2, it is observed that there is difference between the attitude of health educators having first degree and higher degree qualification towards teaching profession in tertiary institutions of Southeast Nigeria. The Table revealed the cluster mean value of health educators with first degree ($2.78 < 3.00$) and higher degree ($3.43 > 3.00$) in relation to attitude towards teaching profession. Thus, the attitude of health educators having first degree qualification is unfavourable while the attitude those having higher degree qualification are favourable towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.

As contained in the Table 2, it is found that H_0_4 had P-value 0.01 which is less than 0.05 level of significance implying rejection. That is to say that, there is statistically significant difference on the attitude of health educators having first degree and higher degree qualification towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.

3. Discussion

The findings of this study revealed that the attitude of health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria is favourable. The expected finding could be attributed to the specialized training, programme and prospects available to health educators for their professional development in the area of health education. It may also be due to the fact that health educators are highly satisfied with their profession or that they understand that the future of the individual and nation lies in their abilities, and attitudinal dispositions towards their roles as teaching professionals. The finding of this study is not corroborated with the finding of the study done by Banerjee, Srijita and Behera [13], Dabdas and Santosh [2]. These studies reported that the attitude of both secondary school teachers and college teachers is neither more favourable nor unfavourable towards the teaching profession.

The present study indicates that the attitude of male health educators is favourable while the attitude of their female counterpart is unfavourable. This finding was surprising since the female health educators are supposed to exhibit favourable attitude more than their male counterparts towards teaching profession due to their domestic and gender roles in the society. The finding of the study was not in agreement with other studies done by Banerjee, Srijita and Behera [13], Dabdas and Santosh [2]. They reported that the attitude of female teachers is more favourable than their male counterparts towards teaching profession. Statistically, it is found that there is no significant difference between the attitude of male and female health educators towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria. The expected finding was in line with the previous study

done by Zayapragassarazan, and Pughazhendi [14], which showed that there was no significant difference between male and female student-teachers' perceptions of the teaching practice programme. The present study was not in accordance with the studies done by Barwal [11], Dabdas and Santosh [2]. The results of their studies revealed that significant differences exist between the attitude of male and female teachers towards the teaching profession.

The study further shows that the attitude of health educators having less than 21 years teaching experience is unfavourable while those having above 21 years teaching experience is favourable towards teaching profession in tertiary institutions of Southeast Nigeria. This finding is not surprising since experience might have contributed immensely to the development of desired, positive and favourable attitude of the subjects to their profession. Thus, the more experienced teachers become they exhibit more favourable attitudes. It is also found that there is statistically significant difference on the attitude of health educators having less than 21 years and above 21 years of teaching experience towards their roles as teaching professionals in tertiary institutions in Southeast Nigeria. The finding of the present study contradicts the results of the study done by Dabdas and Santosh [2] which revealed that there is no significant difference between the attitude of less than 5 years and above than 5 years teaching experience teachers towards teaching profession.

It is revealed in the study that the attitude of health educators in urban location is favourable, while the attitude of those in rural areas is unfavourable towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria. The expected finding could be attributed to other available prospects in urban location which might have added positively to the professional development of health educators in the area. Statistically, there is no significant difference between the attitude of urban and rural health educators towards teaching profession in tertiary institutions of Southeast Nigeria. The finding of the present study is in accordance with the study done by Dabdas and Santosh [2] which revealed that there is no significant difference between the attitude of rural and urban college teachers towards the teaching profession. In addition, the present study was not in corroboration with the finding of Barwal [11] which showed significant difference in the attitude of rural and urban secondary school teachers towards the teaching profession.

The present study further indicates that the attitude of health educators having first degree qualification is less favourable than those having higher degree qualification. The result of the study was expected and encouraging. This could be due to the fact that the higher degree health educators must have gained advanced knowledge and experience that have guided their attitude and understanding towards teaching profession. Statistically, there is significant difference in the attitude of health educators having first degree and higher degree qualification towards their roles as teaching professionals in tertiary institutions of Southeast Nigeria.

4. Conclusion

This paper in its modest and humble efforts has attempted to awaken the consciousness of health educators

by establishing their attitude towards their roles as teaching professionals in tertiary institutions of southeast Nigeria. The favourable attitude exhibited by the health educators in the present study is an indication that all the training, programmes and prospects put in place for their professional development is satisfactorily serving its purposes. However, more hands should be on desk in formulating enhancement strategies for sustenance of favourable attitude in achieving the goal of health education as a discipline and education at large.

5. Educational Implications

1. This study is very crucial in that it revealed the attitude of both male and female health educators towards their roles as teaching professionals. Thus, efforts should be geared towards developing favourable attitudes towards teaching profession among female health educators.
2. This study revealed the attitude of both urban and rural health educators towards their roles as teaching professionals. Thus, efforts should be geared towards developing favourable attitude towards their roles as teaching professionals among rural health educators.
3. The present study is very significant in that it revealed the attitude of both less than 21 years and above 21 years teaching experience health educators towards their roles as teaching professionals. Thus, efforts should be geared towards developing favourable attitude towards teaching profession among less than 21 years teaching experience health educators.
4. This study revealed the attitude of both first degree and higher degree female health educators towards their roles as teaching professionals. Thus, special efforts should be directed towards developing favourable attitude towards teaching profession among first degree health educators.
5. The study is a humble and modest attempt in this direction to determine the attitude of health educators towards their roles as teaching professionals.
6. The present study will no doubt, contribute immensely to the professional development of teachers in general and health educators in particular.

6. Suggestions for Further Studies

1. Similar studies should be conducted using other variables such as religious affiliation, age, and marital status for empirical documentation and generalization of findings in research.
2. It is also important to conduct similar study in different tertiary institutions outside of using the same category of subjects.

3. Further studies could be conducted to find out the rationale behind the unfavourable attitude towards teaching profession as exhibited among female, rural, less than 21 years teaching experience and first degree using a similar population and group.

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Nil

Competing Interest

The authors have no competing interests.

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