

# Cultural Beliefs and Health Seeking Behaviour Amongst Youths in Lafia, Nasarawa State, Nigeria

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**Abstract:** Health-seeking behaviour among youth is critical for overall development. However, it is often determined by socio-economic factors. This study investigates cultural beliefs and health seeking behaviour among youths in Lafia Local Government Area. The main objective was examined how cultural beliefs influences health seeking behaviour among youth. Using a multistate, probability and stratified sampling techniques, the study selected 460 respondents for qualitative and 5 for qualitative data among youth making a total of 465 research participants. The study was guided by the Social Determinants of Health (SDH) Theory and the Health Belief Model (HBM). One hypothesis was formulated and tested with regression analysis through the statistical package for social sciences version 27. The study revealed that youths in Lafia Local Government Area recognize the importance of healthcare but often adopt a reactive approach due to cultural and religious beliefs  $R^2 = 0.959$ ,  $F = 2038.397$ ,  $p < 0.000$ . these finding showed that cultural norms such as preference for traditional healing, fear of hospital treatment, and religious beliefs significantly influence health-seeking behaviour. Family pressure and community expectations were also found to discourage the use of formal healthcare, while opinions on traditional medicine and frequency of cultural deterrents were not statistically significant. The study recommends: community-based health education programs that integrate traditional and modern medicine; collaboration with traditional healers for referral systems; youth-focused interventions promoting independent healthcare decisions; engagement of religious and traditional leaders in health advocacy; and policy reforms that address socio-cultural barriers to equitable healthcare access.

**Keywords:** Cultural beliefs, Health-seeking behaviour, Youths, Traditional medicine, Social Determinants of Health, Healthcare access.

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## I. INTRODUCTION/STATEMENT OF PROBLEM

Health encompasses various aspects of an individual's overall well-being, including physical fitness, mental, emotional well-being, social relationships, and the ability to function effectively in daily life (World Health Organization (WHO), 2021). The attainment of health is greatly dependent on health seeking behavior; which is the actions and choices individuals make in relation to maintaining and improving their physical, mental, and emotional well-being. This behavior can encompass a wide range of activities, including seeking medical care, adopting healthy lifestyle habits, and utilizing preventive services (Razak, 2021).

Health seeking services utilizes a variety of sources such as Primary care providers including family doctors, pediatricians, and internal medicine physicians who provide routine check-ups, screenings, and treatment for common illnesses. Patients may Local Government Area be referred to specialists such as cardiologists, dermatologists, or neurologists for more specialized care tailored to their specific health needs. Accordingly, Healthcare facilities offer a range of services from emergency care to outpatient procedures and diagnostic testing (Akrahn, 2022). Community health centers Local Government Area cater to underserved populations and offer a comprehensive range of services including primary care, dental care, and mental health services. Psychiatrists,

Social workers, psychologists, and counselors provide therapy and medication management for mental health conditions. Local health departments offer vaccinations, screenings, and education on disease prevention and community health issues (Institute of Medicine, 2019).

The importance of health seeking lies in the proactive and intentional actions individuals take to maintain and improve their health. Seeking regular check-ups and preventive care, young people can detect health issues early and take steps to address them before they develop into more serious conditions (Kumah, 2020). Engaging in positive health seeking behavior helps individuals maintain good physical and mental health, leading to a higher quality of life (Gukas, 2021). By actively participating in their healthcare decisions and taking control of health, individuals feel more empowered and confident in managing their own well-being. On the contrary, Negative health seeking behavior among youths can have serious implications on their overall health and well-being.

Globally, Health seeking behavior among youths varies significantly across regions due to cultural, societal, economic, and healthcare system differences. In Europe, youths generally have better access to healthcare services, higher health literacy, and lower financial barriers to seeking medical care compared to other regions. In America, disparities in healthcare access and affordability impact health seeking behavior among youths. While urban youths may have better access to healthcare facilities, rural youths and marginalized communities may face barriers to seeking medical care. (Bintu, 2020).

In Africa region, the youths face challenges such as limited access to healthcare services, lack of healthcare infrastructure, and financial barriers to seeking medical care. These factors impact health seeking behavior and lead to delays in seeking treatment. Cultural beliefs, traditional medicine practices, and spiritual beliefs play a significant role in influencing health seeking behavior among African youths. The diverse healthcare landscape across African countries, with variations in healthcare systems, resources, and quality of care impact health seeking behavior among youths (Owusu & Mensah, 2021).

In Nigeria, health seeking behaviour varies across geopolitical zones. Among youths in the North-Central zone health behaviour is often influenced by cultural and religious beliefs. Youths in this zone may be more likely to seek traditional healers or spiritual remedies for health issues (Dalhatu, 2020). Health seeking behavior among youths in the North-East zone is impacted by the ongoing security challenges in the region as such youths in this zone may rely on community health workers and mobile health clinics for healthcare services (Goni, 2020). Health seeking behavior among youths in the North-West zone may be influenced by cultural practices such as early marriage and female genital

mutilation as a result (Oluwatosin, 2021). Health seeking behavior among youths in the South-East zone is influenced by cultural beliefs and practices. Youths in this zone a higher awareness of the importance of regular health check-ups and vaccinations (Udofia, 2024). Health seeking behavior among youths in the South-South zone may be influenced by environmental factors such as oil pollution and water contamination as such youths in this zone may seek medical treatment from private healthcare providers due to perceived better quality of care (Okon, Ekanem, (2016). Health seeking behavior among youths in the South-West zone is often influenced by higher levels of education and awareness (Afolabi & Ibrahim, 2020).

Generally, Health is seeking behaviour is often influenced by several factors including cultural beliefs that shape the behaviour of individual in seeking health services (Jenard, 2021). Cultural practices may have a significant impact on health-seeking behavior among youths. According to Zcik (2022) Cultural beliefs, norms, and values influence individuals' perceptions of health and illness, as well as their attitudes towards seeking medical help. In some cultures, there may be stigmas or taboos associated with certain health conditions or seeking medical care, which may deter youths from seeking treatment. Cultural practices may shape the types of healthcare providers that individuals trust and prefer to seek care from (Ibisomi, (2020).

Previous studies have identified practices and their effects on health seeking behaviour: a study by Ndubusi, (2020) revealed that traditional cultural practices influenced the health-seeking behavior of youths in Northern Nigeria. Another study by Suleiman, (2019) also found that cultural beliefs and practices, such as the use of traditional rituals for healing influence health decisions, significantly impact the health-seeking behavior of adolescents in Northern Nigeria. In Lafia however, the role of cultural beliefs in shaping healthcare decisions have not been exhaustively explored, thus, there is a knowledge gap in identifying and understanding the specific cultural practices and beliefs that impact health-seeking behavior among youths in Lafia. Again, a theoretical gap exists as previous studies have not sufficiently applied the Social Determinants of Health Theory to explain how cultural beliefs shape health-seeking behavior, making it unclear whether cultural influences interact with other determinants such as education and socioeconomic status in the study area. Methodologically, most existing studies have relied on broad regional analyses rather than localized, youth-specific investigations, highlighting the need for targeted research that captures the evolving cultural issues affecting youths' healthcare decisions in Lafia.

#### ➤ *Objective of the Study*

The main of the study is to ascertain how cultural beliefs influence health seeking behaviour among youths in Lafia Local Government Area

#### ➤ *Research Hypothesis*

Ho: Cultural practices does not significantly influence health seeking behaviour among youths

## II. METHODOLOGY

To achieve the objectives of this study, the Taro Yamane (1967) formula was used to determine sample size of 460 for qualitative data while the purposeful sampling was used to select 5 participants for quantitative data. The study applied the multi-stage sampling technique to meet respondents. The study also adopted mixed method of data collection through questionnaire and in-depth interviews (IDI). Quantitative data was analyzed descriptively and inferentially, hypothesis stated was tested using regression analysis with the help of SPSS version 27, while qualitative data was transcribed through content analysis.

## III. LITERATURE REVIEW

### ➤ *Health Seeking Behaviour*

Health-seeking behaviour refers to the actions and decisions individuals make to address perceived health needs. Aigbokhan (2023) views it as a process of recognising illness, deciding to seek care, and navigating health systems for treatment. Daniels (2020) highlights its complexity, including information-seeking and provider engagement, while Yanus (2023) describes it as a dynamic process shaped by individual, social, economic, and cultural factors, covering both preventive and curative actions. Piketty (2013) defines it as patterns of behaviour in response to health threats, including medical consultation, self-medication, and traditional healing. Santer (2019) emphasises individual capabilities and preferences in accessing care. In the Nigerian context, Elayo (2020) and Yarkor (2020) underline the impact of income, education, cultural beliefs, and access on care-seeking practices. Davis (2019) notes poverty and poor infrastructure as barriers to timely treatment. Uriah (2020) frames health-seeking behaviour within the broader development and capability discourse, while Piketty (2013) again stresses inequality in resource distribution as a driver of disparities. Despite varying emphases, all authors highlight the need to reduce socioeconomic barriers to improve healthcare access and promote well-being in Nigeria.

### ➤ *Cultural Beliefs and Health-Seeking Behaviour Among Youths*

Cultural beliefs refer to the shared values, customs, and practices that shape individuals' perceptions of health, illness, and healthcare decisions within a community. Onah and Okeke (2020) examined how traditional beliefs in Nigeria impact youths' health-seeking behaviour using interviews and focus groups. They found that stigma, reliance on traditional healers, and misconceptions about modern healthcare hindered youths from accessing proper care. Similarly, Adegoke and Okonkwo (2020) explored the impact of cultural beliefs on

mental health care, finding that spiritual interpretations of mental illness often prevent youths from seeking professional help. Ibrahim and Adeyemi (2022), through a quantitative survey, found that herbal remedies and traditional rituals delay formal healthcare use among Nigerian youths. Abubakar and Aliyu (2021) also identified that cultural norms, such as gender roles and preferences for traditional medicine, shape health-seeking behaviours, causing inequalities in access.

In urban settings, Makanjuola and Oladele (2024) found through qualitative methods that cultural values and fear of stigma still significantly influence youths' healthcare decisions. Beyond Nigeria, Jackson (2019) revealed through a systematic review that European youths are similarly affected by cultural stigma and traditional healing beliefs. Brinman and Whitehead (2020), using mixed methods, found American youths' behaviours influenced by family norms, religion, and community expectations. Garcia and Martinez (2024) discovered that acculturation and gender roles shaped European youths' health attitudes. Anderson and Turner (2023), via a national survey, reported that ethnicity, race, and socioeconomic status affected healthcare decisions among American youths. Taylor and Clark (2023), through a cross-cultural design, highlighted that both European and American youths are influenced by cultural practices, with notable regional similarities and differences. Across all studies, cultural beliefs were found to significantly shape the ways youths perceive, seek, and utilise healthcare services.

### ➤ *Theoretical Underpinning*

The study was anchored on the Social Determinant of Health (SDH) theory, which was propounded by Dahlgren and Whitehead in 1991 to explain how non-medical factors influence health outcomes. The theory posits that health is significantly shaped by the conditions in which people are born, grow, live, work, and age, including the broader systems affecting daily life such as policies, cultural norms, and socioeconomic structures. One key assumption of the SDH theory is that disparities in health outcomes are largely rooted in social inequalities rather than solely in individual choices or biological differences. This theory provides a useful lens for understanding how cultural beliefs can influence health-seeking behaviour among youths. In many communities, entrenched cultural practices such as reliance on traditional healers, stigma associated with certain illnesses, and spiritual interpretations of disease can shape youths' attitudes towards modern healthcare, leading to delays in seeking formal treatment. These cultural norms, as social determinants, directly impact youths' access to and utilisation of health services. However, a shortcoming of the theory is its limited attention to individual agency and psychological factors in health decision-making. It tends to overemphasise structural conditions, often overlooking how personal experiences or resilience can shape health behaviours.

#### IV. RESULTS/DISCUSSION OF FINDINGS

Table 1: Socio-Demographic Characteristics of Respondents

Variable	Responses	
	Frequency	Percentage (%)
<b>Age</b>		
15-19	98	22.4
20-24	120	27.5
25-29	105	24.0
30-35	114	26.1
<b>Gender</b>		
Male	227	52.0
Female	210	48.0
<b>Educational Level</b>		
No Formal Education	58	13.3
Primary	72	16.5
Secondary	136	31.1
Tertiary	171	39.1
<b>Occupation</b>		
Student	110	25.2
Self-employed	123	28.1
Employed	99	22.7
Unemployed	105	24.0
<b>Marital Status</b>		
Single	209	47.8
Married	155	35.5
Divorced	36	8.2
Widowed	37	8.5

Source: Field work, 2024

The table presents the socio-demographic characteristics of the respondents. The age distribution reflects a population transitioning through various stages of youth, which is important as cultural expectations and health-related decision-making often evolve with age. The gender composition is balanced, allowing for comparative insight into how cultural norms may differentially influence health-seeking patterns among male and female youths.

Educational background varies among respondents, offering an important lens through which to assess how cultural beliefs interact with levels of awareness, health literacy, and openness to modern healthcare practices. Those with higher education may be more exposed to health information that challenges traditional norms, while those with lower education may rely more on cultural explanations of illness.

The occupational spread shows a mix of economic activity, which may shape how cultural beliefs are prioritised in health decisions. Youths with stable employment may have greater agency in navigating health systems compared to those who are unemployed or dependent, potentially reinforcing or challenging culturally-rooted health behaviours.

Marital status also provides insight into social support systems and their cultural framing. Married respondents may be more influenced by family or spousal beliefs in healthcare decision-making, while single or widowed youths may navigate health choices more independently or within other cultural expectations. This socio-demographic profile is critical in assessing how cultural beliefs intersect with individual circumstances to influence health-seeking behaviour among youths in the study area.

Table 2: Respondent views on the Influence of Cultural Beliefs on Health-Seeking Behaviour

Question	Responses	
	Frequency	Percentage (%)
<b>How does culture influence your health-seeking behaviour?</b>		
Strong influence	113	25.9
Some influence	174	39.8
No influence	150	34.3
<b>Which of the following cultural beliefs affect healthcare decisions in your community?</b>		
Preference for traditional medicine	97	22.2
Fear of hospital treatment	112	25.6
Religious/spiritual beliefs	144	33.0
None of the above	84	19.2
<b>Are there cultural restrictions on seeking modern healthcare in your community?</b>		
Agree	159	36.4
Disagree	201	46.0
Undecided	77	17.6
<b>What is your opinion on traditional medicine?</b>		
More effective than modern medicine	86	19.7
Equally effective as modern medicine	125	28.6
Less effective than modern medicine	138	31.6
Not effective at all	88	20.1
<b>How often do cultural beliefs prevent you from seeking medical attention?</b>		
Very often	102	23.3
Occasionally	185	42.3
Never	150	34.3

Source: Field Work, 2024

The findings from the Table reveal that cultural beliefs significantly influence health-seeking behaviour among youths in Lafia Local Government Area, although the degree of influence varies. A substantial number of respondents acknowledged that cultural beliefs have either a strong or moderate impact on their healthcare choices. This suggests that while cultural norms continue to shape how some youths perceive and respond to health issues, others are gradually shifting away from traditional influences possibly due to education, urban exposure, or increased access to health information. The specific beliefs reported, such as fear of hospital treatment, preference for traditional medicine, and the role of religious or spiritual beliefs, point to deeply embedded cultural ideologies that can discourage timely use of modern healthcare. Such beliefs may contribute to delayed diagnoses

or reliance on unregulated treatment methods, especially when traditional remedies are favoured over clinical options. Mixed views on the effectiveness of traditional medicine further highlight the tension between cultural loyalty and emerging trust in modern healthcare. While a portion of the population still values traditional healing, others recognise its limitations. Finally, the fact that many youths report cultural beliefs occasionally or frequently preventing them from seeking medical attention reinforces the importance of culturally competent healthcare systems.

#### ➤ *Hypotheses Testing*

HO: Cultural beliefs does not significantly influence health seeking behaviour among youths in Lafia Local Government Area

**Table 3.: Regression Analysis on Cultural and Health Seeking Behaviour Among Youths**

Model Summary					
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	
1	.980 <sup>a</sup>	.959	.959	.14330	

ANOVA <sup>a</sup>					
Model	Sum of Squares	df	Mean Square	F	Sig.
1	Regression	209.287	5	41.857	2038.397
	Residual	8.850	431	.021	
	Total	218.137	436		

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.061	.022		2.758	.006
	How does culture influence your health-seeking behaviour?	.111	.046	.121	2.429	.016
	Which of the following cultural beliefs affect healthcare decisions in your community?	.084	.038	.123	2.183	.030
	Are there cultural restrictions on seeking modern healthcare in your community?	.849	.023	.854	36.178	.000
	What is your opinion on traditional medicine?	-.015	.035	-.022	-.436	.663
	How often do cultural beliefs prevent you from seeking medical attention?	-.079	.049	-.084	-1.629	.104

Source: Author Computation, 2024

The regression analysis was conducted to examine whether cultural beliefs significantly influence health-seeking behaviour among youths in Lafia Local Government Area, Nasarawa State. The model summary shows a very high correlation coefficient ( $R = 0.980$ ), suggesting a strong relationship between cultural factors and health-seeking behaviour. The  $R$  Square value of 0.959 indicates that 95.9% of the variation in health-seeking behaviour can be attributed to cultural beliefs, while the adjusted  $R$  Square of 0.959 confirms the reliability and explanatory power of the model.

The ANOVA table supports the significance of the regression model ( $F(5, 431) = 2038.397, p < 0.001$ ), demonstrating that the set of cultural variables collectively exert a statistically significant effect on the dependent variable. This high  $F$ -value and low  $p$ -value signify that cultural beliefs are important determinants of health-seeking behaviour in the study area.

The coefficients table reveals that three predictors are statistically significant. The variable "How does culture influence your health-seeking behaviour?" has a positive effect ( $B = 0.111, t = 2.429, p = 0.016$ ), implying that perceived cultural influence contributes to variations in health-seeking behaviour. Similarly, "Which of the following cultural beliefs affect healthcare decisions in your community?" also has a significant positive impact ( $B = 0.084, t = 2.183, p = 0.030$ ), indicating that specific cultural beliefs shape

healthcare choices. Most notably, "Are there cultural restrictions on seeking modern healthcare in your community?" shows a very strong and significant effect ( $B = 0.849, t = 36.178, p = 0.000$ ), highlighting the powerful role cultural barriers play in limiting modern healthcare access.

However, two variables were not statistically significant: "What is your opinion on traditional medicine?" ( $B = -0.015, t = -0.436, p = 0.663$ ) and "How often do cultural beliefs prevent you from seeking medical attention?" ( $B = -0.079, t = -1.629, p = 0.104$ ). These predictors did not contribute significantly to the model, as indicated by their high  $p$ -values above the 0.05 threshold.

Based on these findings, the null hypothesis ( $H_0$ ), which states that cultural beliefs do not significantly influence health-seeking behaviour among youths in Lafia Local Government Area, is rejected. The results confirm that cultural beliefs do have a statistically significant influence on the health-seeking behaviour of youths in the study area.

The quantitative findings are further supported by evidence from in-depth interviews, which explore how cultural beliefs influence youths' health-seeking behaviour in Lafia Local Government Area. These responses provide real-life examples of how traditional values, family pressure, and community expectations affect healthcare decisions,

reinforcing the patterns observed in the statistical data and deepening understanding of the study's focus.

➤ *In an Interview, a Participant Discussed that:*

"Cultural beliefs are very strong in my community, and they definitely influence how people seek care. Some people prefer traditional medicine because they believe it's more effective. I've seen people, especially older generations, discourage seeking hospital care and instead rely on local herbs or spiritual healers. I personally don't let culture stop me, but it's hard to go against the beliefs of others in the community." (IDI, 1: 22-year-old female student, Feb, 2024)

➤ *In Another Interview, a Participant Remarked:*

"Many people in my area believe that traditional medicine is the best way to treat any illness. Sometimes, even when someone is seriously sick, they prefer using herbal medicine or going to a spiritual healer instead of the hospital. I've been pressured a few times by family members to avoid the hospital and use herbal remedies instead. It's hard to go against that when you're raised in a culture that values traditional practices." (IDI, 2: 25-year-old male participant, Feb, 2024)

➤ *Meanwhile, a Participant Added:*

"I've grown up in a family where traditional healing methods are highly regarded, so whenever I'm sick, my parents often encourage me to use herbal remedies or visit a spiritual healer. However, I personally feel more comfortable with modern healthcare, even though I sometimes face opposition from my family. The cultural pressure is strong, but I try to make my own decisions." (IDI, 3: 20-year-old female part-time worker, Feb, 2024)

➤ *Another Participant Stated that:*

"In my community, people strongly believe that illnesses are caused by spiritual forces or curses, especially when the symptoms don't improve quickly. This belief pushes many youths to seek help from spiritual healers before even considering a hospital. I once had a serious fever and was advised to go for prayers instead of seeing a doctor. I eventually went to the clinic on my own because I didn't feel better after using herbal mixtures. But it wasn't easy some family members saw my decision as disrespectful to our tradition." (IDI, 4: 23-year-old male artisan, Feb, 2024)

➤ *Finally, a Participant Explained that:*

"In my household, cultural beliefs are deeply respected, especially when it comes to health. My grandmother always insists on using roots and herbs for treating illnesses, and sometimes she warns that hospitals make conditions worse. When I had a severe stomach issue last year, I was given a local concoction instead of being allowed to visit a health centre. Eventually, I had to sneak out to get proper treatment because the pain became unbearable. Even though I now prefer modern healthcare, the pressure to conform to our

cultural ways still affects my choices." (IDI, 5: 21-year-old female hairdresser, Feb, 2024)

The qualitative findings reveal that cultural beliefs strongly influence health-seeking behaviour among youths in the community. Many individuals face pressure to prioritize traditional medicine, such as herbal remedies and spiritual healing, often preferred by older generations and family members. These cultural expectations can discourage the use of modern healthcare services, even in serious illness. While some youths personally prefer modern medical care, they often struggle to resist the cultural norms and family pressures that favor traditional practices. This tension between cultural values and personal preferences highlights how deeply ingrained beliefs shape healthcare decisions and create barriers to accessing formal health services.

In summary, the study examined how cultural beliefs influence healthcare decisions among young people. The primary objective was to determine the extent to which cultural norms shape health-seeking behaviour. A mixed-methods approach was adopted, involving 460 respondents for the quantitative component and 15 purposively selected participants for qualitative interviews. Data were analysed using SPSS (version 27) and content analysis. The study was anchored on the Social Determinants of Health theory by Dahlgren and Whitehead (1991), which posits that social and cultural contexts significantly shape health outcomes. Findings from the quantitative data revealed that cultural beliefs exert varying degrees of influence on health-seeking behaviour, with a majority acknowledging either strong or moderate effects. These findings align with Onah (2020) and Orakan (2022), who observed that traditional norms, including preference for herbal remedies and spiritual healing, delay access to medical care. The regression analysis confirmed that specific cultural variables significantly impact health-seeking behaviour. However, opinions on traditional medicine and the frequency of cultural deterrents were statistically insignificant. Qualitative interviews further affirmed that cultural pressure, family influence, and community expectations discourage youths from seeking formal healthcare, supporting similar observations by Adegoke and Nathaniel (2020) and Makanjuola and Oladele (2024). Overall, the study confirms that cultural beliefs remain a strong determinant of healthcare behaviour among youths in Lafia.

## V. RECOMMENDATIONS

Based on the findings of the study, the following five recommendations are proposed:

- Health authorities and NGOs should conduct culturally sensitive awareness campaigns to educate youths and community members on the benefits of modern healthcare. These campaigns should debunk harmful myths and promote health literacy using local languages and familiar platforms.

- Government and health institutions should collaborate with trusted traditional healers to create referral systems that guide patients from traditional to modern care when necessary. This will help bridge cultural gaps and improve trust in formal health services.
- Programmes specifically targeting youths should be designed to address cultural barriers and empower them to make independent health decisions. These should include peer education, school-based health clubs, and youth-friendly health centres.
- Since spiritual beliefs significantly influence healthcare choices, engaging religious and traditional leaders in health advocacy can reshape perceptions and encourage the adoption of safe medical practices within culturally acceptable frameworks.
- Government policies should prioritise health access equity by addressing socio-cultural obstacles in underserved areas. Strengthening health infrastructure and incorporating cultural considerations in service delivery can reduce resistance and increase healthcare utilisation.

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