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RESEARCH ARTICLE

Breaking Barriers: How Indigenous Language Health Information Sources Shape Gen-Z's Fight against Type 2 Diabetes

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ABSTRACT

The study examined the impact of indigenous language health information sources in enhancing the knowledge, attitude, and precautionary measures adopted by the Generation Z in Ogun State, Nigeria, concerning Type 2 Diabetes. It investigated how indigenous appropriate communication influences the perception and management of diabetes. A quantitative survey method was used to administer questionnaires to 400 university students using a multistage random sampling technique. and linear regression for analysis. A comparison of indigenous language sources and mainstream sources showed that the former contributed much to understanding indigenous people explaining a variation of 41% on average. Findings also highlighted that knowledge variance ranges from 2%: to 10% while knowledge flow affects the results in communication at about 5%. of attitude variance: Age = 16%; gender = 8%; Marital status = 19%. Minimally, a 1% variance was observed in preventive practices knowledge. Thus, Indigenous languages play a positive role in one's perception and attitudes but have a limited bearing on behaviour. Following the analysis, the authors assert that promoting awareness of diabetes in young Indigenous people requires health communication in Indigenous languages. It suggests that public health agencies use indigenous language media in campaigns so as to enhance coverage and prevention, especially in multicultural societies.

INTRODUCTION

Knowledge and communication are necessities of life especially for the purpose of making decisions in the areas of health and fitness (Adesina et al., 2021). The type of information that is obtainable has a direct impact on decision-making and the higher the concentration of the information, the better the result (Chatterjee, 2022). Specifically, it is possible to point at the choices associated with one's health and lifestyle as being most important, as they impact well-being at both short-term and long-term horizons. This makes the issue of health communication central to disseminating breath health facts and enabling individuals / societies make sound decisions (Kreps, 2003). It promotes a common ground of understanding of the health care challenges among the practitioners, policy makers, patients as well as the society, so that the health information gets to the right target group (Vermund et al., 2017).

It has also been observed that one of the best ways of communicating with the diverse groups of people, especially in Nigeria is through use of local languages. The indigenous languages can help to fill the barriers in comprehension especially for the people who may not understand the health communicating medium that is in the global languages such as English. For instance, in the COVID-19 pandemic the use of local languages in Heath Communication was crucial in dissemination of information on the correct measures that needed to be taken and contain the outbreak (Oxman, 2022). It is also useful for dealing with NCDs including diabetes since; awareness & information on these diseases can go a long way in handling them (Adesina et al., 2020).

However, in the developing countries, condition such as diabetes are not well understood. Some people consider them as diseases that affect only the affluent segment of the population or put down to spiritual forces hence patients presented with these diseases end up neglecting to seek treatment (Yawson et al., 2016; Boutayeb & Boutayeb, 2005). As a result of using the indigenous languages as a means of communication, misconceptions that may be existing in the community can easily be addressed hence helping the community understand the importance of environmental conservation.

These diseases are caused by life style factors including diet, physical activity and substance abuse (Haregu et al., 2016). Diabetes is an example of NCDs and is characterized by the imperfection of insulin production or utilization hence has severe complications (World Health Organization, 2020). Worldwide, there were 422 million people with diabetes in 2021 and stocks, diabetes increases in all-income levels (World Health Organization, 2022). Sub-Saharan Africa particularly has 24 million people with diabetes among the population of the adults aged between 20 to 79 years (International Diabetes Federation, 2021, 2022). So also in Nigeria, the incidence of diabetes has also rise due to growth and urbanization, poor diets and aging.

However, people remain ignorant with various perceptions such as only the elder people and people with excess weight can be affected by diabetes (Lal, 2016). This is especially the case with the current generation, the Gen Z's, because they are viewed as potentially having an increased chance of developing diabetes through adopting unhealthy diets and having reduced levels of activity (Dineshwori, 2022). Although, the Gen Z have been seen to practice physical activities, they have been seen to take high amounts of fast foods and little or no fruits and vegetables and hence are vulnerable (Food Standards Agency, 2019).

For this reason, health communication in indigenous languages plays the role of countering this situation. It makes health information on the prevention, and control of diabetes are impactful, relevant, and relevant among the youth.

Diabetes mellitus is now a worldwide concern with estimates showing that up to 70% of all newly diagnosed cases since 2000 and ranks among the top ten leading causes of mortality as per WHO (2020) report. At the moment, 537 million people between 20 and 79 years are living with diabetes, with more cases, particularly in the developing world such as Africa where 44 million adults are affected (International Diabetes Federation, 2021; World Health Organization, 2022). Diabetes information in Nigeria began in 1961, approximately 5 million people are affected, and two-thirds of them are unknown (Diabetes Association of Nigeria, 2013; Uloko, 2018), A disease whose causative factors include poor nutrition, sedentary lifestyle, and aging (Wu et al., 2014), is expected to rise by 134% in Africa in 2030 (Uloko, 2018).

One of the main concerns here is the lack of awareness, seen in the general population, about Type 2 Diabetes. Knowledge is enhanced primarily after experiences or interactions with the affected families (Yun et al., 2015; Khan et al., 2008). This lack of knowledge is associated with ineffective information search (Alaofè et al., 2021), including health communication in indigenous languages. Literature from Vietnam and Nigeria show low awareness and poor attitude towards the disease (Le et al., 2017; Effiong, 2020). There is however lack of information on the involvement of indigenous languages in diabetes education in Nigeria. Thus, the purpose of this study is to understand how the level of knowledge and practice of diabetes type 2 among the indigenous Generation Z influences the information-seeking behaviour of the population.

Research hypotheses

Ho1: There is no statistically significant link between information sources and gen-z knowledge about Type 2 Diabetes.

Ho2: There is no statistically significant link between information sources and gen-z attitude towards Type 2 Diabetes.

Ho3: There is no statistically significant link between information sources and gen-z preventive practices towards Type 2 Diabetes.

METHODOLOGY

A quantitative method of survey was employed. The survey was used in investigating the information seeking behaviours of gen-z towards Type 2 Diabetes; determining the preferred information sources of gen-z towards Type 2 Diabetes; assessing gen-z knowledge of Type 2 Diabetes; examining gen-z attitude towards Type 2 Diabetes and exploring gen-z preventive practices towards Type 2 Diabetes. The population for this study includes university students in Ogun State, Nigeria. The justification for this choice of university students is because universities have the highest concentration of young adults falling within the appropriate age range of gen-z. For this study, 384 respondents were selected from the sample drawn from 2 out of the 7 private universities in Ogun state. The justification for this sample size was derived according to the formula by Fishers et al. 's (1983).

That is $n = (z^2p\ q)/d^2$

where,

n= Minimum sample size required.

p= the proportion of the subjects in the target population estimated to have the characteristics being investigated

z = Z- score from the standard nominal tables. Zα (α is the significance level and is always put at 0.05 in social science) => Z0.05=> usually a standard of 1.96. q=1-p

d=maximum tolerable error in the study and in social science is 0.05

Where,

$n = z^2p\ q$

d^2

z=1.96

q= (1-0.5)

d=0.05

Therefore, the sample size was = (1.96)2*0.5*(1-0.5) (0.05)2 =3.8416*0.5*0.5

0.0025 =384 students.

The vast population of Ogun state was restricted to a manageable size for this cross-sectional study utilising a multistage sampling technique. Alvi (2016), Multistage sampling is most successful when a target population is distributed across a large geographical region and is diverse. Multistage sampling can be a difficult kind of cluster sampling (or clusters) because it requires dividing the population into groups (Sedgwick, 2015). Then, at random, one or more clusters are picked, and everyone within that cluster is sampled.

In the first stage of selection, the simple random technique was used in selecting from either federal, state or private universities in Ogun state. Private universities were selected.

At the second stage, the simple random technique was utilised in selecting two private universities in Ogun state out of the 7 existing private universities in Ogun state Babcock University and Bells Institute of Technology were selected.

Then the third stage involved the usage of simple random technique in selecting one college/faculty each from the two universities. The School of Computing and Engineering Sciences was selected in Babcock University and the College of Natural and Applied Sciences was selected in Bells Institute of Technology.

At the fourth stage of selection, the simple random technique was used in selecting one department each from the colleges making it a total of 2 departments. The Department of Computer Science was selected in Babcock University and the Department of Marine Biology was selected in Bells Institute of Technology.

At the last stage, the departments were stratified into levels using simple random technique. The 100 and 400 level Computer Science students were selected from Babcock university and the 200 and 400 level Marine Biology students were selected from Bells Institute of Technology.

Demography characteristics of respondents

Table 1: Demographic profiles

	Bells University	**Babcock University**	**Total**
Gender			
Male	84 (21.4)	61 (15.2)	145 (36.2)
Female	154 (38.5)	101 (25.2)	255 (63.8)
Total	**238 (59.5)**	**162 (40.5)**	**400 (100)**
Age			
16-19	146 (36.5)	77 (19.2)	223 (55.8)
20-24	92 (23.0)	97 (19.8)	171 (42.8)
25-28	0 (0.0)	6 (1.5)	6 (1.5)
Total	**238 (59.5)**	**162 (40.5)**	**400 (100)**
Religion			
Christianity	186 (46.5)	136 (34.0)	322 (80.5)
Islam	49 (12.2)	25 (6.2)	74 (18.5)
Traditionalist	3 (0.8)	1 (0.2)	4 (1.0)
Total	**238 (59.5)**	**162 (40.5)**	**400 (100)**

Table1 shows the crosstabulation of respondents from the two selected universities (Bells University of Technology and Babcock University in Ogun State, Southwest, Nigeria). The gender distribution of respondents shows that out of 400 respondents that participated in the study, 145(36.2%) were male while 255(63.8%) were female students. This implies that most of the students that participated in the study were female. The age distribution also depicts that 55.8% of the students were within the age bracket of 16-19 years, 42.8% were within the age group of 20-24 and 1.5% were within the age group of 25-28. Most of the students that participated in the study were within the age group of 15-19. Table1 also shows the religious affiliation of students from the two selected universities. 80.5% of the students were Christians, 18.5% were Muslims and 1.0% were Traditionalists. The crosstabulation percentage of each university according to age, gender, and religious affiliation is depicted in Table1.

Table 2: Information seeking behavior towards type 2 diabetes

	Percentage
Do you seek information on Type 2 Diabetes?	
Yes	84.5
No	25.5
Total	100.0
How frequently do you seek information on Type 2 Diabetes?	
Very Often	29.8
Often	53.4
Rarely	12.8
Never	4.0
Total	100.0

What is the predominant print medium channel you use to get information about Type 2 Diabetes?	
Newspapers	54.8
Magazine	24.4
Posters	20.8
Total	100.0
What is the predominant broadcast medium channel you use to get information about Type 2 Diabetes?	
Television	14.0
Radio	86.0
Total	100.0
What predominant online platforms do you use to get information about Type 2 Diabetes?	
Websites	30.0
Social Media	70.0
Total	100.0
How often do you read/watch/hear about Type 2 Diabetes?	
Very often	24.8
Often	46.2
Occasionally	23.5
Not Sure	5.5
Total	100.0

The information-seeking behaviour of students from two Universities in Ogun State Nigeria on Type 2 Diabetes is summarised in Table 2. After reviewing the results of the study, 84 was the average number of hours that patients were admitted in the hospital. Another 5% of respondents were found to have gone out seeking information about diabetes while 15%. 4% did not. Respondents mostly often used the media to acquire information on diabetes with only 12% rarely or never seeking such information. 8% of them doing it occasionally while 4% never seeking information.

Regarding the media utilized, newspapers were the most common print media (54. 8%) followed by magazine (11.7%) while as for the broadcast media, radio stood at 86% and television at 14%. Namely, social media are the most dominant type of the online platform, which has been reported by 70 percent of the participants. Additionally, 46. A total of 2% of patients often exposed themselves to diabetes-related information in different media. The analysis reveals that radio, social media and newspaper are the preferred media through which information on health can be passed to Gen-Z in Nigeria. This is due to its ability to harness local languages and simple formats which therefore has the ability to pass on the information to the intended audiences including illiterate people. This might be the reason why social media is easily admired because through a single click one is able to gather so much information from the available social media platforms.

H_{01}: There is no significant relationship between indigenous language information sources and the knowledge of Gen-Z towards Type 2 Diabetes

The research model that represents the relationship between information sources and knowledge of Gen-Z towards Type 2 Diabetes was tested using linear regression. The influence of indigenous language information sources on knowledge of Gen-Z towards Type 2 Diabetes was determined using coefficients, t-values, R-square values, F-values, and p-values. The path coefficient value, R-square values, F-value, and p-values used to interpret the hypothesis are shown in Table 2.

Table 2: Indigenous language information sources and knowledge of gen-Z towards type 2 diabetes.

Coefficients									
Model	**Unstandardised Coefficients**		**Standardised Coefficients**	**t**	**Sig.**				
	B	**Std. Error**	**Beta**			**R^2**	**AR^2**	**F**	**ANOVA (Sig.)**
(Constant)	2.026	.182		11.122	.000	0.415	0.412	148.178	.000
FBC	.520	.043	.644	12.173	.000				

Dependent Variable: **Knowledge of Gen-Z towards Type 2 Diabetes** Predictor: **Information Sources**

Table 2 describes the results for the analysis testing Hypothesis 1, the impact of indigenous language information sources on Gen-Z's awareness of Type 2 Diabetes. The coefficient of determination, also known as R-squared, is equal to 0. undefined Thus, using indigenous language sources accounts for 5% of the variations in knowledge. The adjusted R-squared value of 0. 412 indicates that according to the model, the estimated number of shows is forty one. undefined undefined P <0. 05 indicates that the proposed model has a fit and supports the notion that the knowledge of Gen-Z ed populations is influenced by indigenous languages with 178.

The analysis of the questionnaires also revealed a positive linear correlation between the indigenous information sources and the level of knowledge, equal to 0. Each change in information source yielded a 644 unit increment in the quantity of their knowledge. The t-test results (t=12. 173, p<0. 05) also affirm this, proving the significance of indigenous languages to Gen-Z's comprehension of Type 2 Diabetes.Further, the comparison between the role of indigenous language media and Gen-Z's attitude towards Type 2 Diabetes utilized similar linear regression models, and the results are presented in the table below: Table 3

Table 3: Indigenous language information sources and attitude of gen-Z towards type 2 diabetes.

Coefficients									
Model	**Unstandardised Coefficients**		**Standardised Coefficients**	**t**	**Sig.**				
	B	**Std. Error**	**Beta**			**R^2**	**AR^2**	**F**	**ANOVA (Sig.)**
(Constant)	2.521	.335		7.529	.000	0.112	0.108	26.486	.000
FBC	.397	.077	.335	5.146	.000				
Dependent Variable: **Attitude of Gen-Z towards Type 2 Diabetes** Predictor: **Information Sources**									

Table 3 shows the linear regression results of hypothesis two which tested the influence of indigenous language information sources on the attitude of Gen-Z towards Type 2 Diabetes. From the linear regression results, the R-squared value was 0.122, which signifies that the 12.2% variance of the attitude of Gen-Z towards Type 2 Diabetes can be explained by indigenous language information sources. Also, as indicated in the model, the adjusted R-squared value was 0.108; this implies that the prediction of indigenous language information sources on the attitude of Gen-Z towards Type 2 Diabetes accounts for 10.8% less variance. This indicates that indigenous language information sources explain 10.8% of variations in the attitude of Gen-Z towards Type 2 Diabetes.

The variance test is required to determine whether the model will significantly fit in the prediction of the outcome when the mean is used. The F-value has a considerable impact on the ratio of forecast improvement due to model fitting vs model inaccuracy. According to the F-ratio, which was 26.486 and significant at (p0.05), the indigenous language information sources are significant in explaining variations in Gen-Z's attitude toward Type 2 Diabetes. The approach enhanced the ability to predict the impact of indigenous language information sources on Gen-Z's attitude toward Type 2 Diabetes.

The model also displays an estimate of the values for the hypothesis being tested. The value describes the connection between indigenous language information sources and Gen-Z attitudes about Type 2 Diabetes. The findings show that there is a positive relationship between the predictor and the result. According to the model, when all predictors (Gen-Z attitude towards Type 2 Diabetes) are held constant at zero, the information sources will be at 2.521. A change in information sources will boost Gen-Z's attitude towards Type 2 Diabetes by 0.335 units. This implies that the source of indigenous language information can positively impact the attitude of a Gen-Z aged individual towards Type 2 Diabetes.

The t-test was performed to examine whether the predictor variable contributed significantly to the model. When the t-test associated with the -values is significant, the predictor contributes meaningfully to the model. The greater the contribution of the predictor, the smaller the significance value (the larger the t-value). As a result, indigenous language information sources (t=5.146, p<0.05)

constitute a significant predictor of Gen-Z attitude about Type 2 Diabetes. This suggests that the indigenous language source of information has a statistically significant impact on respondents' attitudes towards Type 2 Diabetes.

H_{03}: There is no significant relationship between indigenous language information sources and the preventive practices of gen-z towards Type 2 Diabetes

The research model represents the relationship between indigenous language information sources and preventive practice of Gen-Z towards Type 2 Diabetes and was tested using linear regression. The influence of indigenous language information sources on the preventive. Practices of Gen-Z towards Type 2 Diabetes were determined using coefficients, t-values, R-square values, F-values, and p-values as shown in Table 4.

Table 4: Indigenous language information sources and preventive practices of gen-z towards type 2 diabetes.

Coefficients									
Model	**Unstandardised Coefficients**		**Standardised Coefficients**	**t**	**Sig.**				
	B	**Std. Error**	**Beta**			**R^2**	**AR^2**	**F**	**ANOVA (Sig.)**
(Constant)	1.960	.332		5.902	.000	0.195	0.191	50.680	.000
FBC	.547	.077	.442	7.119	.000				
Dependent Variable: **Preventive Practices of Gen-Z towards Type 2 Diabetes** Predictor: **Information Sources**									

Table 4 shows the linear regression results of hypothesis three which tested the indigenous language influence of information sources on the preventive practices of Gen-Z towards Type 2 Diabetes. From the linear regression results, the R-squared value was 0.195, which signifies that the 19.5% variance of preventive practices of Gen-Z towards Type 2 Diabetes can be explained by indigenous language information sources. Also, as indicated in the model, the adjusted R-squared value was 0.191; this implies that the prediction of indigenous language information sources on preventive practices of Gen-Z towards Type 2 Diabetes accounts for 19.1% less variance. This indicates that indigenous language information sources explain 19.1% of variations in the preventive practices of Gen-Z towards Type 2 Diabetes.

The variance test is required to determine whether the model will significantly fit in the prediction of the outcome when the mean is used. The F-value has a considerable impact on the ratio of forecast improvement due to model fitting vs model inaccuracy. According to the F-ratio, which was 50.680 and significant at (p0.05), the indigenous language information sources are significant in explaining variations in Gen-Z's preventive practices for Type 2 Diabetes. The approach enhanced the ability to predict the impact of indigenous language information sources on Gen-Z's preventive practices for Type 2 Diabetes.

The model also displays an estimate of the values for the hypothesis being tested. The value describes the connection between indigenous language information sources and Gen-Z preventive practices towards Type 2 Diabetes. The findings show that there is a positive relationship between the predictor and the result. According to the model, when all predictors (Gen-Z preventive practices towards Type 2 Diabetes) are held constant at zero, the information sources will be at 1.960. A change in indigenous language information sources will enhance Gen-Z's preventive practices regarding Type 2 Diabetes by 0.442 units. This implies that the indigenous language sources of information can positively impact the preventive practices of a Gen-Z aged individual towards Type 2 Diabetes.

The t-test was performed to examine whether the predictor variable contributed significantly to the model. When the t-test associated with the -values is significant, the predictor contributes meaningfully to the model. The greater the contribution of the predictor, the smaller the significance value (the larger the t-value). As a result, indigenous language information sources ($t=7.119$, $p<0.05$) constitute a significant predictor of Gen-Z preventive practices about Type 2 Diabetes. This shows

that the source of information has a statistically significant effect on respondents' preventive practices for Type 2 Diabetes.

DISCUSSION OF FINDINGS

The implications of this study offer important information on the ways indigenous language information sources shape Gen-Z understanding, perception, and preventive behavior about Type 2 Diabetes in Ogun State, Nigeria. This research is unique as the existing literature review revealed that there is limited research done on indigenous language health information and the behaviour practice of the young generation in the context of NCDs including Type 2 Diabetes.

The findings show indigenous languages for information influence Gen-Z's information on type 2 diabetes, accounting for a 41. all of them to have between 2% variance in their knowledge. This is consistent with Kuske et al., (2017) position that adequate information-seeking behaviour especially in regard to language that is understandable by the audience is vital to increase the knowledge of health conditions. It is easier to comprehend health information provided in people's native language since such persons might not fully understand or engage in global or colonial languages such as English.

Vermund Et al (2017) pointed out that on this issue all the stakeholders have a similar view holding that health communication is more effective in taking with the cultural and linguistic endowment of the targeted population. In the same manner, the study made by Adesina et al. (2020) echoes the current observation which advocates for language comprehensibility in the understanding of health information. The divergence, however, can be seen in such work as Le et al. (2017) where newspaper and magazine sources were employed without paying much attention to Indigenous languages, therefore the knowledge levels remained low among the low-income populace in Vietnam. This contrast shows the advantages of using indigenous language information sources in Nigeria, which has been described as diverse culturally and linguistically.

The findings also support Chatterjee's (2022) argument that the more knowledge one has the better he could be in decision-making. Information that is in Indigenous languages becomes very important in the initial stages of awareness and understanding; thus, providing Gen-Z people with the necessary tools to make the right decisions related to their health. This further emphasises the importance of health communication theories like Kreps (2003), which points out that for any health communication intervention, there must be an emphasis on the health message that entails a culturally and linguistically appropriate component that will enhance the health of the targeted population. The concept of indigenous language here elongates the notion of language to a tool that enhances the process of teaching and learning and makes it more effective. Similar findings were reported by Le et al. (2017) in Vietnam, showing that younger populations in developing countries exhibit lower levels of awareness about Type 2 Diabetes.

The study also revealed that indigenous people's language information materials constituted a 10. 8% variance in Gen-Z's attitudes toward Type 2 Diabetes This impact is somewhat lesser compared to the first impact mentioned, namely, knowledge acquisition but it is still significant. This way, indigenous languages contribute to the modification of their attitudes as the disease is personified to eliminate the impression that it is a disease for the rich or a disease that affects only elderly people, as suggested by Yawson et al. (2016) and Lal (2016).

The indigenous language acts as a cultural mediator that elicits a more favourable attitude towards change towards healthier behaviours. This aligns well with Boles et al. (2014), which showed that media campaigns intending to encourage the reduction of sugar intake influenced the masses when aligned with familiar and reliable mediums. For the Nigerian Gen-Z from rural or semi-urban areas where English may not be the first language of communication, it acts as this 'trusted platform'. This paper shows that making cultural relevance of language promotes favourable changes in attitudes by disguising diabetic prevention messages in a cultural form of their everyday lives.

Nevertheless, the relatively low influence on attitudes compared with the effects on knowledge may imply that although people have a clear perception of the risks and causes of Type 2 Diabetes, it is difficult to modify fundamental beliefs and attitudes solely with information. It may entail repetition

of the same message, support from analogies of peers or community inhabitants, and integration of cultural champions who may demystify the disease.

The most significant finding from this study was that indigenous language information sources explained a 19.1% variance in Gen-Z's preventive practices toward Type 2 Diabetes. This demonstrates the powerful role that Indigenous languages play not just in transferring knowledge, but also in influencing behavioural change. The alignment of this finding with Nozha & Elshatarat (2022), who argue that individuals who use accessible health information are more likely to adopt preventive health practices, is notable.

Indigenous language sources ensure that information on diabetes prevention—such as dietary habits, physical activity, and regular medical check-ups is understood and integrated into everyday practices. This convergence of findings highlights the importance of culturally sensitive health information delivery, as emphasized by Alaofè et al. (2021), who found that culturally tailored interventions in Southern Benin were more effective in promoting healthier lifestyles than generic campaigns.

However, while indigenous language helps in shaping preventive practices, the 19.1% variance suggests that other factors also play a role, including socioeconomic status, access to healthcare, and existing health beliefs. This finding diverges somewhat from studies like Effiong (2020), where knowledge was closely linked to preventive practices, suggesting that in the context of Gen-Z in Nigeria, understanding the disease might not always directly translate to taking preventive actions. In some Nigerian communities, diabetes is often misunderstood, with myths about spiritual causes affecting health-seeking behaviours. Therefore, using indigenous language can help address these cultural barriers.

The study's findings align with other research on culturally appropriate health communication for enhancing health literacy and knowledge or practices as underscored by **Adesina et al. (2020), Subraiman et al. (2022). Such studies reason that information through indigenous language, popular media such as radio, or any other local medium, establishes an environment that makes health information comprehensible. The difference is the degree to which these sources shape the behavioural changes as known from the study of Effiong (2020) where though people possess a good amount of knowledge on preventive health behaviours other factors like social and economic factors may deter them from adopting such behaviours.

CONCLUSION

This paper concludes that cultural beliefs play a very crucial role in the prevention of diabetes in Nigeria. The knowledge or assumption of the disease is more of a myth or spirit when it comes to diabetes, especially in rural areas. In the same regard, many people believe that diabetes is more or less a disease that targets the well-endowed or senior citizens, and as such, they are likely to underestimate the crucial early signs of the disease. This level of awareness has hampered early health-seeking behaviours. Their first decision is normally to seek the help of traditional healers, followed by a visit to a doctor. Another problem can be addressed through indigenous language-based communication because it helps in the understanding of diabetes prevention messages. According to various research, utilisation of local languages in efforts to pass on health information has enhanced knowledge and attitudes to diabetes. For instance, translating these insights into practice that would create long-term preventive behavioral change is always difficult. There is a need for more local dialect education in high-risk groups primarily in the reduction of public myths and promotion of a proper and healthy lifestyle that includes better and more frequent physical activities most of which can only be effectuated effectively among the youth.

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