Full Length Research

Academic Self-Concept, Mental Health and Academic Engagement of In-School Adolescents in North Central, Nigeria

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This study examined the state of wellness as well as the relationships that exist among academic self-concept, mental health and academic engagement of in-school adolescents in north central Nigeria. A sample of 300 respondents was drawn through accidental sampling procedure from 3 states namely Kogi, Nasarawa and Plateau. 100 respondents were drawn from 4 secondary schools in each of the states. The instrument used for data collection was named Academic self-concept, mental health and academic engagement questionnaire (ASMAEQ). ASMAEQ was personally designed by the researcher from the literature reviewed. ASMAEQ had 3 sections that reflected the 3 variables examined. Each of the variables had 18 items making a total of 54, and it was a likert type questionnaire. The instrument was administered with the aid of research assistants from schools in each of the three states used for the study. The data collected were analyzed using mean, standard deviation and Pearson Product Moment Correlation statistics. The findings of the study included that the academic self-concept and academic engagement of in-school adolescents were low and poor but that mental health was good and positive and that academic self-concept and mental health positively correlated very highly to academic engagement. Based on these findings, suggestions that could improve in-school adolescents self-concept were put forward to include among others, that, parents and teachers respect adolescents' ideas, identify and recognize their strengths and weaknesses, encourage them on self-praise and help them to set realistic and achievable goals.

Keywords: Adolescents, Academic self-concept, mental health, academic engagement, North Central Nigeria

INTRODUCTION

Self-concept or academic self-concept, like self-esteem and self-efficacy is a psychological concept or construct that is instrumental to, and consequential in describing and understanding human behaviors including the behaviors of students in institutions of learning. Academic self-concept that is referred to how well an individual feels he/she can learn (Education, 2023) cannot be strictly divorced from the entire concept of self. If the self-concept of a student is affected, academic self-concept for such student is likely also to be affected. The prefix "self" makes "self' the engine that drives the entire vehicle that is called behavior. Self-concept as understood by Cornell (2023) is a set of beliefs that one has about oneself and who one is; it is one's own definition and image of oneself. In a related definition, Study.com (2023) saw self-concept as one's perception about one's behaviors, abilities and unique characteristics. It is the knowledge that people have to feel good about themselves and their abilities (Education, 2023). Adding a dimension to the definitions

above is that the judgment of others about one's ability and capability is another significant factor that determines the judgment of one's self about one's self. And so the definition of self-concept is extended notably to mean the ideas that one has formed about oneself that springs from one's beliefs and the responses of others. For instance, Cornell (2023) noted that one's concept of one's self comes from internal self narratives but that it is also impacted by what other people tell the individual about who the individual is. It is the who that an individual thinks he/she is, the pictures that the individual may have formed about him/herself added to the pictures that others have about the individual. It is therefore important to stress here that two people are significantly important to understanding the concept of self, they are, one's self and others. Self-concept is therefore a critical component of identity development in developmental psychology because it defines the identity of an individual (PsychCentral, 2022).

Self-concept as a construct is comprehensive and elaborate. It involves everything about a person, from the person's moral structure, everyday behaviors to the person's recreational talents and political beliefs (PsychCentral, 2022). In addition, Self-concept can primarily be positive or negative and could predispose an individual to certain thoughts or behaviors (PsychCentral, 2022). The three parts of self-concept as put forth by Carl Rogers are: the ideal self (ones vision and ambitions of who one wants to be), the real self or self image (how one currently sees and perceives oneself, and the self-esteem which is how much worth and value one beliefs one has (PsychCentral, 2022). Self-concept can also, either be congruent or incongruent. When there is a healthy and proper alignment between the ideal self and the real self, self-concept will be congruent and it will ultimately lead to a healthy development of self-esteem. But when self-concept is incongruent, the development of self-esteem will be negative and negative self-esteem and or concept could be held liable for negative or wrong behaviors that people put up.

The formation of self is gradual and progressive, but more pronounced at the stage of adolescence. The adolescence period is therefore critical and crucial to self-concept   formation. The psychosocial theory of personality development by Erik H. Erikson identified eight (8) stages of the development of the personality of an individual. The goals in each of the stages to be achieved are all important to the development of self-concept. Between ages 12 and 18 that correspond to the age of adolescence, the goal to achieve is that of "identity versus role confusion" (Omede & Odiba, 2001). In between these ages, the adolescent is expected to assert his/her own identity and ably define his/her roles in the society. He/she should be able to provide answer to the question of "who am I?" And being able to do this will show that the individual has healthy self-concept. But the inability of an individual at this stage to assert his/her identity will result in role confusion. And a close relationship and observations with today's adolescents reveal undoubtedly that many of them have difficulties defining their identity. Many of them seemed to have gone amok by the way they behave and dress. Behaviors, dress patterns and   conducts are largely determined and approved by the people's culture. But close observations reveal that among many adolescents who are in schools (referred to in this study as in-school adolescents) are visible signs and evidences of confusing lifestyles as some of them dress like ragamuffins using tattered, torn and transparent dresses (dresses that reveal their nudities), wearing dreadlocks and looking as ruffians and more like the mentally deranged than normal human beings. Some male adolescents braid their hairs, keep unkempt and embarrassing beards or goatees, wear some bracelets and earrings and looking more feminine than masculine. Some of these in-school adolescents seemed confused about what life really is as some have become abusers of drugs and substances, engage in illicit and unprotected sex, having inordinate ambition for making money thereby engaging in stealing and armed robbery, ritual killings and sacrifices, internet fraud, kidnapping and cultism to actualize this obnoxious ambitions of theirs. In addition, many had dropped out of schools due largely to unwanted pregnancies, examination fraud as well as fronting for politicians as thugs before, during and after elections. Adolescents with well defined and positive self-concept are less likely to engage in these litanies of unwanted behaviors that are self injurious and destructive. Therefore, looking at the prevalence of wickedness in many communities in Nigeria today, this study seeks to examine the level or state of academic self-concept of in-school adolescents in relation to their mental health and how these two variables also relate to academic engagement. This is on the assumption that when academic self-efficacy and mental health are positive and healthy, the adolescents are likely to actively engage in learning that is also likely to reduce increasing cases of indiscipline and delinquent behaviors that are being witnessed today in schools and societies.

Mental health according to the World Health Organization (WHO) cited by Machaud and Fombonne (2005) and Jacob (2014) refers to a state of well-being, whereby individuals recognize their abilities, are able to cope with the normal stress of life, work productively and fruitfully and make a contribution to their communities. From this definition, one can say without reservation that mental health is the foundation for the well-being and effective functioning of an individual as well as the society. Mental health balance is needed to overcome challenges (Ochogwu, 2023). Mental well-being, balance or health is a function of many variables that include but not limited to one's sleep pattern, exercise, coping skills, nature of the home, school and community, media influence, violence as well as one's ability to manage emotions (WHO, 2021). But there are prevalent cases of mental health problems. For instance, Ochogwu (2023) raised concern over report that about 970 million people are struggling with mental health problems worldwide and that 284 million people are contending with anxiety. And as noted by Adamu in Ochogwu (2023), 40.3 percent of people die worldwide

because of mental health problems.

The mental health problems or disorders according to statistics are largely prominent among adolescents and teens of this generation and according to Machaud and Fombonne (2005) this incidence of mental health problems and disorders seemed to have increased considerably in the past 20-30 years. In fact, statistics had it that in Great Britain, the prevalent of mental health disorders among 11-15 year olds is estimated to be 11 percent with conduct problems more common among boys and depression and anxiety more common among girls (Machaud & Fombonne, 2005). Similarly, HHS.gov (undated) noted that even though many adolescents experience positive mental health, an estimated 49.5 percent of them have had a mental health disorder at some points in their lives. And 50 percent of all lifetime cases of mental illness according to Polaris Teen Center (2018) usually develop by age 14 years and 75 percent by age 24 year. Earlier, ACOG (2017) had noted that one half of all serious adult psychiatric disorders start by age 14 years. Globally, one in seven, 10-19 year olds, according to WHO (2021) experience a mental disorder accounting for 13 percent of the global burden of disease in this age group. Mental health problem should therefore be an issue of serious concern to education stakeholders for the building of a healthy nation.

Mental health disorders are put into these following categories: anxiety disorders, stress-related disorders, obsessive-compulsive disorders, eating disorders, and disruptive behavior disorders that may include attention-deficit/hyperactivity disorder or oppositional deviant disorder (ACOG, 2017; Polaris Teen Center, 2018; WHO, 221 & HHS.gov., undated) with their distinct signs and symptoms. Notable among these symptoms include: lack of interest in hobbies and recreational activities, Changes in grades at school, disinterest in friends, out of character irritability, avoidance of places where others will be, struggling to make and keep friends, new onset of guilt, changes in sleep, changes in energy level, changes in concentration or task completion, changes in appetite, changes in motivation and thoughts of suicide (Health and Wellness, 2022). It's important to stress here as noted by Machaud and Fombonne (2005) and HHS.gov (undated) that variations of mood and temporary deviant behaviors are part of the normal adolescent process. According to them, it is normal for adolescent young people to feel depressed from time to time and also experiment with drugs or delinquent behaviors as part of normal exploration of their identity but that such normal behaviors can be distinguished from more serious problems, by the duration, persistence and impact of the symptoms.

Mental disorders and mental health problems are on the rise and they are a global concern. Some of the causative factors are disruptions of family structures, growing youth unemployment, increasing educational and vocational pressures, exposure to adversity, peer pressure, media influence, violence (sexual and bullying), harsh parenting and severe socio-economic problems (Machaud & Fombonne, 2005 & WHO, 2021). These factors are bed fellows in many homes and communities of today as well as in educational institutions in this current Nigeria making the adolescents and teens and youths vulnerable to mental health problems such as depressions and anxieties as well as other deviant or delinquent behaviors. WHO (2021) noted that depression, anxiety and behavioral disorders are among the leading causes of illnesses and disabilities among adolescents. One therefore cannot wonder less looking at the family structures, and the heightened spate of violence, and insecurity and hunger or the general economic hardship in the land coupled with the addiction to the social media with its negative influence.

In-school adolescents will need to have sound mental health to live meaningfully in the society. The need sound mental health to as well engage meaningfully in academic activities and program in schools. Accordingly, HHS.gov (undated) opined that mental health disorders can interfere with regular activities and daily functioning of an individual such as relationships, school work, sleeping and eating. These notable activities are sacrosanct to academic engagement and could ultimately result to academic success.

Academic engagement as the name is called is the active involvement of students or learners in learning activities, contents and programs of the school. It refers to the ability of a learner to effectively utilize and maximize learning to advantage. With academic engagement, Goudih, Abdalla and Benragdha (2018) noted that one will be able to explain how much time a student spends on academic activities, homework, and school and class activities. Academic engagement is a multidimensional psychological construct that is comprehensive in explaining the behavior of learners in issues such as school dropouts, discipline, class participation, truancy, regularity and punctuality to school and classes, concentration and attention during classes, submission of assignments and home works on schedules and participation in extra or co-curricular activities such as games, labor, as well as school clubs and societies among others. Academic engagement will measure learners' participation and involvements in all of these learning activities to know whether they are high, low or moderate.

Academic engagement could be viewed from three distinct but related angles namely; affective, behavioral and cognitive (Ben-Eliyahu, Moore, Dorph & Schum, 2018). However, in this study, these three components are not separated but discussed lump some because they work in collaboration to promote active engagement in learning. When students engage actively in learning, there shall be a reflection of this engagement in their motivation to come to school and attend classes regularly and punctually, attentive to the teacher, listen and take-down notes, obey school rules and regulations, make useful decisions, initiate and engage in problem-solving, memorize and process learning reasonably and commendably as well as being able to relate classroom ideas to real life situations, embarking on

revision and self-initiated exercises and questions during personal studies.

Students that are actively engaged academically are less likely to engage in behavior problems such as drug or substance abuse, truancy, skipping of classes, lateness to school and late submission of assignments and home works as well as other risk-taking behaviors. Again, it is likely that school attendance will be regular, with the obvious overall improvement in academic success.

Academic engagement is principally the responsibility of the learner even though other variables such as the teacher, teaching method, family, school administrators, government, peers and the immediate environment and community where the school is located could be factored in. These other factors are relatively immaterial where the learner has a well developed academic self-concept and positive mental health. This therefore, is the crux of this study that seeks to "Examine the state of wellness as well as the relationships among Academic Self- Concept, Mental Health and Academic Engagement of in-school Adolescents in North Central, Nigeria". This is with the view to determining the levels of the wellness of in-school adolescents on these variables and to suggest accordingly on how to improve or sustain these variables in view of their relevance to improving the individual learner and the society in general.

Aim and Objectives of the Study

The aim of this study was to examine the state of wellness as well as the relationships among Academic Self-concept, Mental Health and Academic Engagement of in-school Adolescents in North Central, Nigeria. Specifically, the study examined the:

1. State of academic self-concept well-being of in-school adolescents in North Central, Nigeria
2. State of mental health of in-school adolescents in North Central, Nigeria
3. State of academic engagement of in-school adolescents in North Central Nigeria
4. The relationship between academic self-concept and mental health of in-school adolescents in North Central Nigeria
5. The relationship between academic self-concept and academic engagement of in-school adolescents in North Central Nigeria
6. The relationship between mental health and academic engagement of in-school adolescents in North Central Nigeria

Research Questions

1. What is the academic self-concept well-being mean score of in-school adolescents in North Central Nigeria?
2. What is the mental health mean score of in-school adolescents in North Central Nigeria?
3. What is the academic engagement mean score of in-school adolescents in North Central Nigeria?
4. What is the relationship between academic self-concept and mental health of in-school adolescents in North Central Nigeria?
5. What is the relationship between academic self-concept and academic engagement of in-school adolescents in North Central Nigeria?
6. What is the relationship between mental health and academic engagement mean scores of in-school adolescents in North Central Nigeria?

METHODS

This study was a descriptive survey. It sought, sampled and described the responses of respondents on the state of wellness as well as the relationships that exist among academic self-efficacy, mental health and academic engagement of in-school adolescents in north central, Nigeria. The population for the study was drawn from three states namely, Kogi, Nasarawa and Plateau in north central, Nigeria. 100 students were drawn through accidental sampling from each of the three named states making a total of 300 respondents. The 3 out of the 7 states in north central Nigeria, were however, obtained through simple random sampling procedure. One instrument named Academic Self-Concept, Mental Health and Academic Engagement Questionnaire (ASMAEQ) was designed by the researcher to obtain data on the three variables. The instruments had a total of 54 question items with each of the 3 variables having 18 items. The items on the instrument were obtained from literature reviewed. The instrument was face validated by two colleagues in the department and its administration was with the help of the research assistants located in each of the schools in the

states visited. That it is, in each of the schools, the help of one research assistant was sought and engaged. The collection of the instrument was instant. The instrument was on a five-point response scale of strongly agree, agree, undecided, disagree, strongly disagree. The statistical tools used for the analyses of data were mean, standard deviation and Pearson Product Moment Correlation. Research questions 1-3 were answered using mean and standard deviation while 4-6 were by the use of Pearson Product Moment Correlation. The decision rule was 3.0 for research questions 1-3. Any score of 3.0 and above was considered high and positive while below 3.0 was considered low and negative for items expressed positively, while reverse was the case for items worded negatively like in the case of mental health that was worded as mental health symptoms. To score low there that it is, obtaining a grand mean of less than 3.0, will be taking to be positive while above 3.0 will be negative. For research questions 4-6, a correlation coefficient of r = 0.5 and above is taking to be positive and high while below 0.5 is considered low even though positive.

Data Analyses and Results

The Analyses of the data collected were done according to the research questions asked thus:

Research Question 1: What is the Academic Self-concept well-being mean score of in-school adolescents in North Central Nigeria?

The answer to this question is reflected by the analyses on Table 1.

Table 1: Mean and standard deviation analysis of academic self-concept well-being of in-school adolescents in NCN

S/N	Item	$\bar{X}$	SD
1	I make friends with my classmates easily	2.8	0.91
2	I am accepted by my classmates	2.4	0.82
3	My teachers like me	2.6	0.90
4	I am open to criticism	2.0	0.82
5	When I am not praised, I feel pained	3.2	0.92
6	I am confident of my academic success	2.0	1.01
7	I solve some academic problems of my classmates	2.2	0.81
8	I am very confident that I will go beyond secondary school to the university	3.4	0.80
9	Low grades in tests and assignments makes me study harder	2.7	0.82
l0	I set academic goals for myself every term	2.4	0.97
11	I usually achieve the academic goals I set for myself by the end of every term	2.6	0.90
12	I find every subject in the curriculum useful for me	2.8	1.12
13	I prefer to be in business than being in school currently as a student	3.6	0.84
14	I Count everyday in school useful in building my future	2.3	0.92
15	I don't blame anybody for my actions and inactions in school	2.0	0.87
16	I don't see my mates who are doing better than me academically as a threat but a challenge	2.6	0.75
17	I am not afraid, I am not shy to ask and answer questions in the class	2.9	1.01
18	I know that I have a very bright future	2.3	0.75
	Grand mean and standard deviation	**2.6**	**0.89**

Source: Field survey, 2023; N = 300

The grand mean of 2.6 on Table 1 indicated that the in-school adolescents in north central Nigeria have low self-concept, the self-concept that is below the acceptable criterion mean of 3.0.

Research Question 2: What is the Mental Health mean score of in-school adolescents in North Central Nigeria?
The answer to this question is reflected by the analyses on Table 2.

Table 2: Mean and standard deviation analysis of the mental health of in-school adolescents in NCN

S/N	Item	$\bar{X}$	SD
19	I use to experience sleep disorder (I sleep too much or too little)	2.4	0.90
20	I isolate myself from my class and school mates and friends of late	2.6	0.78
21	I use drugs and other psychoactive substances to stay afloat in school	2.2	0.88
22	I yell always at my classmates	2.6	0.76
23	I see myself fighting my family and schoolmates	2.3	0.99
24	I usually hear strange voices without anybody physically speaking to me	1.6	0.69
25	I sometimes would want to harm myself	1.2	1.05
26	I frequently think of death and nurse suicidal ideas	1.8	0.78
27	I more frequently think of myself to be hopeless and helpless	1.5	0.82
28	Sometimes, I don't even see the need why I should go to school/classes	2.8	0.78
29	I use to more frequently feel restless, agitated and disorganized	3.5	0.91
30	I used to have pronounced anxiety	3.0	1.02
31	I see myself losing interest in what I used to enjoy as hobby	1.5	0,77
32	I see myself losing concentration in the class frequently	2.6	0.89
33	I worry excessively about everyday matter	2.5	0.78
34	I have severe feeling of self-consciousness	3.2	0.79
35	I feel persistently sad	2.2	0.86
36	I act irrationally more frequently without regard to consequences	3.5	0.91
Grand mean and standard deviation		**2.4**	**0.85**

Source: Field Survey, 2023; N = 300

The analyses on Table 2 indicated that the adolescents in this region have positive mental health. The grand mean of 2.4 even though is below the criterion mean of 3.0, is positive. This is because the items fielded on this table are expressed in the negative, they are mental health problems, signs and symptoms which the adolescents decline not having.

Research Question 3: What is the Academic Engagement mean score of in-school adolescents in North Central Nigeria?
The answer to this question is reflected by the analyses on Table 3.

Table 3: Mean and standard deviation analysis of academic engagement of in-school adolescents in NCN

S/N	Item	$\bar{X}$	SD
37	I listen and participate actively in class	2.9	0.88
38	I submit assignments promptly	3.2	0.82
39	I attend school regularly	2.4	0.76
40	I attend classes regularly	2.8	1.03
41	I ask questions in the class regularly	2.5	0.68
42	I don't disobey school rules and regulations	2.9	0.81
43	I go over subjects taught before the next class	2.6	0.80
44	I make notes for myself in addition to teachers' notes on topics taught	2.7	0.92
45	I relate what I learn in the class to real life situations for better understanding	2.6	0.79
46	I develop study questions myself	2.8	0.89
47	Teachers' feedbacks help me study better for future tasks	2.6	0.93
48	I sometimes memorize and recite difficult points in my notes	2.9	0.82
49	I participate actively in group studies	3.5	0.72
50	I use to buy relevant learning materials	2.5	0.80
51	I participate actively in games and other extra curricular school activities	3.6	0.85
52	I don't skip classes	2.8	0.80
53	There are some subjects that I don't give much attention to because of their difficulty levels	2.8	0.77
54	I belong to some clubs that promote academic work in the school	3.2	0.90
Grand mean and standard deviation		**2.8**	**0.83**

Source: Field Survey, 2023; N = 300

The data on Table 3 shows that the in-school adolescents in north central Nigeria do not engage well or actively in academics with the grand mean of 2.8 that is below the criterion mean of 3.0.

Research Question 4: What is the relationship between academic self-concept and mental health of in-school adolescents in North Central Nigeria?

Table 4 provided answer to this question

Table 4: Relationship between academic self-concept and mental health of in-school adolescents in NCN

Variables	Number of respondents	-X	SD	Pearson (r)	Decision
Academic self-concept	300	2.6	0.89	0.947	Highly positive
Mental health	300	2.4	0.85		

The analyses on Table 4 indicates that the r = 0.947 is positive and very high suggesting that academic self-concept relates very strongly to mental health of in-school adolescents in north central Nigeria.

Research question 5: What is the relationship between academic self-concept and academic engagement of in-school adolescents in North Central Nigeria?

Table 5 provided answer to this question

Table 5: Relationship between academic self-concept and academic engagement of in-school adolescents in NCN

Variables	Number of respondents	-X	SD	Pearson (r)	Decision
Academic self-concept	300	2.6	0.89	0.976	Highly positive
Academic engagement	300	2.8	0.83		

The relationship between academic self-concept and academic engagement of in-school adolescents in this region as shown on Table 5 is positive and very high with a coefficient value of r = 0.976.

Research question 6: What is the relationship between mental health and academic engagement mean scores of in-school adolescents in North Central Nigeria?

The analyses on Table 6 provided answer to this question

Table 4: Relationship between mental health and academic engagement of in-school adolescents in NCN

Variables	Number of respondents	-X	SD	Pearson (r)	Decision
Mental health	300	2.4	0.85	0.969	Highly positive
Academic engagement	300	2.8	0.83		

The relationship between mental health and academic engagement of in-school adolescents reflected on Table 6 is positive and very high. The r = 0.969 indicated a very high influence.

Summary of findings

1. Academic self-concept of in-school adolescents in north central Nigeria is low, it is a little below the defined average
2. Mental health of in-school adolescents in north central Nigeria is positive
3. Academic engagement of in-school adolescents in north central Nigeria is below the defined average
4. Academic self-concept has positive and high relationships with mental health and academic engagement
5. Mental health has high positive relationship with academic engagement

Discussion of findings

This study investigated the state of academic self-efficacy, mental health and academic engagement of in-school adolescents in north central Nigeria. In doing this, the study raised six (6) objectives with six (6) corresponding research questions. Research questions 1-3 sought information on the state of wellness of academic self-concept, mental health and academic engagement. The data on Tables 1-3 provided the required answers. From these tables it was discovered that adolescents' academic self-concept and academic engagement was low or negative but that their mental health was positive. The finding of this study that the in-school adolescents' self-concept was poor is in conformity with the findings of earlier studies and assertions by Zhu, Liu, Liu, Wei, and Chen (2016) that college day is the period that self-concept goes through fastest development and has the most problems. In fact, a close relationship with some of these in-school adolescents will reveal that they hardly accept criticisms but responsive to praise, lack self confidence and are also doubtful and uncertain about their future and these attributes as noted by Study,com (2023) are usually typical of people with negative self-concept. Self-concept is a critical component of identity development (PsychCentral, 2022) and as evidently seen in many in-school adolescents of this generation, looking at their behaviors, and attitude toward schooling and their inordinate ambitions for wealth, one can say with little reservation that they suffer identity crises or confusion. It is not also surprising that academic engagement was low and below the average score of 3.0 because self-concept or self-efficacy are said to impact positively on academic engagement (Perspectives in Teaching and Learning, 2023; & Azila-Gbethor, Mensah, Abiemo & Bokor, 2021).

Research questions 4-6 sought to know the relationships among academic self-concept, mental health and academic engagements . The findings were that academic self-concept had positive and very high relationships with both mental health and academic engagement and that mental health also had high and positive correlation with academic engagement. These findings are in agreements with the earlier findings of Springer Link (2021) that self-concept directly predicted academic achievement; Green, Liem, Martin, Colmar, Marsh & Mclnerney, (2012), that academic motivation and self-concept positively predicted attitude toward school and that attitudes toward school positively predicted class participation and homework completion negatively predicted absenteeism and also that class participation and homework completion positively predicted test performance. In fact, Busch, Claus and Siefen (2021) found self-concept to be a significant predictor for symptom levels of depression as well as anxiety with stronger associations in adolescents. According to them, positive attitude towards the self is linked to better mental health. In this current study, academic self-concept was low while mental health was high or positive. This is not to however disprove the findings that self-concepts correlates to mental health positively. In fact, the two variables correlated very highly positively. The likely reason for mean differences could be that the symptoms of mental health problems even though to some extent are available among the study population; they may not be too prevalent or pronounced to call for worry or concern due probably to the age of the population the study focused.

CONCLUSION

This study examined the state of wellness of academic self-concept, mental health and academic engagement of in-school adolescents in north central Nigeria. In addition, the study also correlated their academic self-concept, mental health and academic engagement. The study population was the in-school adolescents from three states in north central Nigeria. Data were collected with the aid of research assistants from the schools visited in each of the three states. Findings were that the in-school adolescents had poor academic self-concept, poor academic engagement and positive mental health. Academic self-concept, mental health and academic engagement highly positively correlated. But of these three, and from the literature reviewed, self-concept seemed to be the most determinant factor being the driver of the two other factors. If self-concept is largely positive, under normal conditions, mental health problems will reduce and academic engagement and the ultimate academic achievement will shore up.

RECOMMENDATIONS

Based on the findings of this study and the conclusion drawn about the relevance of self-concept in determining positive mental health and active academic engagement, recommendations centered on what stakeholders such as parents and teachers could do to build the self-concept of in-school adolescents thus:

1.   Parents and teachers are to respect adolescents' ideas. This is with the ultimate intention to build confidence, independence and self worth in them. Inability to do this will make them docile perpetually and lack in creativity and problem solving skills. Therefore, criticizing and condemning them out rightly even when they are wrong is wrong and should be avoided.
2.   Parents and teachers are to identify and recognize the strengths and weaknesses of the adolescents. Allowing

and encouraging them to grow along the line of their individuality should be what parents and teachers should encourage. With this therefore, it is advised that parents and teachers avoid comparing their adolescent children/students with others realizing that no two individuals, even identical twins are exactly the same.

3.   Parents and teachers are to encourage the adolescents to learn to self-praise. There is power in self-praise which every adolescent should be told to discover and utilize. Using their mouths to run themselves down and undermining their capabilities and strength should be discouraged.

4.   Parents and teachers are to promote individual responsibilities for actions and choices by telling them to always avoid blame games. Nobody is to be held responsible for their failures and inabilities but themselves. They should be told that "will is way" and that "determination leads to success." There is no mountain that a determined individual cannot climb.

5.   Parents and teachers are to help adolescents set realistic and achievable goals to avoid stress and frustrations. Stress and frustrations if prolonged could impact negatively on mental health, academic engagement and achievements.

6.   Parents and teachers are to create warm and comfortable home and or school as well as classroom environments for the adolescents to thrive. Physical, emotional, psychological and economically Secured environments provide the manure required for the total development of any individual child or adolescents. The school environment and home environment should be made at least, averagely comfortable to them.

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