

COMMUNITY EDUCATION STRATEGIES FOR THE CONTROL OF CONTAGIOUS DISEASES IN RIVERS STATE, NIGERIA

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ABSTRACT: *This study investigated community education strategies for the control of contagious diseases in Rivers State. The study adopted a descriptive survey design with a population size of 2,725 consisting of 25 experts in community education and 2,700 members of various Community-Based Organizations in four LGAs in Rivers State. A sample size of 370 respondents was drawn using proportionate stratified sampling technique. A questionnaire was used as the instrument for data collection. The instrument which was validated by three experts recorded a reliability coefficient of 0.86. The collected data were analysed using mean statistics and standard deviation. The analysed data revealed that the REFLECT, Each-One-Teach-One and the story telling are some of the community education strategies that could be used to create the needed awareness for attitudinal change on the control and management of contagious disease in Rivers State. Based on the findings, it was recommended among other things that The Federal and State Ministries of health should work hand in glove with the National Mass Education Commission and various state agencies of mass literacy to train health workers saddled with the responsibility of providing health education on how to adopt REFLECT and other community education strategies for awareness and knowledge creation for the control and management of contagious diseases in Nigeria.*

KEYWORDS: community education, strategies, contagious, diseases,

INTRODUCTION

The existence of diseases among humans is as old as the history of man. Diseases have lived as enemy to mankind for a very long time. The Webster dictionary defines a disease as an illness that affects a person, animal or plant: a condition that prevents the body or mind from working normally. There are hundreds and thousands of diseases that have existed through several ages, some brought about by the activities of man, his interaction with animals and some others from unknown sources. Diseases are generally categorized into contagious (communicable, infectious etc) and Non-contagious (non-communicable, non-infectious) diseases.

Contagious diseases according to the United State Department of Health and Human Services (2020) are diseases that can spread quickly from person to person through direct contact, (touching a person who has the infection), indirect contact, (touching a contaminated object) or droplet contact (inhaling droplets made when a person who has the infection coughs, sneezes or talks). Non- Contagious diseases on the other hand are diseases that are not transmissible directly from one person to another (WHO, 2015). Contagious diseases have over the years posed great

challenge to humans all over the world and have accounted for the death of millions of people globally. This is because of the highly infectious nature of this type of diseases which spread quickly from person to person through direct or indirect contact with an affected person. In Nigeria, Njidda, Oyebanji, Obasanya, Ojo, Adedeji, Mba, Oladejo and Ihekweazu (2018) noted that detecting and responding to contagious disease outbreaks has long presented a major public health challenge, given its size and complexity. Several contagious disease outbreaks have been reported in Nigeria in the past, including the Yellow Fever outbreak in 1986 and 1987 that affected 9,800 and 1,249 people, respectively. The large meningitis outbreak in 1996 with 109,580 cases and 11,717 deaths, cholera outbreaks in 2001 and 2004 and Avian Influenza (Bird Flu) in 2006 and 2007.

Most, recently, the World Health Organization (2016) reported 273 cases of Lassa Fever and 149 deaths in Rivers and other states in Nigeria between August 2015 and 17 May 2016, the meningitis outbreak in 2017 and the Ebola outbreak in 2014. The year 2020 presented a novel and deadly pandemic called Corona Virus also known as Covid-19 that has claimed millions of lives across the world. As at the 11th of September, 2020 Nigeria has recorded 55,829 cases of corona virus infections with 1,075 deaths and still counting. Similarly, in Rivers State, South-South, Nigeria, which is the area of this study, 2,197 confirmed cases of corona virus infections resulting to 58 deaths were recorded (NCDC, 2020). Rivers State was recorded as one of the states with highest number of confirmed cases.

It is no news that the health care system in Rivers State as in other states of Nigeria is ill-equipped and needs a complete overhaul. This accounts for why privileged Nigerians including political office holders and other government officials who have the means to afford such trips always travel abroad for medical care. There is a consensus among experts that Nigeria does not have the capacity in terms of medical facilities to deal with widespread pandemic and other infectious diseases. This accounts for why prevention and effective control measures to avoid escalation remains the best option.

One major strategy government and other stakeholders in the health sector have adopted in the control of infectious diseases is continuous education and sensitization of the public on the dangers of these diseases and measures to take to prevent them. Radio jingles, television programmes, seminars, workshops and other strategies have been adopted in sensitizing people both in rural and urban communities. Unfortunately, these strategies seem not to have yielded much result as most people especially in rural areas and suburbs in urban centres in Rivers State do not yield to the advice given by health experts in dealing with contagious diseases. This was evident in the case of Covid-19, where the Governor of Rivers State in his periodic state wide broadcasts on updates of government's response to the disease on the 5th of June, 2020, decried the in compliant attitude of the people to the Nigeria Centre for Disease Control's (NCDC) directive on the prevention of Corona Virus. Similarly, the chairman of the Presidential Taskforce on Covid-19 on the 9th of June complained of Nigerians poor compliant attitude towards directives given to prevent the virus. It is against this backdrop that the need for a change to a people centered strategy of education becomes necessary. Community education offers this change.

The Canadian Association for Community Education in Akande (2007) defined community education as a process whereby learning is used for individual, community and global betterment. It is characterized by involvement of people of all ages, use of community learning resources and research to bring about community change and recognition that people can learn through, with and from each other to create a better world. In the same vein, Havre Public Schools (2019) define community education as an opportunity for local citizens, agencies and institutions to become active partners in addressing education and community concerns. It embraces the belief that education is a lifelong process, everyone in the community shares a responsibility for the mission of educating all members of the community. This implies that community education emphasizes a people centred approach in learning with the intention of solving existing problems in the community. This view was shared by the Florida Atlantic University, College of Education (2020) when they asserted that through community education citizens can develop relationships and problem-solving skills to conquer the diverse challenges facing their society.

Community education adopts several strategies among which are the Each-One-Teach-One Strategy, Regenerated Freirean Literacy through Empowering Community Technique (REFLECT) and the Story Telling strategy. The original author of the each-one-teach-one phrase is unknown. However, it is an African-American expression thought to have been brought to the United States during slavery, when enslaved people were denied education, including the right to learn to read. Many if not most, enslaved people were kept in a state of ignorance about anything beyond their immediate circumstances, which were under control of owners, lawmakers and authorities. Teaching slaves to read was an act of civil disobedience, as it was illegal in many places in the United States. When an enslaved learned or was taught to read, it became his or her duty to teach someone else (Bradd, 2011). However, Adekola and Abanum (2011) claimed that the approach was popularized by Frank Laubach. This approach to facilitating literacy has enjoyed wide usage across various adult learning activities especially when the intention is to get information across a good number of people on a more personal basis.

REFLECT stands for Regenerated Freirean Literacy through Empowering Community Techniques. It is associated with the Brazilian educator Paulo Friere. This approach was developed to make up for the failures of past literacy approaches. It helps learners to engage in discussion of issues that affect their literacy economic, social, cultural, political and physical life with the intention of proffering solution to such issues. The facilitator here does not use any textbook but has a guide that helps him facilitate the discussion process. (UNESCO, 2014).

Storytelling dates back thousands of years. It helps learners visualize themselves in similar situations as the characters in the story and see the relevance of concepts. Stories help instructors reach learners of all skill levels because even challenging concepts and theories are easier to understand in story format (Kosa, 2008). In the story telling strategy the participants tell their stories about an experience that all or most group members have in common and/or experience. This opens ideas and new concepts to the rest of the group. It can be classified as a “high involvement participation level activity”. Story telling is the telling of a happening or connected series of happenings, whether true or fiction. Storytelling is as old as language itself. It encourages

participants to use their imagination and brings learners previous experiences to class and build a sense of community among learners. (Robert, 2000) These various strategies of community education have been used in carrying out learning for adults in various settings. This study, therefore examines how these strategies can be used for the control of contagious diseases in Rivers State.

Statement of the Problem

Health and wellness are major determinants of development among people in every society. A society that increases its capacity in catering for the health and wellness needs of its citizenry is often termed developed while those without this capacity is classified as underdeveloped. This is because people can only produce at optimal level when they are healthy. Unfortunately, diseases of various kinds have threatened the very existence of humans at various times in the history of mankind. Some of these diseases are categorized as contagious because they are transmitted easily from person to person and very deadly.

Rivers State as one of the thirty-six states in Nigeria has at some point in its history been threatened by deadly contagious diseases, from Yellow Fever, to meningitis, influenza and cholera among others and to the most recently, Corona Virus also known as Covid-19. As the 11th of September, 2020, Rivers State had recorded 2,197 confirmed cases of Covid-19 with 59 deaths. The government in a bid to contain the spread of the virus adopted various strategies including a total lockdown of the state. This as expected brought untold hardship to people and the state as a whole. It is believed that the spread would have been better managed if the Rivers people believed in the existence of the virus, understood and obeyed the directives given by World Health Organization, NCDC and the State Task Force on Covid-19. Most persons were not convinced that the virus existed or did not understand what they were told. Consequently, they disregarded relevant government directives, thus, confirmed cases were on the increase and the danger of community spread of Covid -19 was becoming a reality. To convince the people on the existence of the virus and retard community spread of the disease through adequate knowledge of how to manage it, education especially people oriented strategy of education like community education comes to the fore. This, study therefore investigated the use of unconventional strategies of community education in providing the needed educational information and knowledge for the control and management of the novel contagious disease of Covid-19.

Purpose of the Study

The purpose of this study was to examine community education strategies for the control of contagious diseases in Rivers State, Nigeria. Specifically, the study sought to:

1. Find out how the REFLECT strategy of community education enhances the control of contagious diseases in Rivers State.
2. Ascertain how Each-One-Teach-One (E-O-T-O) or Fund the Teaching of One (FTO) strategy of community education promotes knowledge on the control of contagious diseases in Rivers State.
3. Determine how the story telling strategy of community education enhances the control of contagious diseases in Rivers State.

Research Questions

1. How does the REFLECT strategy of community education enhance the control of contagious diseases in Rivers State?
2. How will Each-One-Teach-One (E-O-T-O) or Fund the Teaching of One (FTO) strategy of community education promote the knowledge on the control of contagious diseases in Rivers State?
3. How does story telling strategy of community education enhance the control of contagious diseases in Rivers State?

METHOD

The study adopted a descriptive survey design. The population of the study was 2,725 adults consisting of 25 experts in community education in three public universities in Rivers State (University of Port Harcourt, Rivers State University and Ignatius Ajuru University of Education) and 2,700 members of various Community-Based Organizations in Port Harcourt, Obio/Akpor, Ogba/Egbema/Ndoni and Degema Local Government Areas of Rivers State. A sample size of 370 was drawn consisting of 25 experts and 345 members of CBOs in the study area. The experts were not sample due to their small and manageable size. So, the population of experts was taken as a census while the stratified non-proportionate sampling technique was adopted in sampling 20% of the population of each CBO to arrive at the sample size of 345 for members of CBOs.

A questionnaire titled “Community Education Strategies for the Control of Contagious Diseases Questionnaire” (CESCCDQ) was used for data collection. Responses to items in the questionnaire were structured on a modified Likert 4point scale of Strongly Agree, Agree, Disagree and Strongly Disagree. The instrument was validated by three experts, two in Community Development and One in Public Health. The test retest method was adopted in checking the internal consistency of the instrument. A reliability coefficient of 0.81 was obtained showing the instrument was reliable. The instrument was administered by two research assistants under the guide of the researchers. Data collected were analyzed using mean statistics and standard deviation with a criterion mean of 2.50 to determine whether a particular item/statement was accepted or rejected. Any item with a mean score of 2.50 and above was tagged Agree” while scores below 2.50 were tagged “Disagree”.

RESULTS

Research Question 1: How does the REFLECT strategy of community education enhance the control of contagious diseases in Rivers State?

Table 1: Mean Responses on How REFLECT Strategy of Community Education Enhance Control of Contagious Diseases

S/N	Statement Items	Mean	SD	Remarks
1	Having an organized discussion session with community members will provide the needed sensitization for people to take preventive actions during a period of pandemic	2.56	0.63	Agree
2	Having survivors of contagious diseases (such as Covid-19 and the likes) appeal to the conscience of the people will motivate those already infected to seek for help in designated medical facilities.	3.00	0.71	Agree
3	Community members will take necessary actions to prevent and control the spread of contagious diseases (such as Covid-19 and the likes) when they are actively involved in the planning of the awareness programme.	2.67	0.68	Agree
4	People will be actively involved in the control of contagious diseases when sensitization programmes are carried out in their local languages.	2.87	0.70	Agree
5	Including health awareness information in literacy programmes will provide the needed action among adults for the control of contagious diseases like Covid-19.	2.66	0.63	Agree
Grand Mean		2.75		Agree

The analyzed data in table 1 revealed that majority of the respondents agreed with the statements in items 1-5. This is because the mean scores for these items are higher than the criterion mean score of 2.50. This implies that respondents are of the opinion that the REFLECT strategy of community education controls contagious diseases through organizing of discussion sessions where community members can be sensitized, bringing survivors of contagious diseases to share their experiences, involving community people in the planning of awareness programme, carrying out such programmes in their local languages and infusing necessary health education information in literacy programmes.

Research Question 2: How will Each-One-Teach-One (E-O-T-O) strategy of community education promotes the knowledge on the control of contagious diseases in Rivers State?

Table 2: Mean Responses on How Each-One-Teach-One (E-O-T-O) Strategy of Community Education Promotes Knowledge on the Control of Contagious Diseases

S/N	Statement Items	Mean	SD	Remarks
1	The use of community members who have basic knowledge of contagious diseases (such Covid-19) to sensitize their neighbors helps in disseminating knowledge on controlling the spread of such diseases.	2.83	0.66	Agree
2	Those who have contracted contagious diseases (such as Covid-19) will be more willing to visit health centres when their loved ones are asking them to do so.	2.56	0.61	Agree
3	People are more willing to obey preventive procedures for contagious diseases when their family members reinforce such information.	2.77	0.65	Agree
4	If individuals buy personal protective equipment for their loved ones, they can be taught how to use them in protecting themselves from contagious diseases.	2.79	0.68	Agree
5	Being sensitized on contagious diseases in local languages will make people understand how the diseases spread and take preventive actions.	2.68	0.70	Agree
Grand Mean		2.73		Agree

The analyzed data in table 2 showed that majority of respondents agreed with the statements on items 1-5. This is seen in the mean scores of these items which are more than the criterion mean score of 2.50. This, therefore, implies that respondents are of the opinion that the Each-One-Teach-One strategy of community education emphasizes the use of people who have knowledge of the contagious disease, who speak local language of the people, family members and those who have the financial resources to educate people who don't have this knowledge. This strategy ensures easy understanding of health education information and people are likely to take measures to control the spread of the disease.

Research Question 3: How does story telling strategy of community education enhance the control of contagious diseases in Rivers State?

Table 3: Mean Responses on How Story Telling Strategy of Community Education Enhance the Control of Contagious Diseases

S/N	Statement Items	Mean	SD	Remarks
1	Having survivors of contagious diseases tell their stories to community people will make them take measures to prevent the diseases.	3.12	0.77	Agree
2	Incorporating information on the prevention and control of contagious diseases in stories make it more real, less academic and people relate more with it	3.10	0.75	Agree
3	When information on contagious diseases is coming from a community member who shares their personal experience, people hardly forget and are forced to take necessary actions to prevent the diseases.	3.23	0.81	Agree
4	Some superstitious beliefs about contagious diseases will be discarded when a community member share story of their experiences with such diseases.	2.69	0.66	Agree
5	People pay more attention and get engaged in a sensitization programme on contagious diseases when stories are told about the disease	2.78	0.71	Agree
Grand Mean		2.98		Agree

The analyzed data in table 3 shows that all the items in the table (1-5) had mean scores that are above the criterion mean of 2.50 indicating that majority of the respondents agreed with the statement items. This implies that the respondents are of the opinion that the story telling strategy of community education enhance the control of contagious diseases by having survivors of these diseases in the community share their experiences with community members. This makes such information real to the people, they get more engaged in listening, discard previous superstitious beliefs and consequently take necessary actions to prevent the spread of the disease.

DISCUSSION OF THE FINDINGS

The analyzed data in research question one revealed that the REFLECT strategy of community education can be used to control contagious diseases through organizing of discussion sessions where community members are sensitized, bringing survivors of contagious diseases to share their experiences, involving community people in the planning of awareness programme, carrying out such programmes in their local languages and infusing necessary health education information into literacy programmes. This strategy though originally meant for the teaching of literacy to adults is found useful in the dissemination of information regarding the control of outbreak of contagious diseases. This is because any effort made in the control of the spread of contagious diseases must

involve sensitizing the people on what to do and what not to do to increase or reduce the spread. This finding supports by the findings of Irmawati (2018) which revealed that since the REFLECT method was considered good and suitable in learning at community level, citizens felt happy and motivated in learning because the topic they learn came from themselves, their problems and they were actively involved in the planning and implementation of the learning process.

The analyzed data in research question two revealed that the Each-One-Teach-One strategy of community education emphasizes the use of people who have knowledge of the contagious disease, who speak local language of the people, family members and those who have the financial resources to educate people who don't have this knowledge. This strategy ensures easy understanding of health education information and people will likely take measures to control the spread of the disease. This method is more individualistic and it was discovered that people accept information on how to prevent a disease and the prevalence of such diseases more when it is coming from a loved one, a benefactor or one who they look up to as more knowledgeable. This finding is in line with Imran (2001) in a study carried out in India which revealed that through the each-one-teach-one strategy people help their housemaid, gatemen, garbage collectors, vegetable vendors and underprivileged people to learn: read and write and these people make life better and easier for their bosses.

The analyzed data in research question three further revealed that the story telling strategy of community education enhance the control of contagious diseases by having survivors of these diseases in the community share their experiences with community members. This makes such health education information real to the people, they get more engaged in listening, discard superstitious beliefs and consequently take necessary actions to prevent the spread of the disease. Story telling is found to be quite effective in dissemination of information to people especially illiterate and semi-literate adults in communities. It brings information to reality and makes the people create mental picture of such information. This ultimately leads to easy assimilation and retention of such information. This way, community members are more likely to obey health education directives to prevent and control the spread of contagious diseases. This finding is in line with the findings of Powell and Murray (2012) which revealed that students scored higher when teaching material was presented as stories against the traditional text format. The study further revealed that students who scored higher on the story format quiz showed greater improvement in their scores than the students who scored higher on the traditional format. This suggests that stories are more effective than a textbook presentation alone in helping learners improve their understanding of complex concepts, issues and challenges.

CONCLUSION

Based on the findings of this study, the researchers concluded that any effort made in the control of contagious diseases must involve awareness creation. This is because contagious diseases spread faster through the activities of man. If people are aware of measures to take to prevent themselves from contracting the disease or from transmitting it, if they are infected, the chances of a wider spread will be reduced drastically. From the findings of the study, it is concluded that

the REFLECT strategy, Each-One-Teach-One strategy and the Story telling strategy are some of the community education strategies that have proved effective in creating awareness on how to prevent and control such diseases. These strategies emphasize the use of close relatives who have knowledge of the diseases and survivors of such diseases to create awareness to people as individuals or in groups. This is also done in the people's local languages using very compelling stories from community members.

Recommendations

Based on the findings and the conclusion of the study, it was recommended that:

1. The government at all levels and other concerned stakeholders should employ the services of seasoned adult/community education experts to train health officers in charge of dissemination of health education information on the control of contagious diseases on how to use the REFLECT and other community education strategies.
2. Relevant departments in primary health centres should adopt the Each-One-Teach-One strategy in their health education practices especially before and during outbreak of a contagious disease.
3. The Federal and State Ministries of health should work hand in glove with the National Mass Education Commission and various state agencies of mass literacy should collaborate in providing health education programmes using community education strategies to the grassroot masses.
4. Stakeholders and programmes organisers in adult and health education should give enough publicity to success recorded in the usage of community education strategies for educating the people on control and management of contagious diseases in their area of operation so as to encourage further usage and support from donor agencies.

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