British Journal of Education

Vol. 9, Issue 10, pp.1-9, 2021

Online ISSN: 2054-636X(Online)

Print ISSN: 2054-6351(Print)

INFLUENCE OF COMMUNITY TRANSMISSION OF COVID-19 ON SCHOOL MANAGEMENT IN ENUGU STATE, NIGERIA

Elechi Catherine Nkiru, Ph.D

Department of Educational Management, Enugu State University of Science and Technology, Agbani

Ukwuaba, Loretta Chika, Ph.D & Ekpenyong David Oboqua, Ph.D

Department of Adult and Continuing Education Enugu State University of Science and Technology, Agbani

ABSTRACT: The study investigated influence of community transmission of COVID-19 on school management in Enugu State, Nigeria. Three research questions were formulated. The research design used was descriptive survey. The sample of the study was 334 respondents selected from the study area using simple and accidental random sampling techniques. The instrument used for the study was 16-items, modified rating scale questionnaire titled "Community Transmission and School Management Rating Scale (TSMRS)" was used for data collection. This instrument was duly validated by experts and its reliability estimate was established at .86 using Cronbach Alpha reliability method. Simple percentage, statistical technique was used for the study. The results showed that the provision of nose masks, hand washing soap and alcohol based sanitizers for the schools were above average in the study area. Based on the results, recommendations were made, among others, that the government should engage media organisations and the citizenry on media literacy to fight against the spread of inappropriate and infections information and government should endeavour tot structure special and comprehensive palliative programmes for citizens as alternatives.

KEYWORDS: community, transmission, corona virus disease, school management

INTRODUCTION

The novel corona virus disease (COVID- 19) emerged at the end of December in Wuhan city of China. The novelty of this type of virus made public health, experts across the globe began scrambling to understand, track and contain it. Even though the virus started in China, it quickly spread to other countries. On Thursday, January 30, 2020, the Center for Disease Control (CDC) confirmed person to person transmission of corona virus disease in the United States, and the same day had the director General of the World Health Organization (WHO) also declaring the corona virus disease, a Public Health Emergency of International Concern (PHEIC). WHO further announced that the unknown COVID- 19 is transmitted via droplets and fomites during close unprotected contact between an infector and infectee. Early cases were visitors and individuals working in the Wuhan Wholesale Seafood market. As of February 25, 2020 an animal source had not yet been identified.

The corona virus began sweeping across the world by March 11, 2020, in 114 countries with 118,000 people infected. WHO then declared as follows; "We have therefore made the assessment that COVID-19 can be characterized as a pandemic" (WHO, 2020). WHO (2020) admitted that there is no unknown cure for the novel corona virus and provided guidelines on Surveillance Strategies for COVID-19 human infections. The guide document gives overall strategies that member countries should consider as part of comprehensive national surveillance for COVID-19. It reiterated the necessity to adapt and strengthen existing national health systems whereby necessary and to scale up surveillance capacities. WHO recommended contact trade, test, isolate, quarantine, and other social measures as a surest way to break the cycle of transmission.

Public health and social measures are measures or action by individuals, institutions, communities, local and national governments and international bodies to glow or stop the spread of COVID-19. These measures to reduce transmission of COVID-19 Include individual and environmental measures, detecting and isolating cases. Contact tracing and quarantine, physical distancing measures. For mass gatherings, international travel measures. Vaccines and treatments. While vaccines and specific medications are not yet available for COVID-19, other public health and social measures play an essential role in reducing the number of infections and saving lives. The measures are used in conjunction with individual protective measures against COVID-19 such as frequent hand washing and respiratory etiquette.

The COVID-19 Pandemic in Nigeria is part of the World Wide Pandemic corona virus disease (COVID-19) caused by severe acute respiratory syndrome coronavirous (SARS- COVID -19). Federal Ministry of Health (2020) on the same day, the World Health Organization listed Nigeria among other 13 African countries identified as high-risk for the spread of the virus (NCDC, 2020). The first confirmed case in Nigeria was announced on February 27, 2020, when an Italina citizen in Lagos State, tested positive for the virus (Nigeria Centre for Disease Control Covid-19, 2020). On March 9th, 2020, a second case of the virus was reported in Ewekoro, Ogun State, a Nigeria citizen who had contact with the Italian citizen (Maclean & Dahir, 2020). The government of Nigeria through Federal Ministry of Health and its agency Nigeria Centre for Disease and Control (NCDC) immediately initated robust and enhanced contact tracing approach to contain the virus in the country. The country outlines coronavirus management measures as follows:

1. Regular and thorough washing of hands with soap under running water and use of alcohol-based hand sanitizer.

2. Maintain at least one and half meters (5 feet) distance between yourself and anyone who is coughing or sneezing.

3. Avoid shaking of hands.

4. Keep a distance of at least two meters from all persons particularly those with fever, cough, sneezing and difficulty in breathing.

5. It is advisable to be physically active, drink plenty of water, eat healthy, avoid stress and have enough sleep.

6. Stay home if you feel unwell with symptoms of a fever, cough, and difficulty in breathing and call a health official

7. Wearing of face rnasks

The above measures were considered to be crucially important to the management of the coronavirus pandemic and Nigerians were encourage to adhere strictly to them.

Subsequently, on the 23rd March 2020, when Nigeria case count had increased from two (2) to ten (10), the President of the Federal Republic of Nigeria announced further COVID-19 preventives measures and declared as follows:

1. All public gatherings, including conferences, workshops, funerals, festivals, political ralies, sporting events and religious activities, have been suspended for the next four weeks (4) subject to review.

2. All Universities, Colleges of Education, Polytechnics, Secondary Schools, Primary schools, both public and private schools closed.

3. Ban on international travel

4. Ban of interstates movement except those on essential duties such as petrol tankers, market women (food stuff), pharmacy (drugs).

5. Ban on operation of night clubs, beaches, recreational parks among others

6. Business and other workplaces where shut down. The have been further social measures to contain the coronavirus in Nigeria including full lockdown, compulsory wearing of face mark among others (Nigeria Center for Disease Control, 2020).

However, the directive of the Presidential Task Force (PTF) on COVID-19 triggered strict compliance by other institutions and bodies to contain the pandemic. This evolving situation created an altered lifestyle with very peculiar social conditions with adverse effects on culture religion, education, economy, entertainment industries among others. Of the reported data in Nigeria, 1,285 confirmed cases and 21 deaths have been recorded in Enugu State. No report has made of active cases on admission in the study area at the time of writing (NCDC, 2020). Despite the measures put in place by the Nigerian Government, there is increasing community spread resulting to positive cases skyrocketing with an increasing in the death ate, though at a relatively slow rate. As at 7th September, 2020, Nigerians coronavirus disease confirmed cases stood at 55,456 with deaths confirmed cases stood at 1,067 while 43,334 where discharged (Nigeria Centre for Disease and Control, 2020). Though Nigeria's coronavirus confirmed cases and death rate have increased significantly, however the figure are far better compare to the rest of the world and some Africa. This positive outlook may be attributed to the Nigeria approach advanced contact, trace, community transmission, test isolation and quarantine which World Health Organisations and Nigeria Centre Disease Control had recommended. The sudden increases in the Nigeria's COVID-19 confirmed cases and deaths may be due to stigmatisations and the denial of COVID-19 Pandemic. It is against this foundation that this study is focused on investigating the influenced of community transmission of COVID19 on school management in Enugu State, Nigeria.

Community transmission

Community transmission is when there is no clear source of origin of the infection in a new community. It happens when you can no longer identify who became infected after being exposed to someone who interacted with people from the originally infected communities. For examples, community spread in the United States, means that cases are occurring in people who did not have any known contact with others from known hotspots like Floriola, Arizona or even Brazil. For covid-19, the disease caused by the novel coronavirous, it's most contagious when someone has symptoms, but it's still possible to spread the infection from person to person even with no symptoms.

Asymptomatic means no symptoms, when someone has an infection, there is a period of time after they catch the germ before they have symptoms. This is called the incubation period. In some cases, people may catch the infection and never have any symptoms. Even with no symptoms, it's possible to spread an infection. For example, the flu is contagious a day before someone develops symptoms.

However, Elijah and Daniel (2020) stated that the unending corona various disease continues to rage havoc on human society globally and the social cost of it is yet to be measured. All the sectors of the society including education, economy, health, entertainment, religious activities amongst other are heavily affected by the academic due to the closure of schools, markets, borders, football activities and night clubs. The pandemic further threatens the future of people's livelihood as the search for cure continue in our science laboratories. The authors reviews the social cost of COVID-19 at various levels of the economy and propose ways to reducing the impacts. It takes a special look at the degree to which lives are sustained under the pandemic and the Ghana approach to curb the spread. The authors concludes that government and other businesses should become frugal to sustain lives under the pandemic.

Purpose of the study

The main purpose of the study was to examine the influence community transmission of COVID-19 on school management in Enugu State, Nigeria. Specifically, the study sought to:

- 1. The level of the provision of Nose Marks
- 2. The level of the provision of hand washing
- 3. The level of the provision of alcohol based sanitizers.

Research questions

- 1. What is the level of provision of nose marks?
- 2. What is the level of the provision of hand washing?
- 3. What is the level of the provision of alcohol base sanitizers?

METHODOLOGY

The research design utilized in this study was descriptive survey. The design was therefore because is a method to find out what situations, events attitudes or opinions are occurring in a population or is to address issues of distribution of some phenomena in a population

(Isangedighi, 2012). The study area is Enugu state, Nigeria. Enugu state is one of the thirty-six (36) states of the Federal Republic of Nigeria and it has 17 local government areas. The state is arranged in the south-east geopolitical area of Nigeria. It is limited to the worth by Kogi state in the south by Abia state in the east by the Benue state in the west by the Ebonyi State. The state exists in the tropical district of Nigeria and has both dry and blustery seasons. I does likewise encounter the harmattan seasons.

The state has a populace of around three million, two hundred and sixty seven, eight hundred and thirty seven (3,267,837) as indicated by the National Population Commission Census (2006). They are overwhelmingly Christians and their primary occupations incorporate craft making, farming, trading, cultivating, insignificant exchange and angling. The number of inhabitants in this study s made up of all the principals and their vice principals of the secondary school in the study area, totalling five hundred and eighty A breakdown shows 291 principals and. 291 vice principals respectively. The rationale behind the use of the subjects is that they are the management of schools. The population of the study was 582 respondents. The sample for the study was 349 respondents using 60% of the population but during the administration only 334 questionnaires were properly field while 15 copies were not properly filled. The sample techniques adopted for this study was simple and purposive, random sampling techniques in selecting the subjects for the study. It is a method by which analyst give each individual from his/her populace equivalent and autonomous chance of being chosen. A self developed questionnaire was used as an instrument for data collection titled: Community Transmission and School Management Rating Scale (CTSMRS) designed by the researchers. The instrument had two section A and B. Section A described the bio-data of the respondents while section B had 20 items in the form of modified rating scale of "Yes" and "No" was design to elicit information from the subject to indicate their level of agreement or disagreement with the items. The instrument was dully validated by two experts in Adult Education and one Measurement and Evaluation Experts. Correction were pointed out by experts and adjusted by the researchers and the document has considered valid. The instrument was pilot tested outside the sample and yielded a reliability coefficient of .86 using Cronbach Alpha reliability method. The copies of the questionnaire were administered personally by the researchers with three research assistants trained for the purpose. For ease of data preparation, codes were designed to each item and a coding schedule was prepared the developing a key for each of constructs of the instrument. The data collected for the study were analysed using simple percentages.

RESULTS

Research question one (1)

Research question one examined what is the level of the provision of nose marks for the school management? The major variable for the research question was provision of nose marks measured using item 1-5 in section "B"

British Journal of Education Vol. 9, Issue 10, pp.1-9, 2021 Online ISSN: 2054-636X(Online)

Print ISSN: 2054-6351(Print)

Table 1: Summary of simple percentages for the provision of nose masks for the school
management in Enugu State, Nigeria.

S/N	ITEM STATEMENT	YES	%	NO	%
1	Do the government provide COVID-19 test	210	62.9	124	37.1
	kits in your school?				
2	Do you have a budget for pandemic	194	58.1	140	41.9
	prevention?				
3	Are there enough nose masks for everybody in	192	57.5	142	42.5
	your school?				
4	Are you satisfied with the quality of facemasks	187	56.0	142	44.0
	currently used in your school?				
5	Does your school benefit from free facemask	217	56.0	117	35.0
	distribution to prevent spread of the current				
	COVID-19				
6	Do you think facemasks prevent zoonotic	205	61.4	129	38.6
	spillover?				

Research question I

What is the level of the provision of nose mask for the school management? The major variable for this research question was provision of nose mask measured using item 1-6 in section "B" of the questionnaire. Simple percentages was used in analysing in Table I above is for the level of the proportion of 334 respondents that said "Yes" for the respective indicators were item one, 210 (62.9%), item two, 194(58.1%), item three, 192 (57.5%, item four 187 (56.0%), item five, 217 (65.0%) and item six, 205 (61.4%) while the proportion of respondents that said "No" for the respective indicators were item one, 124 (37.1%), item two, 140 (41.9%), item three, 142 (42.5%), item four, 147 (44.0%), item five, 117 (35.0%) and item six, 129 (38.6%). The Table 2 presented above displays for the provision of nose masks for the school management in Enugu State, Nigeria. It reveals that percentages that falls above 50% showed a high level of the provision of nose masks for school management in Enugu State, Nigeria. On the whole, it can be submitted that provision of nose masks for school management in Enugu State is above average.

 Table 2: Summary of simple percentages for the provision of hand washing soap for the school management in Enugu State, Nigeria.

S/N	ITEM STATEMENT	YES	%	NO	%
7	Government provide running water in my	205	61.4	129	36.6
	school				
8	Government provide liquid soap in my school	215	64.4	119	35.6
9	Government has made more promises than	117	59.0	137	41.0
	action in buckets supply in my school				
10	There are no water and sanitation facilities in	207	62.0	127	38.0
	my school				
11	I wash my hands with soap and running water	208	62.3	126	37.7

Research question 2

What is the level of the provision of hand washing soap for the school management? The major variable for this research question was provision of hand washing soap measured using item 7-11 in section "B" of the question. Simple percentages was used in analysing data in Table 2 above is for the level of the proportion of 334 respondents that said "Yes" for the level of the respective indicators were item seven, 205 (61.4%), item eight, 215 (64.4%), item nine 197 (59.0%), item ten, 207 (62.0%), and item, eleven, 208 (62.3% while the proportion of respondents that said "No" for the respective indicators were item seven, 129 (38.6%), item eight, 119 (35.6%), item nine, 137 (41.0%), item ten, 127 (38.0%), and item eleven, 126 (37.7%). The Table 2 presented about displays for the provision of wash hand soap for the school management in Enugu State, Nigeria. It reveals that percentages that falls above 50% showed low level of provision of wash hand soap for the school management in Enugu State, Nigeria. On the whole, it can be submitted that provision of wash soap for the school management in Enugu State, Nigeria. It reveals that soap submitted that provision of wash soap for the school management in Enugu State, Nigeria. On the whole, it can be submitted that provision of wash soap for the school management in Enugu State is above average.

S/N	ITEM STATEMENT	YES	%	NO	%
12	I am satisfied with the quality of alcohol based	199	59.6	135	40.4
	sanitizers supplied in my school				
13	My school dose not benefit from free alcohol	218	65.3	116	34.7
	based sanitizers supplied by the government				
14	I wash my hands with alcohol based sanitizers	175	52.2	159	48.8
15	Government supplied alcohol based sanitizers	171	51.2	163	48.8
	free in my school to reduce spread of pandemic				
16	Government has been able to train us on how	189	56.6	145	43.4
	to produce alcohol based sanitizers since				
	COVID-19 outbreak				

Table 3: Summary of simple percentages for the provision of alcohol based sanitizers for the school management in Enugu State, Nigeria.

Research question 3

What is the level of the provision of alcohol based sanitizers for the school management? The major variable for this research question was provision of alcohol based sanitizers measurable using item 12-16 in section "B" of the question. Simple percentages was used in analysing in Table 3 above is for the level of the proportion of 334 respondents that said "Yes" for the respective indicators were item twelve, 199(59.6%), item thirteen, 218(65.3%), item fourteen 175(52.2%), item fifteen, 171(51.2%) and item sixteen, 189 (56.6%) while the proportion of respondents that said "No" for the respective indicators were item twelve, 159(47.8%, item fifteen, 163 (48.8%) and item sixteen 145(43.4%). The Table 3 presented above display for the provision of alcohol based sanitizers for the school management in Enugu State, Nigeria. It reveals that percentages that fall above 50% showed a high level of provision of alcohol based sanitizers for the school management in the study area. On the whole, it can be submitted that

provision of alcohol based sanitizers for the school management in the study area is above average.

DISCUSSION OF FINDINGS

The result of research question one showed that the level of the provision of nose marks for the school management was significantly adequate in the study area. The provision of nose marks play a significant role on the prevention of Covid-19 pandemic spread among the students. This indicates that the respondents agreed that these provisions of nose marks by the government have impacted positively on the life of the learners in terms of access, affordability and availability of nose marks. The finding of this research question one is in line with the view of Maclean and Dahir (2020) opined that the government of Nigeria through its agency robust and enhanced contact tracing approach to contain the virus and also introduced the wearing of face marks to schools and my public places in the country. The authors further reported that more than two third of the participants had a good knowledge, attitude and precautionary measures towards Covid-19 disease. This study revealed that the use of face marks in secondary education level is high.

The result of research question two showed that the level of the provision of hand washing for the school management was significantly high in the study area. The high enforcement of the hand washing in this is attributed to the high extent in school management ensuring that staff and students wash their hands at the entrance of the institutions, enforcement agents move from one school to another ensuring strict compliance to hand washing protocols. This finding is in agreement of WHO (2020) who reported that schools must ensure strict compliance to hand washing protocols in order to prevent wide spread of the disease. The finding challenges the result of the study FMH (2020) that reported a low response to those protocols as most of the learners either did not practice hand washing and hand sanitizing, wear a nose marks or practice social distancing often or always.

The result of research question three showed that the level of provision of alcohol based sanitizers for school management was significantly high in the study area. This is attributed to the high extent in school management ensuring that staff and learners used hand sanitizers in the school. The finding is in consonance with the view of WHO (2020) reported that all learners and staff must strictly compliance with the practice of hand sanitizing always.

CONCLUSION

The global corona virus pandemic has affected every facet of life-economy, health, education, lifestyle, entertainment, religion and politics, among others with the restrictive measures to contain it. However, the basic necessities of life such as food, water, power supply amongst others which are required on daily basic are under threat.

Recommendations

1. The government should engage media organisations and the citizenry on media literacy to fight against the spread of inappropriate and infections information.

2. Government should endeavour tot structure special and comprehensive palliative programmes for citizens as alternatives.

3. Intensify public awareness education to combat stigmatization and denial of the disease.

REFERENCES

- Elijah, M & Daniel, B.A. (2020). Covid-19 pandemic: An analysis of the socio-economic of the new order. *International Journal of Innovatives Research and Advanced Studies* 7(7) 1-7.
- Federal Ministry of Health (2020). Nigeria Centre for Disease Control retrieved 9 September, 2020

Isangedighi, A. J. (2012). Fundamentals of research and statistics in education and social sciences. Calabar. Et-Nwa Associates.

Maclean, R. & Dahir, A.L. (2020). Nigeria responds to first coronavirous case in sub-sahara Africa. The New York Times. Retrieved 20 March, 2020.

NPC (2006). National population commission census, Abuja, Nigeria.

NCDC (2020). Nigeria records second case of Covid-19 in 9 March, 2020. Retrieved 20 March, 2020.

World Health Organisations (2020). First case of coronavirus diseases confirmed in Nigeria 28 February, 2020. Retrieved 10 March 2020.