

SCHOOL HEALTH CARE AND SECURITY SERVICES NEEDED FOR MANAGEMENT OF PUBLIC SECONDARY SCHOOLS IN DELTA STATE DURING COVID-19 PANDEMIC ERA

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Abstract

The COVID-19 pandemic era coupled with its health challenges and security threats to both students and the educational system, which has become a source of worry for education stakeholders towards effective management of the Nigerian secondary schools, warranted the present study. The objective of this present study therefore, was to investigate school health care and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. As such, two research purposes and questions guided the study. A descriptive survey research design was employed in the study. Population for the study comprised 466 principals and 11,442 teachers from the 466 public secondary schools in Delta State. Sample size of the study entailed a total of 898 respondents which consisted of 326 principals and 572 teachers from 326 public secondary schools in Delta State selected at 70% and 5% respectively, using the purposive sampling technique. Instrument for data collection was a 30-item questionnaire developed by the researchers, structured on a 4-point scale of Highly Needed (HN), Highly Needed (HN), Less Needed (LN) and Not Needed (NN) and titled: "School Health Care and Security Services Questionnaire (SHCSSQ). The instrument was face validated by three experts from several departments from the Faculty of Education, Delta State University, Abraka. Reliability of the research instrument was established through a pilot-test sampling 7 principals and 35 teachers from seven of the public secondary schools in Edo State. Data gathered from the pilot-test conducted were analyzed using Cronbach Alpha method. This yielded coefficients' reliability values of 0.89 and 0.91 for the two clusters which were added up to give an overall coefficient internal consistency of 0.90, showing that the questionnaire was reliable and trustworthy to collect the necessary information for the study. Data gathered and collated were analyzed using mean statistics rated at 2.50 and standard deviation. The findings of this study generally indicated among others such school health care and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. Based on the findings, recommendations were proffered and among them included that the Delta State government should consistently provide adequate funds for provision of the needed health care services for effective management of the public secondary schools in Delta State during the COVID-19 pandemic era. Also, the school health and security policies should be well-implemented for effective management of secondary schools in Delta State during and after the COVID-19 pandemic era.

Key Words: *School Health Programmes, Care Services, Security Facilities, Management, COVID-19, Pandemic Era*

Introduction

Education is the key to a successful life, standard of living and well-being of every individual within and outside the Nigerian society. It is an important instrument for environmental sustainability which can equally be utilized to promote effective health care delivery and security in the country. Education as observed by the Federal Republic of Nigeria (FRN, 2014) is a great 'instrument par excellence' for sustainable development in the country. Therefore, any form of education is an essential tool for social change, economic reconstruction of the nation and for promotion of a healthy and progressive society. Secondary education which is received after primary schooling is also important for human empowerment and capacity development. This level of education prepares secondary school students for both higher education and the world of work. Secondary education is

the bridge between primary and tertiary levels of education (Agi & Uba, 2020). Therefore, the place and relevance of secondary school education in the country's educational system is of paramount importance. Secondary education is however expected to;

- (a) Provide all primary/basic school leavers with the opportunity for education of a higher level, irrespective of gender, sex, social status, religious or ethnic background;
- (b) Offer diversified curriculum to cater for the differences in talents, dispositions, opportunities and future roles;
- (c) Provide trained manpower in applied sciences, technology and commerce at sub-professional grades;
- (d) Provide entrepreneurial, technical and vocational job-specific skills and knowledge for self-reliance, and necessary for agricultural, industrial, commercial and economic development;
- (e) Develop and promote Nigerian languages, art and culture in the context of world's cultural heritage;
- (f) Inspire students with a desire for self-improvement and achievement of excellence;
- (g) Foster national unity with an emphasis on the common ties that unite us in our diversity; and
- (h) Raise morally upright and well-adjusted individuals and a generation of people who can think independently and rationally for themselves, respect the views and feeling of others, respect the dignity of labour, appreciate those values specified under our broad national goals and live as good citizens (FRN, 2014: 17-18).

The above stated objectives of secondary education gave a sense of direction as to what secondary education should be in Nigeria and Delta State inclusive. This equally means that the quality of education provided especially in secondary schools should be geared towards achieving the above objectives. The underlying principle here is that the secondary schools should be able to provide quality education to all those who can benefit from it, as the worth of any educational system lies in its capability to continuously serve its society better and remain relevant (Agi & Uba, 2020). Again, the above objectives of secondary education cannot be efficiently and effectively achieved during the COVID-19 pandemic era without effective management of this level of education. Management of education can be described as the harnessing and coordination of both human and material resources with the aim of achieving desired educational goals and objectives. It is a systematic arrangement and organization of educational resources in order to make them productive. It involves the process of working with and through people to achieve educational goals and objectives (Akpan, 2020). Management of secondary education therefore, entails effective planning, organizing, controlling, coordination, supervision, evaluation and documentation of educational activities for achievement of goals (Akpakwu, 2012). From the foregoing discussions therefore, emphasis should be placed, focused and laid more on maintaining a healthy, security and safe environment in the school which is part and parcel of effective management of secondary schools so as to achieve all the above educational objectives especially during the COVID-19 pandemic era. Good health care and security services include part of the educational services which should be provided in schools for their effective management. School Health Care Services (SHS) according to Jiya, Jiya, Ibitoye, Umar, Baba, Adamu and Isezuo (2020), are preventive and curative services provided for the learners and staff within the school setting. The purpose of the School Health Services

is to help students at school to achieve the maximum health possible for them to obtain full benefit from their education. It has been observed that participating in educational programmes depends on the health status of students. A healthy and mentally alert student is more likely to attend to school activities as required by the curriculum. Improving educational status goes hand in hand with that of the health of individuals; and schools therefore, are responsible for the provision of effective health care service delivery and health safety of students within the school environment (Jiya, Jiya, Ibitoye, Umar, Baba, Adamu & Isezuo, 2020). School health care services during the COVID-19 pandemic era as observed by Alafin, Adesegun, Izang and Alausa (2019), and Olatunya, Oseni, Olaleye, Olatunya, Akani and Oyelami (2015) may be delivered through the provision of appropriate health personnel, treatment facilities, health appraisal services, health record keeping, control of communicable diseases and adequate nutrition services, healthful school environment, school feeding services, skills-based health education, pre-entry medical screening, routine health screening/examination, provision of school clinic and sick bay, first aid and referral services, promotion of good hygiene and sanitation in school, among others. School health care services (SHS) has been described to be a major tool for the achievement of education and health related Millennium Development Goals (MDG), and despite the appeals for the implementation of a robust SHS in Nigeria, the contents of SHS as practiced in various parts of Nigeria had been found to be very poor (Olatunya, Oseni, Olaleye, Olatunya, Akani & Oyelami, 2015).

Security care services as defined by the International Schools Services (ISS, 2021) refers to practical policies and protocols to help ensure safe environments and give the school tools to prepare members of staff when issues arise. Due to the wide range of school risks as regards to security threats, environmental and natural disasters, child predators, child molestations and harassments, among others, most education stakeholders have developed a wide range of policies, services and solutions to promote school security. Since the threads to school security may stem from various sources in society, the school safety issues should comprise a wide range of services. Schools can ensure safe environment by focusing on prevention, intervention and response phases in their safety efforts. To deal effectively with the anti-social and crime behaviour, schools need to promote positive school climate and school-wide effective prevention and intervention strategies (Schneider, 2008). Mubita (2021) provided a clear definition of security service. Security service to him refers to the protection of individuals, organizations, life and properties against external threats that are likely to cause harm and deaths. It is clear that any security service is generally focused on ensuring that external factors do not cause trouble or unwelcome situation to the organization, individuals, and the properties within the premises. Safer school creates the secure, safer, comfortable and healthy feeling to students and teachers both in normal and also in disaster situation (Mubita, 2021). However, the school cares deeply for both students' and staff safety. School security care services can be provided through a number of means as indicated by Kazlauskas and Jones (2016) and the Schools Compass Group (2022) to include installation of CCTV cameras, verification of staff, providing buses with GPS facility, monitoring visitors carefully in school, organizing constant workshops for school personnel, and taking preventive measures from unwanted incidents taking place, employing adequate able-bodied, active and efficient security guards in schools, monitoring the school parking lot, monitoring and

supervising student common areas such as hallways, cafeterias and playgrounds. Creating a safe, supportive school climate that provides school-wide behavioural expectations, caring school climate programmes, positive interventions and supports, psychological and counseling services, and violence prevention programmes, ensuring that all classrooms, including portable and temporary classrooms, have two-way communication with the office, Keeping unoccupied rooms and spaces locked when not in use, among others. Providing sufficient school security care is beneficial to the school and apart from the health benefits, it assists in monitoring and reducing fighting and bullying, provides immediate help in emergency situations, provides proactive measures in protecting each child with first account observation, combines forces for teachers to heighten security in the classroom, prevent strangers from gaining unauthorized access to the school environment, and provide the kids with a better sense of security in school (Security Guard Training Headquarters, 2021). Several studies have indicated that security threats and challenges in schools had been witnessed in various high-profile attacks in many countries. In Turkey, it is recorded that there is an escalation in the attacks towards students, teacher, managers in recent years. Some of these attacks resulted in severe wounds and even deaths. Beside these, theft, robbery, bullying, destroying the school properties are widely seen events and the school management generally is not successful in dealing with such problems. Another issue related to school security is that, schools are not well prepared for preventing and intervening security problems (Geyin, 2007; Ozer, 2006; Ozmena, Durb & Akgul, 2010).

The security care services as investigated in the present study did not only focus on the aspect of safeguarding school properties and personnel from theft and robbery through the deployment of security guards/personnel and use of CCTV cameras but other aspects that pose threats to human health in terms of providing effective guidance and counselling services, use of sensitization programmes for security care in school, among others. Notwithstanding the above explanations, on the contrary, the educational systems in developing countries like Nigeria are not able to fulfil their responsibilities in order to efficiently attain the educational objectives as a result of long-standing management problems of finance, insecurity and school safety threats, health care service challenges, quality and good governance (Hoop, 2010). Akinsuroju, Adeniyi and Anyanwu (2022) opined that the management of education globally has been a major concern to government through the various agencies saddled with these responsibilities at the federal, state and local levels. Educational administrators were incapacitated by the outbreak of the COVID-19 pandemic era. In developed countries, proper planning, well-organized structure, well-coordinated health care mechanisms, adequate funding, regular online training and effective safety control mechanisms were considered as the number of factor in the management of their education system. With this statement, Akinsuroju (2021) opined that for any educational system to be effectively managed and likewise make head-way especially during the COVID-19 pandemic era, proper planning, effective administration and adequate financing of educational services in areas of health care service delivery and security services are the very most essential. Akinsuroju further stressed that good organizational and management structure, control, proprietorship, inspection and supervision are pointers to achievement of the goals and objectives of secondary education. Management of secondary schools therefore,

should ensure proper planning of all educational services like the health care and security services; efficient use of administrative and management control for sustaining and improving both these educational services and the system; quality control by ensuring that regular and continuous supervision of both instructional and educational services (as regards to the health care and security services) provided; and ensuring that adequate financial support for all educational services is provided as well. Undoubtedly, if secondary schools in Delta State are well and effectively managed during the COVID-19 pandemic era by providing the needed healthcare and security services, it will make education accessible and safe to the inhabitants at any point in time. This will go a long way in realizing the objectives of secondary education and the nation (Akinsuroju, Adeniyi & Anyanwu, 2022). Furthermore, Akinsuroju, Adeniyi and Anyanwu (2022) and Cepal (2020), reported that COVID-19 pandemic era had posed serious threats to the educational system all-over Nigeria and including in Delta State.

COVID-19 pandemic era has created a period of unprecedentedly high crisis in all sectors of the nations' economy. Particularly, in the education sector, Obeidi in Akinsuroju, Adeniyi and Anyanwu (2022) stressed that the ugly scenario of COVID-19 had made face-to-face teaching and learning activities in 190 countries including Nigeria and in Delta State impossible as educational institutions all over the world were totally shutdown so as to prevent the spread and mitigate the impact of the COVID-19 virus. Nigerian schools including secondary schools were also closed as a result of this deadly pandemic. As such, effective teaching and learning process across all levels of Nigerian educational system during this period became a mirage. This ugly situation posed serious challenges to the management of the educational system in Nigeria together with those of the secondary schools in Delta State. As a result of this, stakeholders, including the agencies saddled with the responsibilities of management of secondary education sector went on their toes looking for effective ways of reopening schools and making systems work again bearing in mind the safety of all students and learners in educational institutions. Although, UNICEF (2020) submitted that the management of education was made possible during the peak of COVID-19 pandemic era in developed countries through the use of 5W Matrix, a response management tool. 5W Matrix is a management technique that provide information on Who is doing What, Where, When and for Whom Education Sector is to be monitored. According to UNICEF, information gathered for using this method served as important administrative process in developing regular mapping and other management tools that helped strengthen the management of education in developed countries during the COVID-19 pandemic. Developing country like Africa were still far reaching, struggling and backward in effectively managing education during the COVID-19 pandemic era (Akinsuroju, Adeniyi & Anyanwu, 2022). The Nigerian experienced showcased that nothing was working in the education sector during the peak of COVID-19 pandemic. All institutions were completely shut down and educational activities and programmes put to a halt. School health care safety and security became some of the turbulent, trending challenges and major problems facing effective management of the Nigerian education during the COVID-19 pandemic era. Besides, COVID-19 pandemic as indicated by Eze, Sefotho, Onyishi and Eseadi (2021), Ogunode (2020) and the World Health Organization (WHO, 2020 & 2021) is a period when the whole world was seriously attacked by an epidemic (which later became a pandemic) of a deadly virus known as the 'Corona Virus'. The coronavirus

disease as recalled is a highly infectious disease that has plagued the world population over the months from December 2019 till date (in most countries) causing serious health challenges. The disease spread through droplets (World Health Organization, 2020) and affected more than 9.1 million persons, and resulted in about over 473,000 deaths worldwide (Aljazeera News, 2020). According to the World Health Organization (WHO, 2020), corona viruses are family of viruses that cause illnesses ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and the Middle East Respiratory Syndrome (MERS). These viruses were originally transmitted from animals to people. SARS, for instance, was transmitted from civet cats to humans while MERS moved to humans from a type of camel. Several known corona viruses are circulating in animals that have not yet infected humans. The name corona virus comes from the Latin word corona, meaning crown or halo. Under an electron microscope, the virus looks like it is surrounded by a solar corona. The novel corona virus, originated from Wuhan, China and become popularly known as the COVID-19 (WHO, 2020).

The disease negatively affected many sectors which include the health sector, economic sector, political, social sector and tourism, religious sector, including the education sector. Ogunode (2020) opined that the outbreak of Covid-19 pandemic all over the world disturbed the political, social, economic, religious and financial structures of the whole world. World's topmost economies such as the US, China, UK, Germany, France, Italy, Japan and many others were almost at the verge of collapse. Besides, Stock Markets around the world were pounded and oil prices fell off the cliff. In just a week 3.3 million Americans applied for unemployment and a week later another 6.6 million people started searching for jobs. Eze, Sefotho, Onyishi and Eseadi (2021) pointed out that the indirect negative effects and impacts of the pandemic on the education sector noting that it disrupted schooling and lack of access to school, more especially in low and medium-income countries. The pandemic had a peculiar dissipating impact on education in Africa and other countries through decreased level of education, broadened existing divide in learning access and outcomes and increased school dropouts. It is also challenging in overcrowded resource which constrained schools within the African regions to provide a safe learning environment for students. In Nigeria, the threat posed to education is compounded due to peculiar vulnerabilities, including poor health systems, poverty and inequality, hunger, internally displaced populations, high population densities, urban-rural divide and out-of-school population (Obiako & Adeniran, 2020). As a result, countries have relied on several containment measures, including a range of physical and social distancing measures to flatten the epidemiological curve and avert morbidity and mortality due to COVID-19. The use of technology, e-learning, online resources and platforms in education was also highly encouraged in many countries including Nigeria in order to continue managing educational activities during the pandemic era. Unfortunately, these strategies were not very effective in managing Nigerian educational institutions during the COVID-19 pandemic. Obiako and Adeniran (2020) opined that though these efforts could be effective, with experience from developed countries, it had amounted to a far-reaching negative impact on the education system in developing low-income countries like Nigeria. The digital divide affected mostly educational institutions in the rural areas; and many institutions including secondary schools in Delta

State could not sufficiently afford to use various technologies or digital devices to coordinate their activities and programmes. Learning through digital technologies and online platforms within home during the COVID-19 pandemic era become challenging and almost impossible, because this had left a greater percentage of the learners' population behind. Obiako and Adeniran (2020) found that the COVID-19 pandemic had impacted education in three major ways, including missed learning for the majority of the pre-pandemic students, loss of access to vital school-provided services and leaving more kids behind. Thus, these impacts widen the gaps in education quality and socioeconomic equality following the school closures in the country. This is because a lesser percentage of learners who were in the urban areas, who hailed from higher-income families, stood more chance to access education during school closure through technology (Obiako & Adeniran, 2020), leaving behind the majority of learners from poor homes and underserved rural and suburban areas of the country (Zhong, 2020). Apart from this, learners in schools that lacked resources or capacity to transition to online delivery missed learning (Leung & Sharma, 2020). The social/physical distancing and the associated lockdown measures, as well as school closures, also thwarted the education sector, leaving an indelible mark on the education system due to their high economic, health care and social costs on education (Impey, 2020; Yinka & Adebayo, 2020).

The Federal Ministry of Education (2020) also alarmed and alerted their fears and worries over the long term school closure noting that it is expected that the longer schools were closed, the more the learning loss, the greater the exacerbation of inequalities, the deeper the learning crisis and the greater the exposure of the most vulnerable children to risk of exploitation and insecurity. This development would have had a negative impact on the rights of learners, and poses a very big challenge to the realization of Sustainable Development Goal 4 on inclusive and quality education. The economic pressures and negative impact of school closures on girls, children living with disabilities, without access to family support networks or online or other distance learning platforms limit their access to their fundamental right to a safe and inclusive education. In addition, the pandemic's health risk to learners and teachers was very high and devastating without effective risk-mitigation measures. The resultant unscheduled, sweeping school closures also posed an unprecedented challenge to Nigeria's education sector. An estimated 80 million children, youth, and adult learners in the system were deprived access to schools and had very limited alternative learning opportunities for an expected three-month period at the minimum. The closure of schools and learning facilities during the pandemic had also resulted in further deterioration in facilities and capacities for the delivery of quality education. Without an effective response, the impact of COVID-19 pandemic will further aggravate the already weakened Nigerian education sector, which lacks required resilience. Furthermore, the school closures had inadvertently increase the poor educational outcomes in some states (Federal Ministry of Education, 2020). All these efforts to control and contain the COVID-19 pandemic rather comparted and created more problems which constituted considerable concerns from all education stakeholders for effective management and reopening of the Nigerian education sector alongside the pandemic. Besides, after a long stretched period and months of school closure, lockdowns and restrictions to educational facilities, the need for reopening of schools and educational institutions during

the COVID-19 pandemic era was still highly felt which resulted in government taking drastic measures in providing guidelines that would improve better health care service delivery, promote quality education, school safety and security in Nigerian schools when reopened. In line with the World Health Organization (WHO, 2020) COVID-19 prevention, safety rules and control measures on maintaining two (2) meters apart parameter space and social distancing, use of hand sanitizers and face masks, constant hands washing with detergent and disinfectants, school constant fumigation, avoiding crowd, COVID-19 sensitization programmes, among others; the Nigerian Federal Ministry of Education (2020:4) provided guidelines needed for safety in schools at reopening during COVID-19 pandemic era.

These guidelines for the safe reopening of schools and learning facilities during the COVID-19 pandemic outlined actions, measures and requirements needed for;

1. Ensuring adequate preparedness of schools and learning facilities for reopening and resumption of academic and other ancillary activities without placing the health, safety, and security of learners, teachers, administrators, and other education personnel at risk;
2. A systematic, phased, safe reopening that factors resource availability to meet basic requirements and differentials in COVID-19 effect (e.g., fumigation and disinfection of schools; provision of learning material; impact and vulnerabilities across schools, learning facilities, communities, localities, local governments, and states);
3. Continued safe and quality teaching and learning activities by learners, teachers and administrators, that meet prescribed standards through remote and e-learning platforms with adequate safeguarding of their health, safety, and security during school shutdown period; and
4. Entrenching and institutionalizing good practices in health, safety and security in the nation's education sector in the long term to strengthen systems and make them resilient against future similar occurrences.

However, safe distancing and alternative learning models would be encouraged in schools as well. As schools and learning facilities reopened, they were encouraged to implement safe distancing measures that minimize and isolate risk. As such, they offered some alternative learning models (illustrated through outdoor learning, staggered attendance, alternate attendance, platooning, decreased interaction, flexible schedule and creative delivery), that focus on models which was premised on the belief that learners who require additional support or have disabilities were not disadvantaged. In addition to all the above measures for effective management of schools at their reopening during the COVID-19 pandemic era, further health care and security services should be well-implemented in schools for safety. The Nigerian Federal Ministry of Education (FME, 2020) further enlisted the health care and security services which were needed to be provided in schools. They include the use of sustained campaigns, advocacy and sensitization, especially in rural and remote areas, provision of Personal Protective Equipment (PPE) and thermometers, temporary isolation and treatment centers, hand washing, access to adequate gender-segregated toilet facilities, providing better ventilated and cross-ventilation for classrooms, offices and hostel accommodation, use of face masks, proper food preparation and handling, effective disposal of wastes, sensitization programmes for capacity of teachers, school administrators and other

education personnel, in order to effectively comply with the School COVID-19 Referral System and Protocols for safe distancing and hygiene in schools, and setting up school hygiene committees with designated hygiene experts to monitor and promote compliance (Federal Ministry of Education -FME, 2020). Schools and educational institutions furthermore, needed to create adequate classrooms and learning spaces in order to maintain safe distancing including the use of double shifts in schools, display IEC (Information, Education and Communication) materials on hygiene education around the premises and in classrooms, making adequate provisions for school adequate feeding programmes which encouraged learners' return, re-enrolment and continuous retention, sustained regular attendance and completion in the school system, ensuring regular toilet cleaning and good hygiene practices like the use of face mask and constant hand washing, arrange learners' seats to comply with NCDC safe distancing (two meters apart) guideline while enabling learners to interact and collaborate as much as possible, getting vaccinated, ensuring regular or constant safe water supply in school, ensuring adequate equipment of that school clinics are ready to attend to sick people, and ensuring WASH (Water, Sanitation, and Hygiene) facilities including soap, hand sanitizers and girls' dignity kits in schools, staggered use of school facilities to ensure compliance with NCDC health guidelines for necessary for management of educational institutions (Federal Ministry of Education, 2020; FRN, 2014).

For the security care services, the strengthening and reinforcement in the use of ICT to facilitate teaching and learning, use of school security guards, creating immediate temporary isolation space, using technological facilities such as the CCTV cameras mounted in various corners of the schools' premise, use of solar power and alternative energy sources for electricity and boreholes for water, maintaining regular contact and collaborations with health authorities on school safety, health and hygiene, developing appropriate mental health and psychosocial support services (through guidance and counselling services including other care services) that addressed stigmatization and discrimination to assist learners, teachers, administrators and other education personnel and their families to cope with the effects of COVID-19 and continued uncertainties of the pandemic, establishing efficient monitoring and evaluation frameworks, monitoring teams, tools, and schedules to track and report progress on safe reopening and operations, encouraging digital inclusion so that poor and vulnerable learners have access to technology for learning, monitoring, tracking progress, and providing feedback in accordance with the M&E framework (Monitoring and Evaluation) for safe school, moving lessons outdoors as much as possible, paying salaries on time, deploying new school resources, maintaining infrastructure and upgrading existing school facilities in order to cope with similar outbreaks, constant fumigation of schools for security and school fencing and gate (was integral to controlling alternative learning timetables and managing social distancing); they were all proposed and provided by the federal ministry as COVID-19 security care guidelines requisite for monitoring and management of educational institutions (Federal Ministry of Education -FME, 2020). In as much the above school health and security care services were indicated by the Federal Ministry of Education and WHO, observations from Delta State showcases that many secondary schools (both urban and rural schools) at their various location completely failed to comply with these directives and guidelines. Many schools' facilities in Delta State and beyond during the COVID-19 pandemic era were still

overcrowded, infrastructure not sufficiently mobilize, not adequately upgrade, extended or maintained in schools and the social distancing not proper implemented. Most of the alternative learning models provided were not effectively and well-implemented in the schools. Also, the COVID-19 protocols and good hygiene practices were not well-implemented (Eze, Sefotho, Onyishi & Eseadi; Obiako & Adeniran, 2020; FME, 2020; UNICEF, 2020). This situation which was not only peculiar in Delta State had grievous negative effective and consequences on human health and security in the school, therefore, demanding the need to examine the health care and security services needed in the secondary schools. However, the public secondary schools in Delta State associated with such management challenges as regards to their large excessive class sizes, over crowdedness of students in the classrooms, infrastructural problems and funding challenges (Akinsuroju, Adeniyi & Anyanwu, 2022; FME, 2020; Ilesanmi & Afolabi, 2021; Obiakor & Adeniran, 2020; Sanni, Offiong, Anigilaje, Airede & Imam, 2021) raises much concern in this study. In as much as the public secondary schools being established and owned by the Delta State government seem to have been effectively managed and gone head of their private school counterparts (in terms of effective school management) during the COVID-19 pandemic era, yet, the public secondary schools were grossly found wanting and deficient in maintaining the COVID-19 protocols and guidelines which became a threat to effective health care service delivery and the promotion of security services in the schools.

Sanni, Offiong, Anigilaje, Airede and Imam, (2021) in their study reported that the public school student ratios was more than six times that of private schools causing over crowdedness in the classrooms. Few and limited number of schools employed qualified health personnel and conducted health talks for communicable disease control. Also, the use of temporary isolation and school-based immunization were low. Pipe-borne water access was only present in 4 of 10 schools, with public schools having more limited access than the private schools. Similarly, less proportion of public schools had access to soap for handwashing. Adequate classroom ventilation was still lacking in the public schools, with private schools having more limited ventilation. Given the COVID-19 pandemic era, its difficulties and challenges, all educational institutions including the secondary schools in Delta State by deploying effective management practices are encouraged to ensure school safety of students and teachers within the school environment through the provision of adequate health care delivery and security services. From all the foregoing discussions, it however becomes essential and necessary for the researchers who were motivated by the ugly situations in Delta State to examine the health care and security services needed in schools during the COVID-19 pandemic era. Although several empirical studies were conducted and carried out during the COVID-19 pandemic era, most of these studies such as those of Akinsuroju, Adeniyi and Anyanwu (2022), Eze, Sefotho, Onyishi and Eseadi (2021), Obiakor and Adeniran (2020) and Ogunode (2020), mainly focused on the impact of the COVID-19 pandemic crisis on the educational system. These empirical studies were found lacking and did not delve into the aspect of investigating school health and security care services needed in schools, especially in Delta State; hence the need for this present study. It is therefore, upon this background that the present study sought to investigate and find out the school

health care and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era.

Statement of the Problem

Secondary schools including those in Delta State prepares students for their respective career choices in higher education institutions. It is however the responsibility of schools to ensure that safety of life and properties are highly and adequately guaranteed in the school environment. The secondary schools while thriving to meet up with the educational needs of both the students and their communities, operate an open system in which they are equally open and exposed to every kind of health and security threats and challenges coming from inside and outside of the school environment. Due to the socio-economic, environmental and cultural conditions of the society during this COVID-19 pandemic era, various individual or group threats may be consciously or unconsciously exerted on schools. Schools may also be exposed to pandemic diseases and many other security threats. It is however, the responsibility of the different authorities and leadership of the school to ensure that adequate care services such as the health care and security services are well-provided and implemented for school safety. But a glance at the management of secondary schools in Delta State showcases that many of the public secondary schools are in a very bad condition and shape because many of these health care and security services are lacking in many schools. Many schools especially do not are during this COVID-19 pandemic era do not observe the COVID-19 protocols and guidelines. Also, most school are without effective security guards, fence and gates, and are equally overcrowded in the classrooms, among many others. This problem and ugly situation in Delta State public secondary schools poses a lot of health and security threats for all the school personnel, therefore, calling for absolute redress in order to fill all gaps. This need to address the school health care and security services needed for management of public secondary schools in Delta State has created a gap which should be filled by the present study. Hence, the need to solve this problem.

Purpose of the Study

The purpose of this study was to determine school health care and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. Specifically, the objectives of this study aimed at finding out and discovering;

1. The school health care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era.
2. The school security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era.

Research Questions

The following research questions guided this present study;

1. What are the school health care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era?
2. What are the school security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era?

Methodology

A descriptive survey research design was employed in the study. This design was employed in order to retrieve data from a sample of secondary school principals and teachers in Delta State from their population using a research instrument (that is, questionnaire) as regards to the present study, thereafter, conclusion and generalization were drawn based on the findings. Population for the study comprised 466 principals and 11,442 teachers from the 466 public secondary schools in Delta State. The choice of selecting both principals and teachers' population in the public secondary schools was based on the premise that they were in better position to describe and give account of things concerning the area of study. Sample size of the study entailed a total of 898 respondents which consisted of 326 principals and 572 teachers from 326 public secondary schools in Delta State selected at 70% and 5% respectively, using the purposive sampling technique. Instrument for data collection was a 30-item questionnaire developed by the researchers, structured on a 4-point scale of Highly Needed (HN), Needed (N), Less Needed (LN) and Not Needed (NN) and titled: "School Health Care and Security Services Questionnaire (SHCSSQ). Construction of this research instrument was guided by the purpose of the study, research questions and several literatures consulted.

The instrument was face validated by three experts from the Health and Safety Education Department, Educational Management and Foundations Department, and one Measurement and Evaluation expert; all from the Faculty of Education, Delta State University, Abraka. These experts made useful corrections on the questionnaire in terms of the sentence construction, suitability and clarity, which were incorporated before the final print out of the research instrument. Reliability of the research instrument was established through a pilot-test sampling 7 principals and 35 teachers from seven of the public secondary schools in Edo State. Data gathered from the pilot-test conducted were analyzed using Cronbach Alpha method. This yielded coefficients' reliability values of 0.89 and 0.91 for the two clusters which were added up to give an overall coefficient internal consistency of 0.90, showing that the questionnaire was reliable to collect the necessary data for the study. An on-the-spot method was also adopted by the researchers with the help of three research assistants in order to distribute the questionnaire to the respondents. These research assistants were also familiar with locations of schools selected for sampling, and they communicated with the principals and teachers who filled and returned the questionnaire immediately. All the 898 copies of the questionnaire distributed to the respondents were recovered back by the researcher and research assistants at a return rate of 100%. Data gathered and collated were analyzed using mean statistics rated at 2.50 and standard deviation. The decision rule for taking decisions on the items on the questionnaire rated at 2.50 was that any mean score which rated at 2.50 and above was considered as needed; and any mean score that rated below 2.50 was seen as not needed.

Results

Research Question 1: What are the school health care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era?

Table 1: Mean Scores and Standard Deviation of Principals and Teachers on the School Health Care Services Needed for the Management of Public Secondary Schools in Delta State during the COVID-19 Pandemic Era

N = 898 (326 Principals and 572 Teachers)

| S/N | STATEMENTS | PRINCIPALS | | | TEACHERS | | |
|--------------------------------------|---|-------------|-------------|-------------------|-------------|-------------|-------------------|
| | | X | SD | DECISION | X | SD | DECISION |
| 1. | Please select from the under listed to give your opinion concerning the school health care services needed in the school: Constant sanitation in the school in terms of fumigation, bush clearing, cleaning of buildings including classrooms, sweeping the compound | 2.94 | 0.92 | Needed | 3.20 | 0.77 | Needed |
| 2. | Cross-ventilation in premises such as offices, classrooms, hostels | 2.86 | 1.00 | Needed | 3.42 | 0.68 | Needed |
| 3. | Immunization practices as regards to vaccination against viruses including other communicable diseases | 3.11 | 0.80 | Needed | 3.45 | 0.70 | Needed |
| 4. | Improvement in school feeding programme for good nutrition through proper food preparation from school vendors | 2.98 | 0.86 | Needed | 3.17 | 0.85 | Needed |
| 5. | Constant routine medical screening test/examination including at the point of pre-entry into the school | 2.89 | 1.01 | Needed | 3.09 | 0.86 | Needed |
| 6. | Appointment of school health committee to ensure implementation of the School Health Programme (SHP) | 2.99 | 0.93 | Needed | 2.84 | 0.98 | Needed |
| 7. | Keeping adequate track of students' medical history including records | 2.88 | 0.92 | Needed | 2.77 | 0.92 | Needed |
| 8. | Provision of well-equipped school clinic, dispensary including sickbay with adequate health facilities, constant supply of drugs | 2.82 | 0.99 | Needed | 2.60 | 1.05 | Needed |
| 9. | Use of thermometers to check temperature constantly | 3.20 | 0.86 | Needed | 3.00 | 0.84 | Needed |
| 10. | Maintaining good health habit and hygiene such as constant hand washing | 3.03 | 0.98 | Needed | 2.89 | 0.96 | Needed |
| 11. | Maintaining adequate spacing for 3 meters social distancing in the classroom | 2.84 | 1.01 | Needed | 3.22 | 0.79 | Needed |
| 12. | Regular usage of detergents, disinfectants in school | 2.77 | 1.00 | Needed | 3.06 | 0.88 | Needed |
| 13. | Constant use of hand sanitizers | 2.86 | 0.93 | Needed | 3.03 | 0.94 | Needed |
| 14. | Strictly enforcing constant use of face masks at all times | 2.13 | 0.75 | Not Needed | 2.36 | 0.98 | Not Needed |
| 15. | Providing well-equipped first aid box for emergency purpose | 2.87 | 0.97 | Needed | 2.99 | 0.95 | Needed |
| 16. | Promoting sports activities in schools through adequate provision of facilities | 3.02 | 0.70 | Needed | 3.03 | 0.88 | Needed |
| 17. | Organizing constant health care counselling talks from health personnel concerning COVID-19 prevention including other communicable diseases | 2.92 | 0.86 | Needed | 2.83 | 1.06 | Needed |
| 18. | Provision of adequate basic health amenities in school such as safe water points, boreholes, gender fitting toilets for both male and female teachers including staff | 3.29 | 0.78 | Needed | 2.99 | 0.86 | Needed |
| 19. | Adequate provision of full Personal Protective Equipment (PPE) attire | 2.42 | 1.01 | Not Needed | 2.30 | 1.03 | Not Needed |
| Overall Mean Score & SD = | | 2.89 | 0.95 | Needed | 2.96 | 0.95 | Needed |

Analysis of data from above Table 1 shows that items 1 to 13 and 15 to 18 were rated above 2.50 of the acceptable mean score by the respondents (that is, principals and teachers) in order to show their agreement with the statements. Only items 14 and 19 were rated below 2.50 of the acceptable mean score by both respondents in order to show their disagreement with the statements. This results also indicated that both the principals and teachers reacted positively to many of the items in the table. The overall mean score and standard deviation (SD) of 2.89 and 0.95 for the principals; 2.96 and 0.95 for the teachers equally showcases small variance in their means responses; indicating school health care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era.

Research Question 2 What are the school security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era?

Table 2: Mean Scores and Standard Deviation of Principals and Teachers on the School Security Services Needed for the Management of Public Secondary Schools in Delta State during the COVID-19 Pandemic Era

N = 898 (326 Principals and 572 Teachers)

| S/N | STATEMENTS | PRINCIPALS | | | TEACHERS | | |
|-----|---|------------|------|---------------|----------|------|---------------|
| | | X | SD | DECISION | X | SD | DECISION |
| 20. | Please select from the under listed to give your opinion concerning the school security care services needed in the school: Construction of appropriate school fence with gate to checkmate visitors | 3.12 | 0.88 | Needed | 3.06 | 0.91 | Needed |
| 21. | Providing adequate school security guards in school to constantly monitor students' common areas like playground, etc | 3.25 | 0.70 | Needed | 3.48 | 0.64 | Needed |
| 22. | Mounting CCTV cameras at every corner to checkmate activities going on in school | 2.87 | 1.00 | Needed | 3.31 | 0.91 | Needed |

| | | | | | | | |
|-------------------------------------|--|-------------|-------------|-------------------|-------------|-------------|-------------------|
| 23. | School personnel sensitization programmes on COVID-19 protocols with other preventive measures for school security | 3.22 | 0.71 | Needed | 3.42 | 0.67 | Needed |
| 24. | Construction of isolation center for emergency cases | 2.09 | 0.98 | Not Needed | 2.14 | 1.10 | Not Needed |
| 25. | Consistency in use of effective guidance and counselling care services including other care services for traumatized including problematic cases | 3.25 | 0.64 | Needed | 3.49 | 0.62 | Needed |
| 26. | Expansion of classroom including boarding accommodation to avoid over crowdedness in order to improve security | 2.68 | 1.05 | Needed | 3.23 | 0.96 | Needed |
| 27. | Improvement in students' large population to reduce class size in the school | 3.21 | 0.69 | Needed | 3.43 | 0.65 | Needed |
| 28. | Adoption of alternate learning models such outdoor learning, staggered attendance, platooning, creative delivery | 3.05 | 0.90 | Needed | 3.23 | 0.78 | Needed |
| 29. | Provision of WASH facilities in order to promote school security | 3.43 | 0.74 | Needed | 3.38 | 0.67 | Needed |
| 30. | Positive intervention programmes to prevent anti-social behaviour in school | 3.16 | 0.75 | Needed | 3.29 | 0.66 | Needed |
| Overall Mean Score& SD = | | 3.13 | 0.84 | Needed | 3.22 | 0.87 | Needed |

Analysis of data from above Table 2 shows that items 20 to 23 and 25 to 30 were rated above 2.50 of the acceptable mean score by the respondents (that is, principals and teachers) in order to show their agreement with the statements. Only item 24 was rated below 2.50 of the acceptable mean score by both respondents in order to show their disagreement with this statement. This results also indicated that both the principals and teachers reacted positively to many of the items in the table. The overall mean score and standard deviation (SD) of 3.13 and 0.84 for the principals; 3.22 and 0.87 for the teachers equally showcases small variance in their means responses; indicating school security care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era.

Discussions

Findings of this present study generally indicated school health care services and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. It was also discovered through one of the findings that school care services needed in the public secondary schools in Delta State included: Constant sanitation in the school in terms of constant fumigation, bush clearing, cleaning of buildings including classrooms and sweeping of the school compound; Cross-ventilation in premises such as offices, classrooms and hostels; Immunization practices as regards to vaccination against viruses including other communicable diseases; Improvement in school feeding programme for good nutrition through proper food preparation from school vendors; Constant routine medical screening test/examination including at the point of pre-entry into the school; Appointment of school health committee to ensure implementation of the School Health Programme (SHP); Keeping adequate track of students' medical history including records; Provision of well-equipped school clinic, dispensary including sickbay with adequate health facilities, constant supply of drugs; Use of thermometers to check temperature constantly; Maintaining good health habit and hygiene such as constant hand washing; Maintaining adequate spacing for 3 meters social distancing in the classroom; Regular usage of detergents, disinfectants in school; Constant use of hand sanitizers; Providing well-equipped first aid box for emergency purpose; Promoting sports activities in schools through adequate provision of facilities; Organizing constant health care counselling talks from health personnel concerning COVID-19 prevention including other communicable diseases; and Provision of adequate basic health amenities in school such as safe water points, boreholes, gender fitting toilets for both male and female teachers including staff. When all these service are adequately and efficiently provided in the public secondary schools, this will lead to both safeties of staff and students in the school environment. The finding of the study also revealed that such health care services as strictly enforcing constant use of face masks at all times; and adequate provision of full Personal Protective Equipment (PPE) attire for school personnel, were not needed in the schools. This is so

because the school personnel complained about been suffocated and difficulties in breathing when in use of these health materials.

This finding corroborates with Sanni, Offiong, Anigilaje, Airede and Imam, (2021) study which found out that the public school student ratios was more than six times that of private schools causing over crowdedness in the classrooms. Few and limited number of schools employed qualified health personnel and conducted health talks for communicable disease control. Also, the use of temporary isolation and school-based immunization were low. Pipe-borne water access was only present in 4 of 10 schools, with public schools having more limited access than the private schools. Similarly, less proportion of public schools had access to soap for handwashing. Adequate classroom ventilation was still lacking in the public schools, with private schools having more limited ventilation. All the above situations posed great risk for students' health and security in school, therefore showing that these health and security care services were mostly needed in the schools. Jiya, Jiya, Ibitoye, Umar, Baba, Adamu and Isezuo (2020) found out that school health care services were also needed in the schools but their provisions were very poor in the public schools. And there was the need to urgently improve health services in schools in Sokoto town. It was also therefore found out in this previous study the main treatment facilities were first aid box 47(88.7%) and essential drugs 37(69.8%). Availability of essential drugs was significantly ($p=0.02$) higher in private schools. Care of emergency illness or injury was mainly 45(84.9%) via first aid treatment with no records kept in 26(49.1%) of the schools. Method of controlling communicable diseases was mainly 40(75.5%) by sending children home, and significantly higher ($p=0.01$) in private schools. Only 12 (22.6%) schools provided school meals. 31(58.5%) schools scored below minimum acceptable score and there was no difference ($p=0.4$) between the scores of the public and private schools. The need for school health care services in schools have equally been confirmed in Olatunya, Oseni, Olaleye, Olatunya, Akani and Oyelami (2015) study which found out that school health care service implementation was inadequate and needed in the study area and was worse in the public schools. Therefore, the need for collaborative interventions by stakeholders to enhance effective SHS in the area. Limited number of the public schools had first aid boxes. Health personnel, medical screening tests for pupils and sick bays were available in only six (9.4%), five (7.8%) and four (6.3%) schools respectively. School meals although offered in all schools but not effective. Alafin, Adesegun, Izang and Alausa (2019) study corroborated with Olatunya et al (2015) and confirmed school health services needed in the schools. It was also seen that overall, the schools had a fair School Health Programme in place, although they were deficient in some vital facilities. It is necessary for all stakeholders in these schools to provide the materials and human resources needed to achieve an effective School Health Programme. Ilesanmi and Afolabi (2021) study found out that in a bid to ensure that school children and students are academically equipped, and measures such as adequate ventilation, handwashing, social distancing, and increased infrastructure need to be adequately implemented and fully integrated to ensure that school reopening does not result to a spike in COVID-19 cases and fatalities in Nigeria. The finding of this present study equally agrees and concurs with the Federal Ministry of Education (FME, 2020) long listed COVID-19 guidelines, measures, protocols and directives previously outlined and provided for school

operations and safety during reopening at the pandemic era. All these COVID-19 guidelines and protocol impacted positively on the management of schools which is likely to promote effective health care services.

The finding of this study further revealed the security care services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. They included; Providing adequate school security guards in school to constantly monitor students' common areas like playground, etc; Mounting CCTV cameras at every corner to checkmate activities going on in school; and Organizing school personnel sensitization programmes on COVID-19 protocols with other preventive measures for school security. Construction of isolation center for emergency cases was not needed in the public secondary schools. Further needed in the schools were; Consistency in use of effective guidance and counselling care services including other care services for traumatized including problematic cases; Expansion of classroom including boarding accommodation to avoid over crowdedness in order to improve security; Improvement in students' large population to reduce class size in the school; Adoption of alternate learning models such outdoor learning, staggered attendance, platooning, creative delivery; Provision of WASH facilities in order to promote school security; and Positive intervention programmes to prevent anti-social behaviour in school. This finding agrees and corroborates with the directives and guidelines provided by the Federal Ministry of Education (FME, 2020) on school security during the COVID-19 pandemic era. On the need for security care services, Ozmena, Durb and Akgul (2010) study found out that the school managers and teachers indicated some security problems at schools. This finding revealed that there were serious security gaps and problems at schools. Another attention drawn was that the managers and teachers generally shared mutual concerns and thoughts related to school security problems. Insufficiencies have been seen in all the security areas in this research. There were problems in school training activities, school support services, emergency action plan, social and sport activities. This finding agrees with the previous study of Geyin (2007) which revealed that 90% of teachers did not have any training on security and the school physical conditions were not adequate, as well. The finding indicated that there were various and serious problem sources threatening school security calling for the need for deployment of effective security care services at the schools.

Conclusion

School health care and security services are very essential educational support services vital for effective management of the public secondary schools especially during the COVID-19 pandemic era. These two services which guarantees schools safety have been found not adequately provided in the public secondary schools. However, the study submits and concludes that there are very many school health care services and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era. Failure to sufficiently provide these health care and security services in the public schools has great negative effect and consequences towards granting safety and securing the lives of people and properties within the school premises both now and in the future. Now is the right time to focus adequate attention towards school health care and security services needed for the management of public secondary schools in Delta State during the COVID-19 pandemic era and beyond for attainment of academic excellence in schools.

Recommendations

The following recommendations were made based on the findings of this study;

1. Delta State government should consistently provide adequate funds for provision of the needed health care services for effective management of the public secondary schools in Delta State during the COVID-19 pandemic era. Also, the school health and security policies should be well-implemented for effective management of secondary schools in Delta State during and after the COVID-19 pandemic era.
2. Secondary school principals with assistance from the Post Primary Education Board (PPEB) should solicit support from the private sectors and financial institutions which includes investors, individuals, banks and security agencies so as to make adequate provision of the needed security care services for effective management of the public secondary schools in Delta State during the COVID-19 pandemic era.

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