

Healthy School Environment: Implication on Learning

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Abstract

Education is very vital to the society at large and it can be affected by the condition of the environment in which learning takes place. A school is a place where learning takes place. The state of the school environment can either engender or hamper learning. Eight schools were randomly selected from both public and private schools, 25 students were selected from each school. The research instrument used for the study was self-structured questionnaire titled School Health Questionnaire. There were two sections in the questionnaire; section A elicited information on demographic variables while section B sought responses on the state of school health. 200 questionnaires were administered. The respondents were 100 from public schools and 100 from private schools. There were 72 males, 111 females with 17 not indicating gender. Test-retest reliability was used to establish the reliability coefficient of 0.72. The study adopted descriptive survey research design. The research questions were analyzed using percentages, mean and standard deviation. The study found out that the improvement of school health was more of private schools' priority than public schools. It was recommended that public schools' health should be one of the major priorities of the government. Teachers specially trained in health education should be employed and necessary amenities should be provided to maintain a healthy school environment.

Keywords: School Health, Learning environment, School

Introduction

Education is very vital to the society at large and it can be affected by the condition of the environment in which learning takes place. A school can be defined as an educational institution intended to provide learning spaces for the teaching of students under the supervision of teachers (Roser, Max; Ortiz-Ospina, Esteban 2019). There is a significant relationship between education and health. Poor health has an adverse effect on education through absenteeism, lack of concentration to learning, poor academic performance which may eventually lead to school drop-out. Investing in the health of children is a contributory and prudent way of ensuring the health of the future.

The healthy school environment can be defined as a place of study where all efforts are carefully planned, organized and executed to ensure safety and healthy living conditions of all members of the school community. The aims of having healthy school environment are to create a healthy and safe learning environment in the school, provide adequate safe water supply and sanitation facilities for use in the schools. The physical school environment includes the school building and all its contents which comprises physical structures, infrastructure, furniture and the use and presence of chemicals and biological agents; the site on which a school is located and the surrounding environment including air, water and materials which children may come into contact with, as well as nearby land uses, roadways and other hazards (Amoran, Kupoluyi Salako and Kupoluyi (2017). World Health Organization estimates that between 25% and 33% of the global burden of disease can be attributed to

environmental risk factors (Smith, Corvalan and Kiellstrom 1999 cited by Amoran, Kupoluyi Salako and Kupoluyi (2017).

To ensure healthy environment for learning, the Federal Ministry of Education formulated a policy which is the National School Health Policy (NSHP). It was ratified and adopted in Nigeria in 2006 in order to act as a guide to the implementation of the School Health Programme (SHP) to see to the upkeep and upgrading of the health of children in school. School Health Programme is defined as the group of coordinated activities that contribute to the understanding, maintenance and improvement of the health of the school population. It is a potential way of achieving a widespread impact on the health of a large number of children. It is also an effective and viable way to deliver both health and education to children and their families (Ezeonu, Asiegbu, Arua, Edafighor, Una, Anyansi, and Onwe (2021). According to Ibenegbu (2017), school health programme is a document that provides the whole health structure for educational institutions. This programme must follow the recommendations of world health organization. It was further affirmed that the school health programme of any country is a set of projects or activities in the school environment that promotes the development and health of the school community. Lagos State Government (2017) submits that the school health programme was designed to ensure that the school pupils are as healthy as possible and to obtain maximum benefits from the environment that is safe and conducive for learning.

School Health Programme is saddled with the responsibility of helping to ensure that children enroll and stay in schools, teach them how to develop healthy skills and

behaviours that can prevent occurrence of diseases and to keep them informed about health issues around them. School Health Programme aims at inculcating healthy habits into the child which he should maintain through his life by personal efforts (Roser, Max; Ortiz-Ospina, and Esteban 2019). The recommendations for the school health programme were spelt out at the world education forum held in April 2000 at Dakar. This forum launched a new strategy for achieving the effectiveness of school health in all countries of the world. The strategy was named Focusing Resources on Effective School Health (FRESH). It promotes school-based nutrition, water, good environment and sanitation.

World Health Organization (WHO) recommendations are as follows: implementing a healthy learning environment, integrating education and health officials into the school life, providing a healthy environment, improving the health of students' community and school personnel, building facilities according to the principles of social justice, stable eco-system, gender equity, food, education and peace; preventing leading causes of death and diseases. The main goal of the school health programme is to improve the health of learners and teaching staff. The objectives of Nigeria in order to achieve the goals of school health programme include, building the health skills of students and teaching staff, promoting the collaborations between the schools and health related organizations, promoting the awareness of students on health-related issues in the country, ensuring the utilization of various health related facilities in the school community and develop the health consciousness of the students (Ibenegbu, 2017).

Population Health Division (2022) is of the opinion that healthy habits prevent germs and infectious diseases from spreading. Infections are caused by microscopic organisms known as pathogens. They include bacteria, viruses, fungi and they can also be parasites that live in the body or outside the body such as worms, lice, bedbugs and so on (Harvard Medical School 2021). Most microbes enter through openings in the body such as nose, mouth, ear, anus and genital passages. The microbes can also get into the body through the skin or through insect or animal bites. The best way to prevent infections is to block pathogens from entering the body. Good personal hygiene keeps germs away. Hand washing is very vital as our hands are often coming in contact with the openings of the body. Hands must be properly washed after using the toilet, coughing, sneezing, blowing of nose, yawning, before preparing food, eating, gardening, feeding or touching pets, visiting or carrying a sick person. Amoran, Kupoluyi Salako and Kupoluyi (2017) found out that the environmental health situation in Nigerian schools is poor and there is the need for patrol teams to inspect and monitor the activities of the schools in Nigeria and other developing countries. Ezeonu, Asiegbo, Arua, Edafioghor, Una, Anyansi, and Onwe (2021) in their study found low level of awareness of the existence of a National School Health Policy among head teachers, low provision of first aid in schools, insufficient water supply which affects sanitation and general hygiene of the school.

According to Obembe, Osungbade and Ademokun, (2016) importance of school health is to provide emergency care for illness or injury while still in school, ensure

that all students get appropriate referrals to health care providers, monitor for and control the spread of communicable disease, provide education and counselling in a variety of health and wellness topics, serve as a medical resource in the development of policies and procedures in the school and improve the health of learners and teaching staff.

Learning is a relatively lasting change in behavior that is the outcome of experience. It is the acquisition of information, knowledge, and skills. Learning is an ongoing process that takes place throughout life, and it is not confined to the classroom. Learning means retaining the knowledge that you gained. The learning process begins when you have a new experience, whether that is reading a new word, listening to someone explain a concept, or trying a new method for solving a problem. The process of learning is not always the same, learning can happen in a wide variety of ways. Access to learning opportunities and aspects of the learning environment play a role in how people learn (Cherry, 2022). A learning environment is more than just a classroom. It is a space in which students feel safe and supported in their pursuit of knowledge, as well as inspired by their surroundings (WGU, 2021). A healthy learning environment is expected to be provided in order to avoid any distraction to learning. Healthy school environment will build psychological and emotionally confidence in learners as they have the enthusiasm to go to school. The quality and condition of the schools have a direct correlation to the health and well-being of the students. Ventilation is vital in school buildings. Poor ventilation has been shown to increase respiratory illness among students, which

may eventually lead to lower daily attendance rates, and even lead to higher rates of truancy. Staff and students can contribute to the daily cleanliness of the school facilities by practicing hygienic habit. The school should be kept free from pests and irritants. Schools' sanitation officers are often involved in keeping learning environments and spaces clean and disinfected.

Amoran, Kupoluyi, Salako and Kupoluyi (2017) found out that the environmental health situation in Nigerian schools is poor. Akani, Nkanginieme, and Oruamabo (2001) are of the opinion that, School Health Programme (SHP) refers to all aspects of school programmes which contribute to the understanding, maintenance and improvement of the health of the school population. It consists of school health services, school health instruction and a healthy school environment. School health services, deal with health appraisals, control of communicable diseases, record keeping, supervision of the health of school children and personnel. School health instruction provides a formal classroom opportunity for passing on information concerning knowledge, habits, attitudes, practices and conducts that pertain to individual or group health while a healthful school environment deals with conditions within the school that are most conducive to optimal physical, mental and emotional health, safety of pupils, satisfactory relations among pupils, teachers and administrators.

Bisi-Onyemaechi (2003) carried out a study and found out that the commonest source of water for most of the schools was well. Some schools dump their refuse openly. Only few public schools had

functional toilets. Some schools were completely dilapidated while some schools had no ceiling. Some schools were not provided with soaps for hand washing. Most of the schools were well ventilated while some had poor ventilation. Sewage disposal structures were available in most schools but some were not functional. The ratio of the students using the available toilets was about 1:95, which was not proper enough.

Objectives

Three research questions were raised for the purpose of this study. The research questions are:

1. What is the contribution of schools to promoting personal hygiene?
2. To what extent do schools maintain available health facilities?
3. What are the measures put in place to prevent infectious diseases?

Methodology

The study was a descriptive, survey, carried out in Lagelu local government area of Oyo state southwestern state of Nigeria. Simple random sampling technique was adopted for the study, this is to give the population an equal chance of being selected. Eight schools were randomly selected from both public and private schools and all the students in the selected schools were well represented in the sampling. The research instrument used for the study was a self-constructed questionnaire titled School Health Questionnaire (SHQ). To establish reliability, the instrument was first administered to selected sample students in Oba Akinyele Memorial High School, Ibadan. Test-retest reliability was used to establish the reliability coefficient of 0.72. Twenty-five copies of the instrument were administered in each school making two hundred copies in all. The data were analysed using SPSS. The result was presented in simple percentages using tables.

Results:

RQ1. What is the contribution of schools in promoting personal hygiene?

Table 1: showing Contribution of schools in promoting personal hygiene?

| ITEMS | SA | A | D | SD | MEAN | STD |
|---|-------------|--------------|-------------|-------------|------|------|
| Adequate water supply 1, 3 | 63 31.5% | 116 58.0% | 17 8.5% | 4 2.0% | 1.81 | 0.67 |
| There are good and functioning toilets in my school 1, 3 | 56 28.0% | 87 43.5% | 41 20.5% | 16 8.0% | 2.10 | 0.90 |
| There are hand washing basins in my school 1, 3 | 87 43.5% | 93 46.5% | 12 6.0% | 8 4.0% | 1.71 | 0.76 |
| Soap and sanitizers are made available always 1, 3 | 50 25.0% | 97 48.5% | 44 22.0% | 9 4.5% | 2.10 | 0.81 |
| Health talk programme regularly organized in my school 1, 3 | 34 17.0% | 89 44.5% | 46 23.0% | 31 15.5% | 2.40 | 0.94 |
| Nose mask is regularly worn 1, 3 | 36 18.0% | 76 38.0% | 67 33.5% | 21 10.5% | 2.37 | 0.90 |
| I feel safe in my school 1 | 80 40% | 91 45.5% | 14 7.0% | 15 7.5% | 1.82 | 0.86 |

The results showing from the above table indicate that 89.5% of the respondents strongly agreed that there is an adequate water supply in their schools while 10.5% disagreed. Also, 71.5% of the respondents agreed that there are good and functioning toilets in their school while 28.5 disagreed. In addition, 90% of the respondents agreed that there are hand washing basins in their school while 10% disagreed. Furthermore, 73.5% of the respondents agreed that soap and sanitizers are made available always in their school while 26.5% disagreed.

Another result generated was that 61.5% of the respondents agreed that the health talk programme is being regularly organized in their school while 38.5% disagreed. Also, 56% of the respondents agreed that nose masks are regularly worn in their school while 44% disagreed. 85.5% of the respondents agreed that they feel safe in their school while 14.5 disagreed.

RQ 2: To what extent do schools maintain available health facilities?

Table 2 : showing maintenance of schools' available health facilities.

| ITEMS | SA | A | D | SD | MEAN | STD |
|--|-------------|--------------|-------------|--------------|------|------|
| We urinate and defecate in the bush in my school 2 | 17 8.5% | 26 13.0% | 49 24.5% | 108 54.0% | 3.24 | 0.98 |
| Classroom are over -crowded in my school 2,3 | 25 12.5% | 38 19.0% | 71 35.5% | 66 33.0% | 2.89 | 1.01 |
| Refuse is properly disposed in my school 2,3 | 62 31.0% | 92 46.0% | 26 13.0% | 20 10.0% | 2.22 | 3.10 |
| Waste bins are always used to collect refuse 2,3 | 83 41.5% | 77 38.5% | 31 15.5% | 9 4.5% | 2.55 | 1.00 |
| The cleaning outfit in my school is of international standard 2,3 | 31 15.5% | 71 35.5% | 55 27.5% | 43 21.5% | 2.55 | 1.00 |
| There are people ensuring environmental cleanliness in my school 2,3 | 64 32.0% | 108 54.0% | 21 10.5% | 7 3.5% | 1.86 | 0.78 |

The above results shows, that 21.5% of the respondents agreed that they still urinate and defecate in the bush in their school while 78.5% disagreed. 31.5% of the respondents agreed that their classrooms are over-crowded while 68.5% disagreed. 77% of the respondents agreed that refuse is being properly disposed in their school while 23% disagreed. 80% of the respondents agreed that waste bins are

always used to collect refuse in their school while 20% disagreed. Also, 51% of the respondents agreed that the cleaning outfit in their school is of international standard 49% disagreed. 86% of the respondents agreed that there are people ensuring environmental cleanliness in their school while 14% disagreed.

Rq3: What are the measures put in place to prevent infectious diseases?

Table 3: Measures put in place to prevent infectious diseases?

| | | | | | | |
|--|-------------|--------------|-------------|-------------|------|------|
| Well-equipped school against infectious diseases 3 | 78 39.0% | 85 42.5% | 26 13.0% | 11 5.5% | 1.85 | 0.85 |
| Well-equipped sick bay/clinic is available for first aid 3 | 32 16.0% | 58 29.0% | 55 27.5% | 55 27.5% | 2.67 | 1.05 |
| There are temperature-checking equipment in the school 3 | 46 23.0% | 83 41.5% | 55 27.5% | 16 8.0% | 2.21 | 0.89 |
| Available well equipped first aid box 3 | 73 36.5% | 91 45.5% | 27 13.5% | 9 4.5% | 1.86 | 0.82 |
| Medical expert(s) are available in my school 3 | 29 14.5% | 35 17.5% | 75 37.5% | 61 30.5% | 2.84 | 1.02 |
| The classrooms in my school are well ventilated 3 | 90 45.0% | 63 31.5% | 29 14.5% | 18 9.0% | 1.88 | 0.97 |
| There are fans to cool the classrooms 3 | 57 28.5% | 62 31.0% | 50 25.0% | 31 15.5% | 2.28 | 1.04 |
| Classroom arrangement considers social distancing 3 | 50 25.0% | 78 39.0% | 50 25.0% | 22 11.0% | 2.22 | 0.95 |
| Food and other consumables are sold in clean environment 3 | 65 32.5% | 101 50.5% | 25 12.5% | 9 4.5% | 1.89 | 0.79 |

The results of research question 3 above shows that 81.5%, of the respondents agreed that their schools are well equipped against infectious diseases while 18.5% disagreed. Also, 45% of the respondents agreed that their schools have well equipped sick bay while 55% disagreed. Furthermore 64.5% of the respondents agreed that they have temperature-checking equipment in the school while 35.5% disagreed. 82% of the respondents agreed that they have well equipped first aid box while 18% disagreed. 32% of the respondents agreed that they have medical experts in their school while 68% disagreed. 76.5% of the respondents agreed that their classrooms are well ventilated while 22.5% disagreed. 59.5% of the respondents agreed that there are fans to cool the classrooms while 40.5%disagreed. 64% of the respondents agreed that their classroom arrangement gives room for social distancing while 36% disagreed. Lastly 83% of the respondents agreed that Food and other consumables are sold in clean environment while 17% disagreed.

Discussion

The result shows that a larger percentage of respondents agreed that their schools contribute to the promotion of personal hygiene. Although, in some instances, there were cases of shortage of water, lack of good and functional toilets, shortage of soap and hand sanitizers, lack of regular health talk and lack of hand washing basins. Since the above result is not showing total compliance, this negates the opinion of Obembe, Osungbade and Ademokun, (2016) who submitted that importance of school health is to provide emergency care for illness or injury while still in school, ensure that all students get appropriate referrals to health care providers, monitor for and control the spread of communicable diseases, provide education and counselling in a variety of health and wellness topics. still in school, ensure that all students get appropriate referrals to health care providers, monitor for and control the spread of communicable diseases, provide education and counselling in a variety of health and wellness topics.

The above results indicate that the larger percentage of schools are trying as much as possible to maintain available health facilities. The results negate the findings of Amoran, Kupoluyi Salako and Kupoluyi (2017) who found out that the environmental health situation in Nigerian schools is poor and there is the need for patrol teams to inspect and monitor the activities of the schools in Nigeria and other developing countries. However, some are still indicating that the health facilities in their own schools are not properly maintained. This still calls for caution because infection from a single person can affect very large number of people. It has been observed from the respondents that the school health is being given some attention in Nigerian schools. However, the practice of personal hygiene is no longer taken seriously like the period of pandemic, some schools have relaxed the enforcement of hygiene practices that were in place during covid-19 pandemic. Students and teachers no longer wear nose masks, most of the wash hand basins are no longer functional, some of the taps are not functional. Most schools no longer observe social distancing. Although higher percentages agree to the practice of proper hygiene, few are still of the opinion that it is not properly observed in their schools. Schools are expected to still be on guard to ensure proper compliance, health safety measures. This corroborates the findings of Ezeonu, Asiegbu, Arua, Edafioghor, Una, Anyansi, and Onwe (2021) who found out that there is low level of awareness of the existence of a National School Health Policy among head teachers, low provision of first aid in schools, insufficient water supply which affects sanitation and general hygiene of the school. The fact that 55% of the respondents are

confirming that there are no sick bays and 68% do not have medical personnel call for serious caution because the issue of health should not be handled with levity.

Conclusion

A healthy school environment will engender healthy life of both the students, teachers and non-teaching staff who constitute the school community. When students and the school staff are healthy, school attendance will not be adversely affected. There are still schools where they are urinating and defecating in the bush, this may pose a lot of health hazards to the school community. The population of the school should be put into consideration in order to be able to plan adequately for a conducive learning environment. The healthy child will be able to pay attention in the classroom, which may improve learning greatly. The academic performance of such students might improve all things being equal. Furthermore, a healthy school environment may discourage truancy by arousing the interest of the students to attend school.

Recommendations

Based on this study, the following are recommended;

- There should be constant health talk to increase students' awareness to healthy environment
- There should be availability of portable water
- There must be supply of refuse disposing bins
- Sanitation officers should be employed and well monitored in schools
- There should be provision of well-equipped health facilities such as sick bay for first aid treatment

- Toilets should be made available according to the school population and should be well maintained

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