ADDRESSING THE CONTEMPORARY CHALLENGES OF SCHOOL HEALTH EDUCATION IN NIGERIA

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Abstract

The recent National School Health Policy (NSHP) and implementation guideline, government has much concerned and attention to school health education mainly to appraise, protect and promote the health of the school population most especially the school children physical, emotional and mental hazards as well as communicable diseases which are very rampant during the school period. The Nigerian government has consistently made concerted efforts at addressing the school health education in academic environment. The context of this therefore, is to address the contemporary challenges of school health education (SHE) in Nigeria. The concept of school health education and the challenges of school health education in Nigerian and their corresponding solutions where critically highlighted. Various government intervention strides in promoting health education in Nigeria as well as the functions, of school health education were discussed. The paper further examined the statutory roles and responsibilities of school health personals. discussed The paper concluded that the school health education which includes health education, physical education and other curricular areas is an organized school curriculum helps to promote, protect and sustain the health conditions of staff and student in an academic environment. It is on the above premise that the paper recommended that government and other relevant stakeholders in health sector should provide adequate human and material resources that will help in training individuals to meet with various health knowledge, attitude and practices (KAP). Also, integration of the school management and the community members should be intensified in order to ensure the successful implementation of health policies and the organization of health education in schools should be accorded the required priority at all times.

Key Words: *Community, Curriculum, Health education, Health promotion, School health.*

Introduction

School health education is referred to the specific portion of the school curriculum devoted to health education that helps to utilize participation exercises that will assist students and staff to acquire knowledge and develop the requisite attitudes and the right skills required to adopt health behavours (Ogundoju 2019). The school health education is usually in operation and its surval strength is through the national School Health Policy (NSHP). An operational procedure which is to be used as guide or a point of reference in the implementation of effective school health education as at all levels in Nigeria. The establishment of school health education as opined by Adeleye (2021) is aimed at implementing students friendly school

environment by assigning various responsibilities and roles to relevant stakeholders this is to meet up with the global trends and also meet the World Health Organization (WHO), (2006) standard for school health services School Health Education Programme is one of the strategies, put together to ensure the promotion of the health care services within the school community in order to keep the children in a state of complete, physical, emotional, mental and social well-being throughout their academic period (Clerks 2021).

This development, is to ensure an overall health development, of leanness and optimum performance of the staff. According to the context of the national school healthy policy, school health is defined as a series of harmanized project or activities in the school environment for the promotion and sustainance once of the health and development of the school community. This involves the collaborative efforts of all the relevant stakeholders which include: the school administrators, teachers, parents the immediate community, government agencies and health personnel's (Adele 2019), School health education when properly established provide preventive and curative services primarily for the promotion of the health of the staff and students. The main idea of school health education, is to help staff and student achieve maximum health condition possible so that they can benefit well from education with regards as to a healthy living situation. Njoku (2019) observed that some of the essential ingredients that school health education services may require are pre-emtry medical screening for children to ensure that they are an good health condition for good academic activities.

Concept and Objectives of Health Education

The school health education is a programe usually introduced into the schools to ensure overall healthy development of learners and optimum performance in their education. In contemporary Nigerian society school health education as opined by Ikulayo (2019), has developed from a narrower concept of health education to comprehensive health care and well-being of children throughout school years and after leaving the school health education is usually focused on the school children to ensure they are healthy as much as possible and to obtain the maximum benefit from their education within the learning environment that is safe and conducive for teaching and learning activities. The school health education is also to improve the heath condition of the learners as well as the teaching staff, hence, the school health education comprises of various components which, include formulation of school health policies as one of its components.

The school health education is basically a programme designed to improve the quality of life of the students and to develop the health consciousness among the learners.The school health education equally helps to make the children who are the primary recipients to be conscious about their health status in contemporary Nigerian society, it is not out of place to state that the school health education will help to adequately create, awareness of the availability and utilization of various health related resources within the community. The student in this regards will learn a lot of things, that will help them to maintain good health condition in the community as well as to have access to facilities or infrastructure that will promote health status and how to make use of such available resources. The school health education programme if well coordinated will help to promote collaboration in a world of inter dependence, social interaction, and

technological exposure in addressing emergent health issues with regards to development skills of the learners and staff for their health promotion dynamics in the school community (Adeleye 2020).

Ultimately, the establishment of school health education, should aim at promoting good health, both physically, and in every aspect especially in an environment that promotes the students ability to learn better. It becomes the absolute responsibility of the school management to take care of the environment in a certain level. The establishment and encouragement in ensuring good school health education is to reduce to its barest minimum humger among school children. It is very obvious that some of these children come from homes where they cannot afford to eat a proper meal a day having the school health education programme makes it possible for the children to eat a decent meal while in the school through the school nutritional programme as a good way to improve their nutritional status.

Jones (2021), pointed out that the school health education help to provide some skills to acquire personal health knowledge, health attitude and practices as well as developing disease prevention strategy in combating HIV/AIDs, mental health, maternal and child health, nutrition, drug education and knowledge of health agencies and organizations through, health education, the various health talks they are exposed to will be of great assistance to them in their homes and within their immediate community, Similarly, the idea of the school health education and often health programmes will help to build and strengthen the students capacity for effective health knowledge, attitude and practices (KAP) as well as their ability to participate and involve in a community and school health programs that will help to boost their morals and their emotional physical and mental aspect of their lives as a coping mechanism.

Challenges of School Health Education in Nigeria and Solutions

In order for Nigeria to successfully deliver high-quality education to its young population, it is important to solve the many obstacles that stand in the way of efficient school health programs. School health initiatives are essential for fostering students' wellbeing and academic achievement. To ensure that these initiatives can achieve their intended goals, though, there a number of challenges need to be resolved. Some issues that Nigerian school health programs face are examined in this article along with possible remedies (Fred 2021).

Insufficient Resources

The lack of sufficient resources is one of the main challenges that school health initiatives in Nigeria encounter. The ability to deliver crucial health services, run training programs, and maintain key infrastructure is constrained by a lack of financial resources.It is essential that the government and related stakeholders give more funding expressly for school health initiatives in order to solve this problem effectively in order for stall par health programs .

Infrastructure Deficit

In Nigeria, many schools lack the necessary facilities to support extensive health initiatives. The provision of necessary healthcare services is hampered by the lack of operating clinics, a clean water supply, and sanitary facilities that will help to improve staff and students health status.
In order for schools to properly support health initiatives, it is crucial that the government make investments in infrastructural development.

Insufficient Staffing and Training

To conduct effective health education, offer medical help, and handle a variety of health concerns, school health programs need qualified specialists. However, there is frequently a lack of qualified staff in Nigerian institutions. It is important to set up thorough training programmme to give educators and healthcare professionals the abilities and information they need to oversee school health initiatives as a primary concern for the promotion, sustenance of good health living (Derek. O. N. 2020)

Access to Healthcare Services is Limited

In many areas of Nigeria, access to high-quality healthcare services continues to be a major concern. Receiving prompt medical attention and preventive care may be challenging for students. To guarantee that students have easy access to medical services and regular health checkups, it is essential to develop relationships between schools and community members(Jones. M. N., 2021).

Poor Health Education

A key element of school health programme is health education. However, the modalities in which that health education is taught in Nigerian classrooms frequently falls short of the required standard and this should be addressed by government frontally.

Mental Health Neglect

Although it is a crucial component of total wellbeing, mental health is frequently neglected in school health programs. The stigma associated with mental health problems and a lack of knowledge are factors in this important area's marginalization in the school environment in the school environment (Ogundoju, R. A., 2019).

Poor Evaluation and Monitoring

In order to determine how well school health programs are working, adequate monitoring and evaluation techniques are required. But there are frequently no formalized monitoring methods in place. This development has adversely affected the standard of health education in schools. Both Ministries of education and health must ensure monitory and evaluation of all aspects of school health education programmes

Insufficient coordination and collaboration

The fragmented structure of Nigeria's school health initiatives prevents collaboration and coordination between stakeholders coordination of health education which is the bed rock of standard health development has often been neglected areas of the years.

Government intervention in promoting health education in Nigeria

Education and health care are the two largest government expenditure items in most developed economies. In 1991, total government spending on primary and secondary education in the was spent on public colleges and universities (Dales 2029). Educational outlays represent nearly 30% of government purchases of goods and services. Direct government health care spending, of forgone revenue was attributable to deductions and exemptions of health- related items under the income tax.There are fundamental differences in the government's role in the health and education sectors of the Nigerian economy. State and local governments are the direct providers of the majority (92%) of primary and secondary educational services. The service providers are government employees, with salaries set through a partly political process, and decisions about methods of productionsuch as classroom activities and curriculum are made by quasi-political government bureaucracies. Competition between alternative providers of educational services occurs largely through competition between communities for potential residents (Abass, 2020).

In health care, federal, state, and local governments ultimately pay for more than 40% of health outlays, they are direct providers of relatively little health care. While state and local governments operate some hospitals, and the federal government administers the Veterans Administration (VA) medical network, most health care providers work in the private sector. Government programs and policies nevertheless substantially reduce the cost of medical care for many consumers. The federal government's programs to provide health care services to the elderly and the indigent are essentially tax-supported systems of government payments for services provided. In addition, the current income tax code subsidizes medical outlays by households who are neither elderly nor poor, thereby altering the price of health services.

The contrast between public policies in these raises a host of questions about the scope of government in a mixed economy. Even a cursory review of current health policies yields paradoxes. For example, why is most child care for preschoolers in the Nigerian provided through a system of family and private market transactions, while primary and secondary education is provided directly by the government? Why is the public sector's role in higher education substantially smaller than its role in elementary education? which provided health care and educational benefits bureaucracy (the VA) to directly provide health care, while relying on private health providers with respect to education? Why does the federal government directly produce health care services for student, while relying on private providers for those who receive benefits? Why are there substantial differences across localities in the degree of public versus private provision of some services? (Ogundoju, 2019).

These questions relate broadly to the "choice of health care problem," the question of how government should intervene in health care system is deemed necessary. Although government

intervention in health care system begin by explaining that market imperfections and redistributive considerations can justify government intervention in the health sector, there is remarkably little discussion of what types of health policies are justified when improving individuals healthy living. There is virtually no evidence on the empirical magnitudes of many of the key parameters needed to guide health policy in these areas. Empirical evidence on the importance of potential health care, and the distributional consequences of various interventions in health education and health care services, is particularly scarce. Moreover, economic factors alone are unlikely to explain the observed structure of public health policy, which is due in significant part to historical and political influences in Nigerian economic and health sectors. **(**Adebiyi,2020).

The choice of health care system with particular application to health education and health care is divided into five sections. The first outlines the school health arguments that requiring government assistance to support good healthy living intervention in public and private schools also, the application of these intervention health to education and health care.Another section explores the link between goals of redistributive health and public policies in these areas. Both education and health care have been described as “basic rights” in some contexts, suggesting that these services should not be allocated on the basis of ability to pay 279. Government Intervention in providing Education and Health Care examines the comparative merits of three potential policy interventions: price health care materials, including the special case of full public payment for purchases of health care facilities in the, public mandates for private provision; and direct government provision. It highlights conditions under which each of these potential government assistance will be successful in achieving particular health policy objectives, as well as situations in which health education may fail.

The current structure and historical evolution of health policies toward education and health care in the Nigeria, and considers the degree to which the redistributive considerations described in the earlier sections can account for these health policies. The concluding section outlines areas of uncertainty where further work is needed to evaluate the success of implementing health education policies in schools the utilization health services may impose external benefits or costs that are not reflected in their health policy, informational asymmetries or other factors may lead to the nonexistence of health policies, may not have the information necessary to make appropriate choices.

Health imperfections with respect to education

Many of the stakeholders in health sectors with their usual laissez-faire view the appropriate role of promoting health education.The first, and most commonly alleged, source of a health imperfection withrespect to education is the presence of school management capacity. This argument has been made in many ways; Coles (2022) over-view on this regards that an educated individual is vital to a successful health education service, because it permits individuals to keep records, of health education services file tax returns, and evaluate campaign on health issues.

The rationale for government intervention promoting health education staff students arises because, who are the usual recipients, are not responsible for deciding how much it cost obtain health services. This

responsibility falls to government who also bear the costs of education. Since the benefits of education accrue primarily to the student who receive it, the level of spending on education depends critically on the degree of parental altruism. If government place a low value on improvements in their health status, then they may under invest in their health care system, and government intervention might be justified on the ground that it protects the health conditioning.' One difficulty with this argument is that it could be invoked to justify state intervention in virtually all aspects of health care delivery system.

Importance of school health education cowl

Functions of School Health Education in Nigeria: A comprehensive health education program plays a crucial role in a child's education, from kindergarten to high school. Health education teaches children physical, mental, social, and psychological health (overall well-being). It helps students to make healthy choices and avoid risky behaviors. Similarly, school health education seek to promotes healthy behaviors among the children that they will inculcate for life. To detect and treat diseases early in children and adolescents including identification of malnourished and anemic children with appropriate referrals to PHCs and hospitals and to promote use of safe drinking water in schools. Ultimately, school health education promote mental health, increasing protective factors (e.g., self-esteem); Increasing the use of preventive care services. Through health personnel of the school and to protect and ensure the health of students are in good condition (Derek, 2020).

School health education helps to promote mental health; increasing protective factors (e.g. self-esteem); increasing the use of preventive care services. Through school nurses at the schools clinics to prevent and ensure that health of students are in good condition. Similarly, through school health education, school based health and nutrition services are provided through the school system to improve the health and well-being of student and in some cases whole families and the boarder community.

School health education provides mandated screening and immunization manitries. It also provides system for student's health and educational problems. It helps to provide comprehensive and appropriate health education, provide a healthful and safe school environment that facilitates effective teaching and learning processes. (Adebiyi, 2020). The primary aim of establishing school health education is to provide healthy behaviour among the children that they will inculcate for life; to detect and treat diseases early in children and adolescence including identification of malnourished and anemic children with appropriate referrals to primary health care centres (PHCs) and hospitals to provide use of safe drinking water in schools.

pRoles and responsibilities of school health personnel

The roles and responsibilities appropriate for each school health personnels to meet the aims and objectives of school health services are as follows:

1. The school principal
   - To ensure the health education programme has been approves by the administrative authority.
   - Set up a school health committee and school health council the work out the school health plan.
   - To ensure that teachers are adequately trained for health care to school children.

- Provide health facilities for school activities
- Make sure that proper health records are maintained
- Ensure that parents are involved and follow-up children health issues.

2. The school teacher has the following;
   - Daily inspection of children personal hygiene and cleanliness.
   - Help in control of communicable diseases
   - Referral of child living any health problem to school health clinic a sick bay for further action.
   - Informing the parents and maintaining medical follow-up
3. The parents take charge of the following
   - They can help in the correction of detects 'if any and follow up on children and behaviour
   - Through PTA the parents can be involved in planning organization and implementation of school health programs.
   - Participate in the implementation of health programs activities.
4. The community responsibilities are:
   - Provide suitable land for school building
   - Provide funds and labour in building proper school
   - Participation in school health committees and contribute to information of school health policies and plan
   - Participate in the implementation of health programs and activities.
   - Motivate parents to send children to school
5. The childre3n or students has the following:
   - Learn values to medical and health examination, personal hygiene, good nutrition, and environmental sanitation exercises.
   - Co-operate in various aspects of school health programs.
   - Develop positive health habits and healthful living activities as educated up on.
   - Extend this other knowledge to other members of the4 family and neighbourhood.
6. The school health fare has the following responsibilities
   - Help in providing safe environmental sanitation exercises
   - Maintaining health records of children
   - Observation of children deviation from normal health condition, behaviour any communicable diseases and malnutrition
7. The medical officer has the following change to duty:
   - Help to assess and diagnose needs and plan of action for individual and families
   - Help to provide first Aid an emergency care to children.
   - Assess the overall system of care and develops a plan for ensuring that health need are many.

The above maintained roles for each school team are benefits for the school staff and students. The health personnels needs to perform those roles for the betterment of every students and staff especially the health of those in school, (Harry, 2021).

Conclusion

The school health education, is an organized school curriculums that helps to promote, protect and sustain the health condition of both staff and students in an academic environment. School health education in the area of health includes health education, physical education and other curricular areas which promote healthful behavour and an ample awareness of health issues as part of their core institution. The establishment of school health education is aimed at implementing student friendly school environment by assigning various responsibilities and roles to relevant stakeholders this is to meet up with the global trends and also, meet the World Health Organization (WHO) standard for school health services.

For an effective health education to meet up with the challenges in contemporary Nigerian societies, the following recommendations are considered relevant:

1. Government and other relevant stakeholders should provide adequate man power resources that will help in training relevant individuals to meet up with various health knowledge, attitudes and practices (KAP)
2. Successive government in Nigeria has a responsibility in establishing and implementing a direct health policies that we meet the challenges of school health education
3. Relevant stake holders should strive hard to ensure that health personnel in schools live up to expectations in providing adequate health care to both staff and students within the school environment
4. Health education should be made available to various school management as well as integration of community members in other to ensure good relations for an improved healthy environment for good health status
5. Organizations of coordinated health education training should be made available at a regular intervals in other to encourage consistency in health promotion activities

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