British Journal of Education
Vol.11, Issue 14, 46-55, 2023
Online ISSN: 2054-636X (Online)
Print ISSN: 2054-6351(Print)
Website: https://www.eajournals.org/
Publication of the European Centre for Research Training and Development-UK

School Health Services Utilisation Among Secondary School Students in Ibadan, Oyo State

Ibitola Amoke Oladeji
(RN, RM, B.Ed, MPH, PGDN, Msc Nursing)
McPherson University,
KM 75 Lagos - Ibadan Expressway
Seriki Sotayo, Ogun State

doi: https://doi.org/10.37745/bje.2013/vol11n144655 Published December 18, 2023

Citation: Oladeji I.A. (2023) School Health Services Utilisation Among Secondary School Students in Ibadan, Oyo State, *British Journal of Education*, Vol.11, Issue 14, 46-55

ABSTRACT: *This study assesses the utilisation of school health services in Ibadan North-West Local Government Area, Oyo State, Nigeria, with implications for primary healthcare among school children and the prevention of early-life preventable diseases. The research objectives include determining the level of school health service utilisation among secondary students in public and private schools, investigating barriers affecting utilisation, and examining the association between school type and service utilisation. A descriptive cross-sectional research design was employed, sampling 300 students aged 10-19 from a population of 37,396 in Ibadan North-West Local Government Area. The study utilized a multi-stage sampling procedure and a self-structured questionnaire with sections on socio-demographic characteristics, utilisation assessment, and barriers. The instrument's validity was established through content and face validity procedures. Results indicate a higher utilisation of school health services in private schools compared to public schools, highlighting a deficit in human and material resources for qualitative school health programs. Weak collaboration between the health and education sectors was detected, contributing to suboptimal standards and dissatisfaction among beneficiaries. Factors such as logistical challenges and changing living areas were identified as potential contributors to poor health program implementation. Recommendations include intensified efforts by school management boards to ensure service utilisation, the creation and maintenance of healthy school environments, and increased family involvement in school health service policies.*

KEYWORDS: School Health Services, Utilisation, Students

INTRODUCTION

A school health services plays a vital role in the comprehensive healthcare system of any nation. It encompasses all elements of the school curriculum that contribute to the comprehension, preservation, and enhancement of the well-being of the school community. The primary objective of the School health

services is to increase the well-being of students and staff, therefore increasing their effectiveness as contributors to the broader community. Furthermore, the acquisition of health-related information, attitudes, and behaviour starts from the early stages of development, thereby highlighting the significance of elementary schools (Kofoworade et al., 2022). In numerous households worldwide, children begin their schooling as early as 5-6 months due to the necessity for moms to initiate weaning early in order to resume their employment. The objective of school health services is to facilitate optimal health among students, enabling them to fully capitalise on their educational opportunities. The School Health Services (SHS) aims to optimise the physical well-being of students, enabling them to fully capitalise on their educational opportunities. The particular services encompassed are school medical exams, health clinics, school meals, food cleanliness, management of communicable illnesses, and play activities (UNESCO, 2022).

The need of prioritising the well-being of school pupils is well acknowledged. To fully optimise the educational course, it is imperative that the kid have sound physical, mental, and emotional well-being. They further argue that children in schools are exposed to a multitude of risks, including bodily harm, illness, and mental difficulties. The school age is characterised by a phase of accelerated physical and cognitive growth in children. An optimal setting is necessary to facilitate the child's necessary adaptations during this crucial era. The school offers a distinctive chance for health education, serving as a platform to develop a strong basis for the future adult population's health practices. By protecting the well-being of present-day youngsters, one is guaranteeing the well-being of future adults. The time period from March to June in the year 2018.

Children at every level of school require optimal health and absence of illness, impairment, or disability in order to fully capitalise on their educational opportunities. For many children, particularly those from disadvantaged backgrounds, the school may be the sole avenue for accessing healthcare services and gaining knowledge about improving personal or environmental cleanliness through health education. It is optimal for every kid to get a clinical assessment prior to enrollment in school. This process should commence during pre-school education (nursery) and be repeated at the onset of primary and secondary school. This is especially pertinent in a developing nation such as Nigeria, where a significant number of school-aged children face the challenge of surviving in a setting characterised by exceedingly high rates of perinatal, neonatal, infant, and under-five mortality (Ibhafidon & Ejigugha 2012).

Schools serve as the primary and easily accessible source of health services for a significant number of school-age children (Chavan & Chavan 2018). The benefits of efficient school health services cannot be overstated. Efficiently administered, school health services have made substantial contributions to school-based health initiatives, including interventions relating to health, nutrition, smoking cessation, and primary prevention of cardiovascular illnesses in children, as well as the detection of epidemics. In addition to enhancing healthcare for the general population, evidence suggests that successful school health initiatives contribute to higher rates of school attendance and academic achievement, while also reducing the incidence of students leaving school prematurely (Eunice, et al. 2020).

Osian, et al. (2020) reported that 15.3% of pupils, or 40 individuals, said that they had never utilised the school health services while they were unwell. Thirty-four individuals, accounting for 13.1% of the total, reported seldom engaging in the activity. Twenty-three individuals, representing 8.8% of the total, reported occasionally engaging in the activity. Fifty-five individuals, making up 21.1% of the total, reported regularly engaging in the activity. The majority, consisting of 109 individuals or 41.8% of the total, reported engaging in the activity very frequently. Overall, the findings indicate that 107 individuals (41.3%) exhibit high use, 40 individuals (15.3%) exhibit moderate utilisation, and 113.2 individuals (43.4%) exhibit inadequate utilisation of the school health services.

A research conducted by Kuponiyi et al. (2016) examined the implementation of school health services in public and private primary schools. The findings revealed that in both groups, over 75 percent of the head teachers lacked the ability to provide a concise definition of the school health programme. Both public school head teachers (166) and private school head teachers (167) offered an inadequate definition of the School health plan. In addition, 167 respondents (92.8%) and 164 members of the general public were unable to accurately identify the components of the School health programme. A minority of participants, namely 40 (22.2%) of public school principals and 50 (27.8%) of private school principals, expressed uncertainty regarding the importance of basic life support as a required skill for the school's first aid provider.

According to a research done by Kuponiyi et al. (2016), public school head teachers identified insufficient facilities, limited funding, and a shortage of health staff as the three primary obstacles they have in managing the SHS. Conversely, the head teachers of private schools have identified three primary obstacles in implementing the school health programme: insufficient funding, a shortage of health staff, and conflicts between parents and school administration.

Given the background of this study, this current study, therefore, focuses on the assessment of school health services in Ibadan North-West Local Government Area, Ibadan in Oyo State Nigeria. This has implications for the primary health care of school children and a reduction in the incidence of preventable diseases early in life. The study specifically

1. determined the level of school health services utilisation among secondary students in public and private schools in Ibadan North-West Local Government Area, Ibadan;
2. investigated the barriers affecting utilisation of school health services; and
3. determined the association between type of school and utilisation of school health services.

METHODOLOGY

This study utilized a descriptive cross- sectional research design. The study was generalized to students in Ibadan North West Local Government Area. The estimated population for the study consisted of

37,396 out of which 300 students were sampled for the study. The study was carried out among students in secondary schools between 10-19 years of age in Ibadan North West Local Government
The sample size was calculated using Fleiss formula

$$n = \frac{\left(Z(1-\frac{\propto}{2})\sqrt{2\bar{\bar{p}}\,\bar{Q}} + Z_{(1-\beta)}\sqrt{P_e Q_e + P_c Q_c}\right)^2}{(P_e - P_c)}$$

n = desired sample size

$Z(1-\frac{\propto}{2}) = 1.96$; $Z_{(1-\beta)} = 0.84$

Pe = estimate of response rate in exposed group or exposure rate in cases (40.4%)
Pc = estimate of response rate in unexposed group or exposure rate in non-cases(31%)

$\bar{P} = \frac{(P_e - P_c)}{2}$; $\bar{Q} = 1 - \bar{P}$

P1 = 40.4%
P2 = 31.0%
q1 = 0.596%
q2 = 0.643%

$$n = \frac{1.96\sqrt{2(0.36 \times 0.64) + 0.84\sqrt{0.4 \times 0.6 + 0.31 \times 0.61}}}{0.4 \times 0.31^2}$$

$$n = \frac{1.33 + 0.566}{0.015376}$$

N = 123

Adjustment of 10% non-response rate;

New sample size = $\frac{123}{1-0.1}$ = 137

n= 137 (per group) + 10% of calculated sample size - 150 per group

A sample size of 300 was selected from private and public secondary schools
To obtain a sample from the population for the study, a multi-stage sampling procedure was adopted. A self-structured questionnaire comprised of open and close-ended questions was used for data collection. The questionnaire was developed from information available in the literature on school health services. Section A contained question that aim at obtaining information on the socio-demographic characteristics of the respondents. Section B contained questions on the assessment of the level of utilisation among school health services while section C contained questions on barriers of utilisation of school health services.

British Journal of Education
Vol.11, Issue 14, 46-55, 2023
Online ISSN: 2054-636X (Online)
Print ISSN: 2054-6351(Print)
Website: https://www.eajournals.org/
Publication of the European Centre for Research Training and Development-UK

The validity of the instrument was established using the content and face validity procedure. The instrument was thoroughly assessed by experts of Tests and Measurement to ensure its appropriateness concerning language, clarity, adequacy of content and ability to elicit accurate information for the study. The researcher visited the Principals, Proprietor/Proprietress of the selected private and public secondary schools under the Ibadan North West Local Government Area to seek their consent and support. The researcher visited the schools very early on the days of data collection to introduce herself to the selected students and seek the consent of selected students to participate in the study. Three research assistants were recruited and trained to assist in the administration and retrieval of the completed questionnaire. Data was analysed based on the objective of the study. Completed questionnaires were collected, coded and entered into the computer using the Statistical Package for Social Science (SPSS) version 28. Descriptive results were presented in frequencies, percentages, mean and standard deviation. Inferential statistics of Chi-square was used to determine the relationship between the variables

RESULTS

Objective 1: To determine school health services utilisation among secondary students in public and private schools in Ibadan North-West Local Government Area, Ibadan. As shown in Table 1 is the school health services practices among respondents. 114(76%) and 64(42.7%) of the respondents in private and public school agreed that school sickbay has equipment and utilized by student. Many 92(61.3%) and 52(34.7%) of the respondents in private and public agreed that school has an ambulance to convey sick children to the hospitals in case of an emergency. Half of the respondents in private 75(50%) and public 46(30.7%) agreed school usually carry out periodic medical examination on students. More than two-fifth of the respondents in private 93(62%) and public 66(44%) agreed that there are health personnel and nurses ready to attend to student in school.

Table 1: Frequency distribution of school health services utilisation among respondents

Variables	Private (%)	Public (%)
School sickbay/clinic has all equipment and it is being utilized by student		
Strongly agree	114 (76)	54 (36)
Agree	31 (20.7)	64 (42.7)
Disagree	2 (1.3)	17 (11.3)
Strongly disagree	3 (2)	6 (4)
Undecided		9 (6)
School has an ambulance or bus to convey sick children to hospitals in case of an emergency		
Strongly agree	46 (30.7)	44 (29.3)
Agree	92 (61.3)	52 (34.7)
Disagree	8 (5.3)	39 (26)
Strongly disagree	4 (2.7)	5 (3.3)
Undecided		10 (6.7)
Routine inspection is being done by teachers in school during general health appraisal services		

British Journal of Education
Vol.11, Issue 14, 46-55, 2023
Online ISSN: 2054-636X (Online)
Print ISSN: 2054-6351(Print)
Website: https://www.eajournals.org/
Publication of the European Centre for Research Training and Development-UK

Strongly agree	96 (64)	52 (34.7)
Agree	36 (24)	70 (46.7)
Disagree	16 (10.7)	25 (16.7)
Strongly disagree	2 (1.3)	3 (2)
School carry out periodic medical examination on students		
Strongly agree	75 (50)	46 (30.7)
Agree	57 (38)	51 (34)
Disagree	12 (8)	33 (22)
Strongly disagree	6 (4)	10 (6.7)
Undecided		10 (6.7)
There are health personnel and nurses ready to attend to student in school		
Strongly agree	93 (62)	52 (34.7)
Agree	40 (26.7)	66 (44)
Disagree	11 (7.3)	21 (14)
Strongly disagree	3 (2)	8 (5.3)
Undecided	3 (2)	3 (2)

Objective 2: Barriers affecting utilisation of school health services among respondents

As shown in Table 2 the respondents barriers affecting the utilisation of school health services among respondents. 66% and 46% of the respondent in private and public school agreed that lack of procedure and guidelines for school health is a barrier. More than half of the respondents in private and public school agreed that poor road could create a difficult outreach for the program. Many of the respondents in private (54.7%) and public (47.3%) agreed that school nurses could not do proper follow-up and home visit for learner with problem is a barrier. More than two-fifth of the respondents strongly agreed that shortage of health personnel is a barrier.

Table 2 frequency distribution of barriers affecting utilisation of school health services among respondents

Variables	Private (%)	Public (%)
Lack of procedure and guidelines for school health		
Strongly agree	99 (66)	63 (42)
Agree	49 (32.7)	69 (46)
Disagree	2 (1.3)	14 (9.3)
Strongly disagree		4 (2.7)
Poor roads, especially in rural communities, could create difficulties for outreach programmes		
Strongly agree	83 (55.3)	64 (42.7)
Agree	62 (41.3)	76 (50.7)
Disagree	5 (3.3)	9 (6)

British Journal of Education
Vol.11, Issue 14, 46-55, 2023
Online ISSN: 2054-636X (Online)
Print ISSN: 2054-6351(Print)
Website: https://www.eajournals.org/
Publication of the European Centre for Research Training and Development-UK

Strongly disagree		1 (0.7)
School nurses could not do proper follow-up and home visits for learners with problems		
Strongly agree	82 (54.7)	60 (40)
Agree	56 (37.3)	71 (47.3)
Disagree	9 (6)	14 (9.3)
Strongly disagree	3 (2)	5 (3.3)
Collaboration with other support services		
Strongly agree	76 (50.7)	57 (38)
Agree	56 (37.3)	58 (38.7)
Disagree	17 (11.3)	31 (20.7)
Strongly disagree	1 (0.7)	4 (2.7)
Shortage of health personnel		
Strongly agree	73 (48.7)	67 (44.7)
Agree	63 (42)	68 (45.3)
Disagree	8 (5.3)	12 (8)
Strongly disagree	6 (4)	2 (1.3)
Undecided		1 (0.7)

Objective 3: Association between type of school and utilisation of school health services
As shown in table 3 shows that the proportion of practicing the use of school health services is high among respondent in private (69%) school compared to those in public (31%) at p-value<0.05.

Table 3: Association between school type and knowledge, practice and availability of school services

Variables	Private (%)	Public (%)	x^2	P-value
Practice/utilisation			17.34	0.000*
Practicing	90 (42.5)	122 (57.5)		
Not practicing	60 (69)	27 (31)		

*statistically significant

DISCUSSION

The findings suggest a discrepancy in the utilisation of school health services among students attending public and private secondary schools. The greater utilisation rate at private schools can be ascribed to the superior availability, accessibility, and knowledge of these services. Private schools may possess greater resources for health services and may engage in a higher number of health-related activities, perhaps leading to increased utilisation of these services by students. The study's findings indicate that public schools have a greater degree of utilisation of health records books compared to private schools.

These results align with the findings of a research conducted by Adebayo, et al (2021), which revealed that urban schools had a greater rate of using school health records (87.5%), whereas rural schools had a lower rate of maintenance (81.25%). Adebayo and Onadeko (2015) revealed that waste-disposal facilities were used in just 35.3% of schools, but a much higher percentage (72.4%) were present in private schools. None of the schools had a counselling timetable or session log. Contrary to the findings of this survey, the majority of respondents at public schools use garbage bins more frequently than respondents in private schools. The utilisation of counselling sessions was seen in both public and private schools, with a higher frequency in private schools.

According to a research conducted by Kuponiyi et al., in 2017, a mere 39% of the schools examined were found to have functional toilets. 23% of these institutions are classified as public schools, and the remaining 77% are categorised as private schools. The outcomes of this study indicate that while both schools have functioning bathroom facilities, private schools make greater use of them compared to public schools. A research conducted by Chabo and Ackley (2019) examined the utilisation of the school health programmes in secondary schools. The findings indicated that all the assessed facilities were being used by both students and teachers, which aligns with the results of this study.

The study's findings demonstrate a substantial correlation between the implementation of school health services and students' attendance in both private and public schools. The findings of Odeyemi and Chukwu's (2015) study, which aimed to evaluate the knowledge, attitude, and practice of school health among primary school teachers in Ogun State, contradict the notion that there is a significant correlation between the provision of school health services and the location of schools (rural or urban). The study conducted by Kuponiyi, et al. (2016) in Ogun State, Nigeria, examined the school services and practices of public and private primary schools. The findings of the study indicated that there is no significant correlation between transporting children to health centres and health appraisals in both types of schools. This finding contradicts the results of the current study.

CONCLUSION

The study found that a significant proportion of the participants exhibit a greater degree of use of school health services in private schools as opposed to public schools. This study has uncovered the present condition of the school health services in Ibadan, which lacks the necessary people and material resources required to accomplish a high-quality school health programme in secondary schools. The inadequate coordination between the health and education sectors in promoting the well-being of school-aged kids was identified. Moreover, the inadequate execution of pertinent criteria, particularly those pertaining to the physical environment of the school, has given school owners the discretion to establish their own standards. The prevailing individual standards in most cases are below ideal, resulting in dissatisfaction among beneficiaries over many aspects of the school health programmes. This, in turn, may have contributed to the kids' poor health state. These causes may stem from logistical considerations,

such as parents' personal building relocation, closeness to their living locations, and transportation and distance concerns.

Recommendations

Based on the findings of this study, the following recommendations were made:

1. The school management board should intensify more efforts to ensure utilisation of school health services in various schools across the study area
2. Creation and maintenance of healthy, physical and social school environment
3. There is need for more family involvement in school health service policy. Active involvement of parent, and secondary school students/adolescents in the age specific design, planning, implementation and evaluation of services would be of a great importance in an efficient and effective school health services.

REFERENCES

Adebayo, A., Dania, O., Fawole, T. (2021). Public–private comparative study of the quality of implementation of the school health programme in a metropolitan city in Nigeria. *Journal of Public Health.* 29, 35-39

Adebayo, A., & Onadeko, M. (2015). Knowledge of School Health Programme among Public Primary School Teachers in Oyo State, South-West Nigeria: A Rural-Urban Comparative Study. *Journal of Nursing* 19,55-60

Chabo, J.A.U., & Akpan-idiok, P.A. (2019) utilisation of school health programme facilities and factors affecting implementation in secondary schools in Calabar Municipal, Cross Rivers State, Nigeria. *Greener Journal of Medicinal Sciences.* 9(1), 1-11

Chavan, G.M., & Chavan, V.M. (2018) Knowledge, attitude and practices of secondary school teachers regarding school health services in children. *International Journal of Community Medicine and Public Health*. 5(4), 1541-1546

Eunice, A.O., Timothy, A.E., & Osagumwenro, I. (2020). Knowledge, Attitude and utilisation of School Health Services among Senior Secondary School Students in Egor Local Government Area, Benin City, Edo State. *International Journal of tropical disease and health* 41(12), 1-9

Ibhafidon, A.A., Ejigugha, A.U. (2012). Evaluation of School Health Services in Nomadic Primary Schools in Southwestern Nigeria. *Mediteranean Journal of Social Science.* 3(13), 155-164.

Kofoworade, O.O (2022). A dissertation submitted to the national Postgraduate Medical college of Nigeria in part fulfillment of the Requirements for the award of fellowship in the Faculty of paediatrics

Kuponiyi, O. (2015). A comparative study of the school health programme in private and public primary schools in Ogun state, *Journal of school health,* 3(2), 34-37

Kuponiyi, O.T., Amoran, O.E., & Kuponiyi, O.T. (2016). School health services and its practice among public and private primary schools in Western Nigeria. *BMC Res Notes* 9, 20-30

Odeyemi, K.A., & Chukwu, E.E. (2015). Knowledge, attitude, practice of school health among primary school teachers in Ogun State. Nigeria. *Niger J Paed*, 42(4). 340-345

Osian, E., Timothy, E., & Igbinoba, O. (2020). Knowledge, Attitude and utilisation of School Health Services among Senior Secondary School Students in Egor Local Government Area, Benin City, Edo State. *International journal of tropical disease & health.* 41(12), 1-9

UNESCO (2022). Tackling menace of out-of-school children. The Guardian Sunday magazine Feb 6, 2023