TEACHERS' LEVEL OF KNOWLEDGE, CAUSES, EFFECTS AND SAFETY MEASURES OF COVID-19 PANDEMIC IN ABAKALIKI EDUCATION ZONE OF EBONYI STATE, NIGERIA

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Abstract

Covid-19 disease, originated from Wuhan, Hubei Province, China in December 2019. The World Health Organization (WHO) has declared the COVID-19 pandemic a global health emergency. The purpose of the study was to determine teachers' level of knowledge on the causes, effects and safety measures of COVID 19 pandemic in Abakaliki, Ebonyi State Nigeria. Descriptive research design was adopted for the study. Three research questions guided the study while three null hypotheses were formulated and tested at 0.05 level of significance. Purposive sampling technique was used to select 150 teachers comprising of 30 male and 120 female secondary school teachers in Abakaliki, Ebonyi State of Nigeria. Researchers' self-developed questionnaire titled "Teachers' level of knowledge on the causes, effects and safety measures of COVID 19 pandemic questionnaire" was used for data

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collection. Data collected were analyzed using percentage to answer the research questions. The results of data analysis showed that teachers had moderate level of knowledge in the causes (62% for males and 68% for females), effects (73% for males and 81% for females) and safety measures (74% for males and 87% for females) of COVID-19 pandemic. Conclusion and recommendations were made based on the findings of the study.

Keywords: Coronavirus, SARS-CoV-2, Pandemic, Knowledge,

I. Introduction

The coronavirus began in Wuhan, Hubei Province, China. Residents who lived in Wuhan had some link to a large seafood and live animal market, which suggest that the mode of transmission of corona virus was from animal to person. Coronavirus disease 2019 (COVID-19) was reported from Wuhan, the capital and major business city of Hubei province, China (Wuhan city, 2020). In a very short time, the disease spread across China and cases were reported with an exponential increase in morbidity and mortality rates. The disease has evolved and continues to be a very serious emergency across the globe. On March 11 2020 the WHO declared COVID-19 a pandemic, having met the epidemiological criteria of having infected>100,000 people in at least 100 countries (Callaway, 2020)

The virus has been named "SARS-CoV-2" and the disease it causes has been named "corona virus disease 2019" (abbreviated "Covid-19"). The first known patient of Coronavirus started experiencing symptoms in Wuhan, China on 1 December 2019. Corona viruses are a family of viruses that can cause illnesses such as the common cold, severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). In 2019, a new corona virus was identified as the cause of a disease outbreak that originated in China. The virus is now known as the severe acute respiratory syndrome corona virus 2 (SARS-CoV-2). The disease it causes is called coronavirus disease 2019 (COVID-19). In March 2020, the World Health Organization (WHO) declared the COVID-19 outbreak a pandemic. Everyone is at risk of getting COVID-19 but older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.

The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it is important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow). The signs and symptoms of COVID-19 may appear two to 14 days after exposure. This time after exposure and before having symptoms is called the incubation period. Common signs and symptoms can include: fever, cough, tiredness, shortness of breath or difficulty in breathing, muscle aches, chills, sore throat, loss of taste or smell, headache, chest pain, etc. Other less common symptoms have been reported, such as rash, nausea, vomiting and diarrhea. Children have similar symptoms to adults and generally have mild illness. The severity of COVID-19 symptoms can range from very mild to severe. Some people may have only a few symptoms, and some people may have no symptoms at all. People who are older or who have existing chronic medical conditions, such as heart disease, lung disease, diabetes, severe obesity, chronic kidney or liver disease, or who have compromised immune systems may be at higher risk of serious illness. This is similar to what is seen with other respiratory illnesses, such as influenza. Some people may experience worsened symptoms, such as worsened shortness of breath and pneumonia, about a week after symptoms start.

If an individual has COVID-19 symptoms or has been in contact with someone diagnosed with COVID-19, he should contact his doctor or clinic right away for medical advice. Health care teams should be told about the symptoms and possible exposure before an infected person is given an appointment. If anyone has emergency COVID-19 signs and symptoms, he should seek care immediately. Emergency signs and symptoms can include: trouble in breathing, persistent chest pain or pressure, inability to stay awake, new confusion, blue lips or face. If an individual has signs or symptoms of COVID-19, the individual should contact his doctor or clinic for guidance. The doctor should know if he has other chronic medical conditions, such as heart disease or lung disease. During the pandemic, it is important to make sure health care is available for those in greatest need.

Infection with the new corona virus (severe acute respiratory syndrome corona virus 2, or SARS-CoV-2) causes corona virus disease 2019 (COVID-19). The virus appears to spread easily among people, and more continues to be discovered over time about how it spreads. Data has shown that it spreads from person to person among those in close contact (within about 6 feet, or 2 meters). The virus spreads by respiratory droplets released when someone with the virus coughs, sneezes or talks. These droplets can be inhaled or land in the mouth or nose of a person nearby. It can also spread if a person touches a surface with the virus on it and then touches his or her mouth, nose or eyes; although this isn't considered to be a main way it spreads. Moreover, the risk factors for COVID-19 appear to include:

- Recent travel from or residence in an area with ongoing community spread of COVID-19 as determined by the Center for Disease (CDC) or WHO
- Close contact (within 6 feet, or 2 meters) with someone who has COVID-19 for more than 5 minutes or being coughed or sneezed on by an infected person.

Although most people with COVID-19 have mild to moderate symptoms, the disease can cause severe medical complications and lead to death in some people. Older adults or people with existing chronic medical conditions are at greater risk of becoming seriously ill with COVID-19. Complications according to World Health Organization (WHO), 2020), can include:

- Pneumonia and trouble breathing
- Organ failure in several organs
- Heart problems

- A severe lung condition that causes a low amount of oxygen to go through an infected person's bloodstream to his or her organs (acute respiratory distress syndrome)
 - Blood clots
 - Acute kidney injury
 - Additional viral and bacterial infections

These complications are more pronounced in patients with underlying health conditions such as cardiopulmonary disease, immuno-compromised individuals, infants and the elderly (Centre for Disease Control (CDC, 2020). The global mortality rate of COVID-19 is currently estimated at 3.41% (COVID, 2020). Although there is no vaccine available to prevent COVID-19, steps can be taken to reduce the risk of infection.

The WHO and CDC recommend following these precautions for avoiding COVID-19:

Large events and mass gatherings should be avoided.

Close contact (within about 6 feet, or 2 meters) with anyone who is sick or has symptoms should be avoided.

- A person should stay at home as much as possible and keep distance between himself and others (within about 6 feet, or 2 meters), especially if he has a higher risk of serious illness. It should be worthy of note that some people may have COVID-19 and spread it to others, even if they don't have symptoms or don't know they have COVID-19.
- The hands should often be washed with soap and water for at least 20 seconds, or an alcohol-based hand sanitizer that contains at least 60% alcohol should be used.
- The face should be covered with a cloth face mask in public spaces, such as the grocery store, where it is difficult to avoid close contact with others, especially if someone is in an area with ongoing community spread. Only nonmedical cloth masks surgical masks should be used.
- The mouth and nose should be covered with the elbow or a tissue when coughing or sneezing. The used tissue should be disposed and the hands washed right away.
 - Touching the eyes, nose and mouth should be avoided.
- Sharing dishes, glasses, towels, bedding and other household items should be avoided if someone is sick.
- High-touch surfaces, such as doorknobs, light switches, electronics and counters should be cleaned and disinfected daily.

People should stay home from work, school and public areas if they're sick, unless they're going to get medical care. Public transportation taxis and ride-sharing if a person is sick should be avoided. If a person has a chronic medical condition and may have a higher risk of serious illness, he should check with his doctor about other ways to protect himself. The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. A person should protect himself and others from infection by washing his hands or using an alcohol based rub frequently and not touching his or her face. If someone is

planning to travel, he should first check the CDC and WHO websites for updates and advice. He should also look for any health advisories that may be in place where he plans to travel. He may also want to talk with his doctor if he has health conditions that make him more susceptible to respiratory infections and complications.

The ultimate effects of the COVID 19 pandemic on students hinges on how much time it will take for the pandemic to end. A longer struggle to contain the virus not only prolongs the pain caused by the pandemic, but raises the prospect that the pandemic's impact will have lingering or persistent effects on children. For instance, the longer economies are on shutdown, the less likely they are to "snap back". At the household level, struggling families will increasingly see breadwinners lose their jobs or be forced to sell productive assets in order to survive, with long-running consequences for child poverty. The Covid-19 pandemic affected the education sector in two ways. One, the spread of the virus encouraged social distancing which led to the shutdown of schools, offices, businesses and events. Also, the rate at which the virus was spreading, and the heightened uncertainty about how bad the situation could get, led to flight to safety in consumption and investment among consumers and investors (Ozili&Arun, 2020). There was a general consensus among top economists that the corona virus pandemic would plunge the world into a global recession.

The longer schools remain closed, the less likely students are to catch up on learning and essential life skills that support a healthy transition to adulthood. The longer immunization campaigns are suspended, the greater and more costly will be the struggle to eliminate polio and to manage measles outbreaks. For children caught at the apex of this crisis, there is a genuine prospect that its effects will permanently alter their lives. Children facing acute deprivation in nutrition, protection or stimulation, or periods of prolonged exposure to toxic stress, during the critical window of early childhood development are likely to develop lifelong challenges as their neurological development is impaired. Students who drop out of school will face not only a higher risk of child marriage, child labour, and teenage pregnancies, but will see their lifetime earnings potential precipitously fall. Students who experience family breakdowns during this period of heightened stress risk losing the sense of support and security on which children's wellbeing depends.

Most governments around the world have temporarily closed educational institutions in an attempt to contain the spread of the COVID-19 pandemic. These nationwide closures are impacting almost 70% of the world's student population. Several other countries have implemented localized closures impacting millions of additional learners. UNESCO is supporting countries in their efforts to mitigate the immediate impact of school closures, particularly for more vulnerable and disadvantaged communities, and to facilitate the continuity of education for all through remote learning. The coronavirus pandemic has affected educational systems worldwide, leading to the near-total global closure of institutions of learning. Countries across the world are returning to the drawing board to develop strategies to rescue their education sector which is being damaged by the deadly virus. Virtually all institutions of learning have been ordered to be temporarily shut as part of plans to contain the spread of the COVID-19 pandemic. According to statistics from UNICEF, approximately one point seven to five billion learners

are currently affected by school closures in response to the pandemic. Statistics further reveal that 186 countries are currently implementing nationwide closures, impacting about 98% of the world's student population.

In West Africa, the West African Secondary School Certificate Examination (WASSCE), International English Language Testing System (IELTS) and the 2020 national and termly examinations have been postponed. Also, the Cambridge Assessment International Education scheduled for May/June will not hold this year. Cambridge resorted to collaborate with candidates to engage them on evidence-based decisions on grades in each subject they applied for. Moreover, Africa and other countries, have postponed all national examinations earlier scheduled to begin in March 2020. In Nigeria, the Federal government announced the indefinite postponement of the 2020 West African Examination Council and the National Examinations Council (NECO) due to the COVID-19 pandemic. The situation is depressing. The statistics are scary and the consequences are severe. The numbers are unprecedented and the implications are enormous. Never before were so many children and youths out of school at the same time. The consequences are better imagined.

The World Bank says that even before the current closure of schools, the world was already experiencing a global learning crisis, as many students, who, even while the school system was in full swing, were not learning the fundamental skills needed for life. The closure of schools has now further compounded the situation with remarkable impacts on students, teachers, families and far-reaching economic and social consequences. In many countries, poor children rely on the school feeding system for their only meal for the day but with schools now forced to close, millions of children are missing out on these meals. Many social vices are associated with youths not actively engaged in schooling. Children and youths who are not in school are more susceptible to social vices such as alcoholism, substance abuse and other forms of criminal activities. Early marriage and child labour are also some of the consequences of school closures.

In an attempt to positively engage the children and also ensure that they are not left behind in their learning journey, many countries including Nigeria have adopted online teaching and learning, using radio, television and internet solutions to support access to education. In order to provide another window for learning, UNESCO through its COVID-19 Education response, floated a platform tagged Learning Never Stops, to facilitate inclusive learning opportunities for children and youths during this period of sudden disruption in the school system. Recently, the Ministry of Education in Nigeria uploaded on its website electronic learning resources and education chat rooms for the thirty-six states in the country and the Federal Capital Territory, for continuing education and individualized learning for children at home.

Laudable as these initiatives appear, they cannot be compared to classroom based instructions and the benefit to the very poor children who rely on schools not only for education, but also for food, healthcare and safety.

Moreover, these efforts may not achieve the set objectives, given the limited access of poor children to television, electricity, internet and other equipment needed to take advantage of the e-learning platforms. However, there appears to be light at the end of the tunnel. According to UNESCO's monitoring, 71 countries have already announced when schools will reopen. Out of these, 12 have reopened schools, 52 have set the dates for reopening during this academic year and seven plan to reopen next session. Although, the majority of the countries, totaling 128, including Nigeria, have not announced any date yet. But, countries must prioritize the reopening of schools as soon as it is safe to do so, so that a complete reversal of the gains achieved in the education sector over the decades will not be seen. The longer children stay out of school, the less likely they are to ever return.

The purpose of the study was to determine the level of teachers' knowledge on the causes, effects and safety measures to COVID 19 pandemic. Specifically, the study sought to:

- i. Ascertain the level of teachers' knowledge on the causes of COVID 19 pandemic.
- ii. Determine the level of teachers' knowledge on the effects of COVID 19 pandemic.
- iii. Ascertain the level of teachers' knowledge on the safety measures to COVID 19 pandemic.

Research Questions

- 1. What is the level of teachers' knowledge on the causes of COVID 19 pandemic?
- 2. What is the level of teachers' knowledge on the effects of COVID 19 pandemic?
- 3. What is the level of teachers' knowledge on the safety measures to COVID 19 pandemic?

II. Methodology

The study adopted a descriptive research design. Descriptive research design is a type of design in which a group of people are studied by collecting and analyzing data from a few people considered to be a true representative of the entire group over a short period of time (Nworgu, 2015). This study was conducted in Abakaliki Education Zone, out of the three Education Zones in Ebonyi State. Abakaliki Education Zone is made up of four local government areas: Abakaliki, Ebonyi, Izzi and Ohaukwu respectively. The population of the study comprised of all the secondary school teachers in Abakaliki Education zone of Ebonyi State. Multi-stage sampling was used to draw a sample size of 200 teachers. Stage one involved using cluster sampling procedure to select all the four LGAs in Abakaliki Education zone of Ebonyi state. Each LGA represented a cluster. The second stage involved using purposive sampling technique to select 10 secondary schools from the four LGAs. The third stage involved using simple random sampling to select 7 male and 13 female teachers (20 teachers) from each of the 10 schools. Three research questions guided the study. Researchers self-developed questionnaire titled "Teachers' level of knowledge on the causes, effects and safety measures on COVID 19 pandemic questionnaire" (TLKCESQ) was used for data collection. The instrument contained 30 item statements relating to teachers' level of knowledge on the

causes, effects and safety measures on COVID 19 pandemic. The instrument was sent to two experts in Department of Educational Foundations, Alex Ekwueme Federal University, Ndufu Alike Ikwo who critically examined the instrument in terms of appropriateness and suitability to the purpose of the study. Cronbach Alpha statistics was used to establish the reliability. The reliability co-efficient of 0.84 was obtained, indicating that the instrument was good enough for data collection. Data collected was analyzed using frequency and percentages to answer the research questions. Ashur's (1977) criteria for determining the level of knowledge were applied and used as the decision guide for determining levels of knowledge possessed by the secondary school teachers regarding COVID-19.

Table 1: Decision Guide for Determining Levels of Knowledge

S/N	percentage	Remarks
1	00-39	Low level of Knowledge (LLK)
2	40-59	Moderate level of Knowledge (MLK)
3	60-79	High level of Knowledge (HLK)
4	80-100	Very High level of Knowledge (VHLK)

Ashur's (1977) Criteria for Determining Levels of Knowledge

III. Results

Table 2: Level of Teachers' Knowledge on the Causes of COVID 19 Pandemic

S/N	Item Statements		No of Males 70		N	males 130	
		F	%	Decision	F	%	Decision
1	Infection with the new corona virus (severe acute respiratory syndrome corona virus 2 causes corona virus disease 19 (COVID-19).	21	30	LLK	46	35	LLK
2	The virus spreads by respiratory droplets released when someone with the virus coughs, sneezes or talks. These droplets can be inhaled or land in the mouth or nose of a	28	40	MLK	61	47	MLK

	person nearby.						
3	It can also spread if a person touches a surface with the virus on it and then touches his or her mouth, nose or eyes.	42	60	HLK	87	67	HLK
4	The risk factor for COVID-19 appears to be recent travel from or residence in an area with ongoing community spread of COVID-19.	60	86	VHLK	120	92	VHLK
5	Close contact (within 6 feet, or 2 meters) with someone who has COVID-19 for more than 5 minutes or being coughed or sneezed on by an infected person is also a risk factor in the spread of COVID 19.	65	93	VHLK	127	98	VHLK
	Grand Percentage		62	MLK		68	MLK

Key: LLK = Low level of Knowledge, MLK = Moderate level of Knowledge, HLK = High

level of Knowledge, VHLK = Very High level of Knowledge

The data in Table 2 above shows that the secondary school teachers in Abakaliki Education Zone of Ebonyi State possess moderate level of knowledge of the causes of COVID-19 pandemic with 62% and 68% for male and female teachers respectively. The table also revealed that the respondents possessed very high level of knowledge (86%) that travelling to or from residences in an area with ongoing community spread of COVID-19 is a risk factor in the spread of COVID-19. Moreover, the respondents have a very high level of knowledge (93%) that Close contact with someone who has COVID-19 for more than 5 minutes or being coughed or sneezed on by an infected person is also a risk factor in the spread of COVID 19.

Table 3: Level of Teachers' Knowledge on the Effects of COVID 19 Pandemic

S/N	Item Statements	No of Males 50		No of Females 100			
		F	%	Decision	F	%	Decision
6	The COVID 19 pandemic has affected educational systems worldwide, leading to the near-total global closure of institutions of learning.	28	40	MLK	101	78	HLK
7	The spread of the virus encouraged social distancing which	49	70	HLK	92	71	HLK

	Grand Percentage		73	HLK		81	VHLK
15	Students who experience family breakdowns during the COVID-19 pandemic faced heightened stress risk, losing the sense of support and security on which children's wellbeing depends.	63	90	VHLK	100	77	HLK
14	Students who drop out of school will face not only a higher risk of child marriage, child labour, and teenage pregnancies, but will see their lifetime earnings potential precipitously fall.	51	73	HLK	94	72	HLK
13	The closure of schools has now further compounded the situation with remarkable impacts on students, teachers, families and far-reaching economic and social consequences.	61	87	HLK	107	82	VHLK
12	Early marriage and child labour are some of the consequences of school closures.	42	60	HLK	114	88	VHLK
11	National and termly examinations earlier scheduled have all been postponed.	56	80	VHLK	100	77	HLK
10	Children and youths who are not in school are more susceptible to social vices such as alcoholism, substance abuse and other forms of criminal activities.	49	70	HLK	114	88	VHLK
9	The longer schools remain closed, the less likely students are to catch up on learning and essential life skills that support a healthy transition to adulthood.	65	93	VHLK	111	85	VHLK
8	Before the current closure of schools, the world was already experiencing a global learning crisis, as many students, who, even while the school system was in full swing, were not learning the fundamental skills needed for life.	44	63	HLK	120	92	VHLK
	led to the shutdown of schools, offices, businesses and events.						

Key: LLK = Low level of Knowledge, MLK = Moderate level of Knowledge,

HLK = High level of Knowledge, VHLK = Very High level of Knowledge

Table 3 above shows that male teachers (73%) have high level of knowledge while the female teachers have 86%, indicting very high level of knowledge on the effects of COVID 19 Pandemic in Abakaliki Education Zone of Ebonyi State. The table also indicated that the respondents possessed high level of knowledge and very high level of knowledge in all the item statements on the effects of COVID 19 Pandemic in Abakaliki Education Zone of Ebonyi State.

Table 4: Level of Teachers' Knowledge on the Safety Measures of COVID-19 Pandemic

S/N	Item Statements		No of Males 50		No of Femal		males 100
		F	%	Decision	F	%	Decision
16	The best way to prevent and slow down COVID-19 transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads.	33	47	MLK	107	82	VHLK
17	A person should protect himself and others from infection by washing his hands or using an alcohol based rub frequently and not touching his face.	42	60	HLK	82	63	HLK
18	Avoid large events and mass gatherings.	51	73	HLK	111	85	VHLK
19	A person should avoid close contact (within about 6 feet, or 2 meters) with anyone who is sick or has symptoms.	37	53	MLK	103	79	HLK
20	People should stay home as much as possible and keep a distance between themselves and others (within about 6 feet, or 2 meters), especially if they have a higher risk of serious illness.	63	90	VHLK	125	96	VHLK
21	A person should wash his hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.	47	67	HLK	120	92	VHLK
22	People should cover their faces with cloth face masks in public	61	87	VHLK	121	93	VHLK

	spaces, such as the grocery store, where it is difficult to avoid close contact with others.						
	close contact with others.						
23	Cover A person should cover his or her mouth and nose with	42	60	HLK	127	98	VHLK
	his or her elbow or a tissue when he or she coughs or sneezes.						
	Used tissue. should be thrown away and hands washed right away.						
24	Touching somebody's eyes, nose and mouth should be	56	80	VHLK	114	88	VHLK
24	avoided.	30	80	VIILK	114	00	VILK
25	Sharing dishes, glasses, towels, bedding and other household	63	90	VHLK	107	82	VHLK
23	items should be avoided if someone is sick.	03	90	VIILK	107	62	VIILK
26	People should stay home from work, school and public areas if	56	80	VHLK	120	92	VHLK
20	they are sick, unless they are going to get medical care.	30	80	VIILK	120	92	VIILK
27	A person should clean and disinfect high-touch surfaces, such	61	87	VHLK	126	97	VHLK
21	as doorknobs, light switches, electronics, counters, etc.	01	07	VIILIX	120	71	VIILK
28	People should avoid public transportation, taxis and ride-	65	93	VHLK	107	82	VHLK
_0	sharing if they are sick.	32	,,,	, 11211	107	02	V 11211
29	If somebody has a chronic medical condition and may have a	47	67	HLK	116	89	VHLK
	higher risk of serious illness, he or she should check with his or						
	her doctor about other ways to protect themselves						
30	Recent travel from or to any residence in an area with ongoing	56	80	VHLK	108	83	VHLK
	community spread of COVID-19 should be avoided.						
	Grand Percentage		74	HLK		87	VHLK

Key: LLK = Low level of Knowledge, MLK = Moderate level of Knowledge, HLK = High

level of Knowledge, VHLK = Very High level of Knowledge

Data in Table 4 indicated the percentage responses on the level of teachers' knowledge on the safety measures of COVID 19 Pandemic in Abakaliki Education Zone of Ebonyi State. The table revealed that male teachers have a grand percentage score of 74% which indicates high level of knowledge while the female teachers

have a grand percentage score of 87% showing very high level of knowledge of safety measures of COVID-19 pandemic.

IV. Discussion

Table 2 revealed a moderate level of knowledge of the causes of COVID-19 pandemic with 62% and 68% for male and female teachers respectively. This is not surprising because globally, people started hearing about COVID-19 and its causes. Victor, (2020) confirmed that recent travel from or to a residence in an area with ongoing community spread of COVID-19 and close contact with someone who has COVID-19 for more than 5 minutes or being coughed or sneezed on by an infected person is also a risk factor in the spread of COVID 19.

From the analysis carried out, the findings of the study showed the percentage responses on the level of knowledge of COVID-19 for secondary school teachers in Abakaliki Education Zone based on gender. Table 2 and 3 revealed high level of knowledge for males and very high level of knowledge for females on the effects and safety measures of COVID 19 pandemic. The result indicated that the female secondary school teachers possess very high level of knowledge of causes and safety measures of COVID-19 pandemic. The finding was surprising since males are by virtue of status listen to news and watches television at homes and however should have possessed higher level of knowledge of the effects and safety measures of COVID 19 pandemic. foractive ageing than their male counterparts. The findings support the assertion of Victor, (2020) who submitted that well trained females are more likely to have basic knowledge on global issues.

V. Conclusion

Corona viruses can mutate effectively, which makes them so contagious. To prevent transmission, people should stay at home and rest while symptoms are active. They should also avoid close contact with other people. Covering the mouth and nose with a tissue or handkerchief while coughing or sneezing can also help prevent transmission. It is important to dispose of any tissues after use and maintain hygiene around the home. Based on the literature review and the findings of the study it was concluded that secondary school teachers in Abakaliki Education Zone of Ebonyi State possess a high level of knowledge on the causes, effects and safety measures of COVID 19 Pandemic. In addition, the female teachers possess a very high level of knowledge on the causes, effects and safety measures of COVID 19 Pandemic than their male counterparts.

VI. Recommendation

Having determined the level of knowledge on the causes, effects and safety measures of COVID 19 Pandemic, it is therefore recommended that:

- 1. Media houses and advertisment should be used to roll updates on COVID-19.
- 2. Teachers should be exposed to all measures that would help to eradicate the spread of COVID -19 pandemic.
- 3. Seminars, workshops and conferences should be organized to teach and retrain teachers on the causes, effects and safety measures of COVID 19 Pandemic.
- 4. Collaborative efforts of the general public should be encouraged in strengthening awareness on the safety measures to minimize and eradicate the spread of COVID-19.
- 5. Public health workers as well as other health agencies should use all the available social settings in disseminating health information specifically on safety measures of COVID 19 Pandemic.

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