

## **Social Work Education Intervention Strategies and Covid-19 Prevention Among Catholic Christian Organizations in Southern Cross River State, Nigeria**

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### **Abstract**

The study investigated social work education intervention strategies which resulted in post COVID-19 adjustment among Catholic Christian organizations in Southern Senatorial District of Cross River State, Nigeria to achieve this purpose, five hypotheses were formulated and tested at 0.05 level of significance. Review of literature was carried out in accordance with the variables of the study. Ex-post-facto research design was used for this study. The target population of the study comprised of all the Catholic faithful in Catholic churches in Southern Senatorial District of Cross River State. The estimated population of Catholic Church members in Southern Senatorial District of Cross River State is 52,698 parishioners including the Priest and the Religious. Simple random and accidental sampling techniques was adopted for the study. The sample of the study comprised of 768 parishioners in the sampled Catholic churches. The instrument used for data collection in this study is a questionnaire titled Social Work Education Intervention Strategies and Covid-19 Prevention Questionnaire” (SWEISCPQ). The instrument was validated by experts in Test and Measurement from the University of Calabar. Data analyses were carried out using Pearson product moment correlation analysis. Findings of the study revealed that the p-value of .000 is Significant at .05 level;  $p < .05$  which implied that; Covid-19 awareness creation and availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) are significantly related to post Covid-19 adjustment among Catholic Christian Organizations in the Southern Senatorial District of Cross River State. Based on these findings, it was recommended among

others that more effort should be made by the government to promote awareness of infectious diseases such as Covid-19 to prevent resurfacing of the disease.

**Key Word:** Social work education intervention strategies, post COVID-19 adjustment

## **Introduction**

The coronavirus pandemic was an uncharted situation that shook the world and completely changed the everyday lives of many individuals. This has resulted in countries of the world gathering resources, both intellectual and financial, to combat a common enemy. In spite of these, during the early 2020 there was an increase in the spread of the virus globally with countries recording deaths. Reports during the pandemic indicated that the countries most affected by this pandemic were located in Europe and North America. The pandemic caused global health impacts; social, economic, educational, and agricultural disruption; panic buying; widespread supply and food shortages; and postponement or cancellation of events and many death recorded (World Health Organisation, 2020).

Coronavirus disease 2019 (COVID-19) is a contagious disease caused by the virus SARS-CoV-2. The first known case was identified in Wuhan, China, in December 2019 (*Page, Hinshaw & McKay, 2021*). The disease quickly spread worldwide, resulting in the COVID-19 pandemic. It began as a form of pneumonic cases in the province. The cases were reported to the World Health Organisation (WHO) country office and it was discovered to be a new strain of the SARS-CoV virus of 2002. The name Covid-19 was given to the virus by the WHO on the 11th of February, 2020. It is an acronym which stands for CoronaVirus Disease of 2019. The symptoms associated with the disease were common to that of the common cold. They include fever, cough, shortness of breath, loss of smell. However, the complications were of a greater degree than the symptoms as it could lead to pneumonia, viral sepsis, acute respiratory distress syndrome, kidney failure, etc. The complications over time have been said to worsen based on the health status of the individual. (WHO, 2020)

The virus is not airborne but can be spread in various ways. It is primarily spread amongst people during close contact. If droplets from infected persons fall on surfaces, people could get infected by touching an already contaminated surface. Various studies have shown that the half-life of the virus outside the human body is temperature and humidity dependent, hence, different regions can have different rates of spread.

On 28 January 2020, the Federal government of Nigeria assured citizens of the country of its readiness to strengthen surveillance at five international airports in the country to prevent the spread of coronavirus.<sup>[11]</sup> The government announced the airports as Enugu, Lagos, Rivers,

Kano and the FCT. The Nigeria Centre for Disease Control also announced same day that they had already set up coronavirus group and was ready to activate its incident system if any case emerged in Nigeria

On 26 February, a Chinese citizen presented himself to the Lagos State government on suspicion of being infected with coronavirus. He was admitted at Reddington Hospital and was released the following day after testing negative. As the number of confirmed cases of COVID-19 continued to increase across Nigeria, the Federal government of Nigeria declared a total lockdown from 30th of March 2020 to 15th of May 2020, as part of the global effort to mitigate the spread of the COVID-19 virus

Pandemic of this magnitude disorganizes the socio-economic activities of a society which include the religious affairs. Despite progressing secularization, both religion, churches, and denominational associations have an impact on individual ethical choices and business decisions. This is true especially in Calabar, Cross River State, where over 90 percent of the citizens declare affiliation with some religion, mostly Christian. While changing the organization of religious life, the churches-maintained contact with the believers in various ways, using modern technologies and access to public media in this regard. Although the churches are not changing their doctrinal positions, they declare different forms of cooperation.

The individual churches at the heat of the covid-19 have limited (Catholic and Orthodox) or totally suspended (Protestants) their religious life in the actual community-based dimension. While some Pentecostal churches still find ways of having a close meeting with her members. Despite, these apparent oppositions by many people to abide by the tenet of Covid-19 prevention, religious organizations such as the Catholic Church played crucial roles in the fight to limit the spread and community transmission of the virus. It equally, assisted in ameliorating the plights of citizens during lockdown when most businesses, markets and communities were shutdown. The archdiocese also directed that Holy Communion shall be received on the palms instead of directly in the mouth. Use of hand sanitizers was encouraged and the use of holy water fonts forbidden

The increased demand for trained social work and mental health professionals is necessitated by the disaster-prone and fast-changing world, and it is envisaged that future pandemics might bring with them, unthinkable levels of psychological trauma. With this in mind, Brinkerhoff (2014) noted that social work institutions are to increase investment in the education of students and practitioners of social work, in the areas of trauma response and

specialized methods of critical incidence stress debriefing. This will effectively help prepare the social work profession for pandemics and disasters, while enhancing efficiency and responsiveness in disaster relief, and various efforts that are geared towards providing stress management, as well as social and mental health services to survivors of a pandemic. In doing all these, attention should be paid to support needs of the victims and survivors

The Social work profession provides unique services to the people during disaster, pandemic and other public emergencies. Social workers play fundamental roles in disaster response, recovery and disaster preparedness planning for future occurrences and appropriate professional social work services are to be mandatory in the outbreak of emergencies and pandemics. Despite the huge number of confirmed infections and deaths attributed to the COVID-19 pandemic, there are millions of people around the world reported to have recovered from it, and there is no doubt that many of the survivors will require as well as find their way in palliative and/or non-curative care services. In this situation, social workers are to provide the best and most compassionate care that can possibly be provided which also includes adequate planning (Rosoff, 2008).

In the face of racial, gender, and ethnic discrimination being experienced by marginalized groups globally, the COVID-19 pandemic in developing countries comes with a high degree of stigma and discrimination especially on the survivors and infected persons. This therefore called for the intervention of the social workers to serve and protect the most vulnerable people during a pandemic such as COVID-19. Amadasun (2020) noted that “responding to social problems emanating from public social and healthcare challenges is the social work profession and addressing COVID-19 in terms of its grievous fallout on social conditions as a whole and in the lives of individuals, families and households, groups, and communities in specific, is a professional imperative”. A variety of mental health supporting strategies are required in pandemic areas to facilitate the lifestyle changes and re-adaptation activities required after the occurrence of outbreaks (Wang et al., 2020; Xiang et al., 2020), and this falls within the purview of the social work profession to provide.

The goal of social work profession is to advance social cohesion and stability, promote social change development through empowerment and liberation of people as well as restoring social functioning, while championing respect for the sanctity of life and drawing on the ideals of social justice and human dignity (Amadasun, 2020b). Considering this, social workers have the responsibility of playing crucial and frontline role of helping and supporting communities that are affected by COVID-19. Responsibilities of social workers are not limited to the fight against the spread of COVID-19, ensuring inclusion of the most

vulnerable in planning and response, organizing communities in ensuring the availability of essential items like food and clean water, advocating for social inclusion of the most vulnerable into the social service system, as well as facilitating physical distancing and social solidarity through campaigns and orientation programs (International Federation of Social Works (IFSW), 2020). Social workers must recognize that stigma fuels the isolation of people and blocks access to care and support which in turn contributes to the continued spread of disease. With this, social workers must step up to the role of creating awareness as well as combating myths about the pandemic, fear and stigma in intense environments.

The social work role given the delirious invasion of pandemics on families and individuals is within the healthcare systems as well as within poor households having inadequate, or no medical health insurances and/or lacking the knowledge on how to secure one. In light of this, the social workers' role must be that of a counsellor, educator and referral linkage to the health care facilities. Given that individuals and families find comfort in a variety of certain factors, the social workers' interventions in these roles are to be channeled to strength-based practices, relationship building strategies and resilience coupled with a blend of spirituality. Older persons are the most at risk group for COVID-19. Maintaining physical distancing has limited social workers' interaction and care for the older people. Social workers are to explore leveraging on, and promoting kinship care and support practices as an alternative mechanism to meeting the welfare of older people (Cudjoe & Abdullah, 2020). In the case of death of parents or guardians in a pandemic, social workers are to provide safe spaces for children or minors ensuring that they get proper shelter, health care and nutrition. This will eradicate or reduce the psychological trauma that the children might experience because of lack of parental care, stigma, or rejection by other family members for fear of contamination.

Social workers' role includes advocating for social inclusion of the most vulnerable into the social policy service system in the face of a pandemic. Given that the response platforms are provided by and within organizations while communities are at the receiving end, the engagement in social inclusion advocacy becomes paramount to ensuring social protection for the vulnerable or marginalized members of the society. In doing this, advocacy could be done on different policy response levels depending on its appropriateness for the prevailing conditions. This could be for short-term policy actions such as, cash transfers or distribution of in-kind items such as food, etc. to the most economically disadvantaged households. On the other hand, the advocacy could be for long-term policy options which mostly will revolve around provision of affordable healthcare plan for the most vulnerable population, investment in health and social care facility infrastructures, affordable housing, etc.

The International Federation of Social Works (IFSW), 2020 noted that as a profession, the social workers' responsibility is the advocacy for health and social service system strengthening and advancement, which are very important in protecting people against the virus, curbing inequalities and reducing social and economic challenges of the society. Also, social workers must play a key role in the mobilization of communities, organizations/groups and facilitating connections between the systems of care set up by government and the community-based systems such as the community/district social welfare workers, child protection officers and community development officers.

There has been in the past, different levels of unverified messages that has been passed through different media platforms most especially the social media in the period of outbreaks such as COVID-19, EBOLA, SARS, etc, majority of them are misleading and could cause more harm to the ignorant population. Effective communication, orientation and educating the public on the pandemic is a very important role that must be played by social workers in the light of this development. This is to keep the society well informed about the true state of affairs as regards the pandemic as well as avoid social disruptions caused by fear, rumors or neglect by appropriate authorities.

Emphasis is made on the importance of carrying out these roles in line with the professional values of social work practice which includes service, human rights, integrity, social justice, human dignity, confidentiality, and human relationships. Concerning pre-death and post-death preparedness and organization of social workers, it is important to consider their relevant role to provide psychological interventions to alleviate potential prolonged grief disorder in the pandemic context and combating fear and stigmatization of covid-9 on affected communities.

Although in Nigeria and indeed Cross River state the issue of palliative was never well handled, which resulted to the destruction and looting observed in different parts of Nigeria in 2020. The role of social worker cannot be over emphasized. Based on the aforementioned, the researcher was poised to investigate how social work education intervention strategies related with covid-19 prevention among members of selected Christian organizations in Southern Senatorial District of Cross River State.

### **Purpose of the study**

1. Investigate the extent to which social works education programme awareness creation relate to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State.

2. Ascertain the extent to which availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) relate to post covid-19 adjustment among Catholic Christian organizations in Southern Senatorial District of Cross River State

### **Research questions**

The following research questions are posed to guide the study

1. To what extent does covid-19 awareness creation relate to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State?
2. To what extent does the availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) relate to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State?

### **Statement of hypotheses**

The following null hypotheses was formulated to guide the study.

1. There is no significant relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State
2. The availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) is not significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State

### **Literature Review**

#### **Covid-19 Awareness Creation and Post Covid-19 Adjustment among Christian Organization**

Lee, Lim, Xavier and Lee (2021), carried out a study they titled “A Divine Infection”: A Systematic Review on the Roles of Religious Communities During the Early Stage of COVID-19. The objective of this systematic review was to summarize the roles that religious communities played during the early stage of COVID-19 pandemic. Seven databases were searched and a total of 58 articles in English published between February 2020 and July 2020 were included in evidence synthesis. The findings of the literature showed diverse influences of religion as a double-edged sword in the context of COVID-19 pandemic. Religious communities have played detrimental and/or beneficial roles as a response to COVID-19 pandemic. A collaborative approach among religious communities, health science, and government is critical to combat COVID-19 crisis and future pandemics/epidemics.

Religion has played a significant role in public health crises, such as with the spread and mitigation of HIV/AIDS and other infectious diseases (Blevins et al., 2019; Idler, 2014; Pugh, 2010). However, the complex dynamics between religion and infectious diseases has been largely overlooked and understudied (Kawachi, 2020; Ransome, 2020), especially within an interdisciplinary framework. In this context, more research on clarifying the association between health and religion as an important social determinant of health is needed to provide a deeper understanding of religion's role in individual and community health (Kawachi, 2020; Ransome, 2020). As we are currently living in the COVID-19 era, addressing the role of religion in the context of COVID-19 is timely and necessary (Carey, 2020; Hart & Koenig, 2020). Therefore, the objective of this systematic review was to summarize the roles religious communities play in the transmission, mitigation, and/or adaptation during the early stage of COVID-19.

A cluster of acute respiratory disease of unknown ethology emerged in Wuhan, China during late December of 2019. On the 7<sup>th</sup> of January, isolation of novel coronavirus (nCoV), which was later named coronavirus disease (COVID-19) by the World Health Organization (WHO), was implicated as the cause of the outbreak. Since then, cases of COVID-19 have been on the rise over the entire globe (Guo, Cao, Hong, Tan, Chen and Jin, 2020).

Osei-Tutu, Kenin, Affram, Kusi, Adams and Dzokoto (2021), carried out a study on Ban of Religious Gatherings during the COVID-19 Pandemic: Impact on Christian Church Leaders' Well-Being in Ghana. This study was conducted during a period of lockdown and ban on social gatherings, including religious gatherings, in Ghana. The restrictions were instituted in response to the COVID-19 pandemic. The purpose of the study was to understand how the well-being of Christian church leaders was impacted during the prohibition in terms of aspects of their vocation and religious practices. Fourteen Christian church leaders located in urban and rural settings in Ghana, with 5 to 32 years of experience, discussed how they and their families were impacted by the ban on religious gatherings in Ghana. Findings revealed negative impacts of the COVID-19 restrictions, including spiritual slacking, loss of fellow-ship, disruption of normal routine, pandemic anxiety, and financial stress. Positive impacts included increased faith, relief/reduced stress, and increased family time. These findings are discussed from psychological trauma and disaster response perspectives.

Mafrachi, Alni and Shkara (2021), carried out a study on Awareness and perception of COVID-19 among the general population: A Middle Eastern survey. According to the researchers, due to the sudden emergence of the novel coronavirus as a worldwide pandemic,

this study aimed to evaluate the awareness and practices of both the Jordanian and Iraqi populations during the early stages of the pandemic. A cross-sectional survey was conducted between the 19<sup>th</sup> and 22<sup>nd</sup> of March to assess the public's awareness toward COVID-19. Multiple scored domains were used to assess the differences between the two populations. Statistical analysis was conducted to reveal the influence of socio-demographic variables on these scores. A total of 3167 participants were recruited in the study, of which, 1599 (50.5%) were from Jordan and 1568 (49.5%) were from Iraq. More than half of the Jordanian (56.8%) and Iraqi participants (53.2%) showed average or adequate awareness about COVID-19. More than 60% of both populations relied on medical staff for COVID-19 related information. Social media was the second most common COVID-19 information source, as it was reported by 53.7% of Jordanian participants and 62.8% of Iraqi participants. More than 90% of both populations participated in precautionary measurements. Finally, about 20% of both populations failed to recognize droplet inhalation as a source of transmission. Despite the portrayed awareness levels, governmental involvement is warranted to increase the public's awareness and fill the gaps within their knowledge. In the light of lacking consistent effective treatment, the best way to deal with the highly infective virus is by mitigating the spread of the virus. Several precautionary measurements are recommended to control the COVID-19 spread

Shaukat, Asghar and Naveed (2021), carried out a study on Impact of Health Literacy on Fear of Covid-19, Protective Behaviour, and Conspiracy Beliefs: University Students' Perspective and Conspiracy Beliefs: University Students' Perspective. According to the authors, Health literacy is an essential to respond proactively to pandemic situations like Covid-19. It helps the general public to reduce the spread of infectious diseases, prevent from over-reactions, reduce carelessness, adopt health protective behaviour. The purpose of this research was to examine the impact of health literacy on fear of Covid-19, protective behaviour, and conspiracy beliefs of university students in Pakistan. A cross-sectional survey using an online questionnaire was conducted at two public sector universities in Punjab with permission. A total of 271 received responses were analyzed by applying both descriptive and inferential statistics in SPSS. The results indicated students' gender had a relationship with their health protective behaviour indicating that female students were more likely to adopt health protective behaviour as compared to male students. Besides, the students' health literacy did not predict their fear of Covid-19 and conspiracy beliefs. However, the health literacy of university students predicted their health protective behaviour which meant that the students with better health literacy likely to adopt health protective behaviour related to Covid-19 infection. There was a need for promotion of health literacy related to Covid-19 to fight not only the current pandemic situation but also an infodemic associated with it. These

results are useful for policymakers, health professionals, university and library administration for promoting health and creating awareness related to Covid-19 pandemic. It would also be helpful in developing useful directions for health literacy programs promoting health education and protective behaviour to avoid and management Covid-19 infection. This research would make a worthy addition to existing research on health literacy as limited empirical studies have been conducted so far

Habib, Dayyab, Iliyasu, and Habib (2021), carried out a study on Knowledge, attitude and practice survey of COVID-19 pandemic in Northern Nigeria. According to the authors, pandemic of coronavirus disease 2019 (COVID-19) emerged and affected most of the world in early 2020. To inform effective public health measures we conducted a knowledge, attitude and practice (KAP) survey among a Hausa Muslim society in Nigeria in March 2020. The study is an analytic cross-sectional survey with questionnaires administered to the general population including Health Care Workers (HCW) in Kano, Nigeria. Participants were recruited by convenience sampling following informed consent. The percentage of KAP scores were categorized as good and poor. Independent predictors of good knowledge of COVID 19 were ascertained using a binary logistic regression model.

The questionnaire was administered among urban 32.8%, peri-urban dwellers 32.4%, and to online participants 34.8%. The peri-urban and urban participants were given paper questionnaires. There were 886 study participants with mean age 28.58yrs [SD:10.25] (Inter-quartile range [IQR]:22yrs–32yrs), males 55.4% with 57.3% having had or were in tertiary education. Most participants were students 40% and civil servants 20%. The overall mean [standard deviation (SD)] for knowledge, attitude and practice scores expressed in percentage was 65.38%[SD15.90], 71.45% [SD14.10], and 65.04% [SD17.02] respectively. Out of the respondents, 270(30.47%) had good knowledge (GK), 158(17.8%) had good attitude (GA), and 230(25.96%) had good practice (GP) using cut-off scores of 75%, 86.5%, and 75% respectively. Over 48% did not agree COVID-19 originated from animals while 60% perceived the pandemic to be due to God's punishment. Also, 36% thought it was a man-made virus. When rating fear, most respondents [63.5%] had marked fear i.e. 7 out of 10 and 56% admitted to modifying their habits recently in fear of contracting the virus. As regards attitude to religious norms, 77.77% agreed on cancellation of the lesser pilgrimage as a measure to curb the spread of the disease while 23.64% admitted that greater pilgrim- age (Hajj) should proceed despite the persistence of the ongoing pandemic.

Kowalczyk, Roszkowski, Montane, Pawliszak, Tylkowski and Bajek (2020), carried out a study on Religion and Faith Perception in a Pandemic of COVID-19. According to the

authors, the COVID-19 pandemic has impacted religion and faith in different ways. Numerous restrictions have been implemented worldwide. Believers are in conflict with authorities' warnings that gatherings must be limited to combat the spread of the virus. Religion has always played a role of the balm for the soul, and the regular religious participation is associated with better emotional health outcomes. In our study, we examined whether the exposure to COVID-19 enhances the faith. The instrument used was a survey verifying the power of spirituality in the face of the coronavirus pandemic.

### **Availability of Covid-19 Prevention Gadgets (Hand Sanitizers, Face Mask Etc) and Post Covid-19 Adjustment among Christian Organizations**

A well-supported, appropriately equipped, empowered, and protected social service workforce is essential to mitigating the damaging effects of the COVID-19 pandemic. Social service workers can build on their existing strong ties to children, families, and communities to rapidly respond in ways that are effective. However, to do so, they must stay safe and healthy. This document is intended to provide guidance on how to support the social service workforce and empower them to safely serve children, families, and communities during the COVID-19 pandemic. This guidance is for governments, non-governmental organizations, social service workers, and their supervisors

National governments have responded in a variety of ways to the pandemic, making policy decisions and taking actions in response to both health and economic demands. Measures taken have included the imposition of 'lockdowns' in which businesses, schools and commercial outlets have been closed and individuals advised to remain at home, except for essential services such as purchasing food or receiving medical attention. Social distancing and wearing face masks have been implemented as either a compulsory or a recommended action in many countries. The closure of schools, universities and other educational establishments as a result of this pandemic has impacted the lives of more than 60 per cent of the student population internationally. According to the UN Educational, Scientific and Cultural Organization (UNESCO), the number of students affected by school and university closures in 138 countries has nearly quadrupled to 1.37 billion, representing more than three out of four children and youth worldwide. In addition, at the time of writing this report, nearly 60.2 million teachers were no longer in the classroom (UNESCO 2020).

National governments have responded by providing additional support for digital learning and increasing the use of broadcast media, though the extent to which this has been accessed and effective in supporting learning is unknown. In April 2020, the United Nations warned

that the pandemic was becoming a major human rights issue in which the most marginalised and poorest members of society were likely to be most affected. The potential long-term damage to the educational, social and economic welfare of these individuals and groups could be catastrophic. The reaction of governments and education policy managers has understandably had to be swift and, as a result, may not necessarily have been well thought out. The closure of schools is widely seen to have been a sensible precaution, though because of the haste with which decisions were taken, there was little time for effective planning to provide support for school-age children learning at home. Two leading economists from the University of Bristol have stated: Teaching is moving online, on an untested and unprecedented scale. Student assessments are also moving online, with a lot of trial and error and uncertainty for everyone.

Many assessments have simply been cancelled. Importantly, these interruptions will not just be a short-term issue, but can also have long-term consequences for the affected cohorts and are likely to increase inequality (Burgess and Sievertsen 2020). The need to monitor this situation, both now and in the long term, is important if we are to address the possible negative impact on school-age learners. Research such as that reported in the chapters that follow can make a small contribution to our appreciation of the challenges being faced by individuals, communities and schools

Since the first cases of the Coronavirus Disease 2019 (COVID-19) were confirmed in Asia in late December 2019, the virus has spread rapidly across the globe. It has impacted social and economic life in ways that have given new meaning to the expression ‘new normal’. Countries continued to feel the impact of the spread of the disease, with schools in 22 countries on three different continents closing their doors by mid-March 2020. This resulted in more than 290 million students not having access to education in physical classroom environments (UNESCO 2020). Most national ministries of education quickly pivoted to emergency remote instruction for business continuity during the early phase of the pandemic, but questions have been raised about preparedness and whether teachers, school administrators, students and their parents were equipped for this move to online instruction (RAND Corporation 2020; UNESCO 2020c). Questions have pointed to the need for a unique skill set for educators and parents to transition successfully from teaching and learning in a face-to-face mode, given that pedagogical practices cannot transfer seamlessly to remote instruction. Schools from early childhood to the secondary level have been impacted across many countries globally. While restrictions on movement continue to be gradually lifted in most countries, public education systems, in which classrooms are not designed for the three to six feet (1–2 metre) of physical distancing recommended as one of

the measures to stop the spread of the virus, have been slow to respond. Hence remote instruction is likely to continue as the virus continues to spread. Some countries have provided the tools needed for students to succeed, including internet-enabled devices and emergency or 'just in time' training for teachers.

According to Ogundipke (2020), in his review he termed 'Nigeria is neglecting social workers in the fight against COVID-19. Why it shouldn't'. According to the author in current debates about managing and defeating COVID-19 in Nigeria, an issue that's missing is the role that social workers should play. In many countries social workers have played a central role in efforts to contain the spread of the SARS-CoV-2 virus, and to manage its fallout. In China they are celebrated for their exceptional roles. The same is true in the US, Italy, New Zealand, and the UK. This reflects the fact that running healthcare sectors involves a multidisciplinary approach. It includes professionals cutting across the medical, engineering, behavioural and social sciences. These various professionals are expected to cover specific areas of competence. This, in turn, should lead to speedier delivery of health services since they will be less distracted with tasks and responsibilities outside their training (Amadasun, 2020).

### **Research Methodology**

The Ex-post facto research design is considered suitable for the study. Ex-post facto literally means 'after the fact'. The study area is Southern Cross River State. The Southern Senatorial District of Cross River State is located between latitudes  $4^{\circ}28'$  and  $6^{\circ}31'$  North of Equator, and longitudes  $7^{\circ}50'$  and  $9^{\circ}28'$  East of the Greenwich Meridian. It covers an area of 18,074, 4.35km<sup>2</sup>. The area contains seven Local Government Areas namely Calabar South, Calabar Municipality, Akpabuyo, Bakassi, Odukpani, Akamkpa and Biase respectively. The target population of the study comprised of the Catholic faithful in Catholic churches in Southern Senatorial District of Cross River State. The estimated population of Catholic Church members in Southern Cross River State is 52,698 parishioners including the priest and the religious. Simple random and accidental sampling techniques was adopted for the study. The sample of the study comprised of 768 parishioners in the sampled Catholic churches. The research instrument (questionnaire) tagged "Social Work Education Intervention Strategies and Covid-19 Prevention Questionnaire" (SWEISCPQ) was used to collect data from the sampled respondents in the study area. The introductory part of the questionnaire will be designed to explain the objective of the study to the respondents so as to solicit their cooperation to respond to the questionnaire and to speed up the study. The research instrument is a 20 (items) questionnaire. Items 1 – 5 measured awareness creation. Items 6 – 10 measured availability of covid-19 prevention gadgets while 11- 20 measured the

dependent variable which is covid-19 prevention among members of selected Christian organizations. The questionnaire is a four-point likert scale type with responses options ranging from strongly agree (SA) 4 point, agree (A) 3 points, Disagree (D) 2points and strongly disagree (SD) 1 point for positively worded question and reverse for negatively worded questions. The questionnaire was validated by two experts in Measurement and Evaluation and one from Continuing Education Department, both from University of Calabar, Calabar Cross River State. To determine the reliability of the instrument, the instrument was administered to fifty (50) randomly selected respondents from the study area that were not used for the actual study. The Cronbach alpha method of analysing instrument reliability was employed to test the instrument reliability for this study. The score obtained ranged between 0.77 and 0.93 which is considered high. Hence the instrument was deemed reliable. This research work involved the collection of data through a questionnaire, which was administered to respondents by the researcher and the two trained research assistants. In the Catholic church Parishes sampled for the study.

### **Presentation of results**

This section presents the data analysis of data based on hypothesis of the study outlined. This is trailed by. The hypotheses were tested at 0.05 degree of freedom.

**HO<sub>1</sub>:** There is no significant relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State, The independent variable is covid-19 awareness creation, while the dependent variable is post covid-19 adjustment. In testing this hypothesis, Pearson Product Moment Correlation (PPMC) was used. The result of data analysis is presented in Table 1

**Table 1:** Pearson Product Moment Correlation (PPMC) of relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State

Variables	$\bar{x}$	SD	r-ratio	df	p-level
Covid-19 awareness creation (X)	10.996	1.51717	.102*	766	.002
Post covid-19 adjustment (y)	26.460	2.10173			

\*Significant at .05 level;  $p < .05$ .

The finding Table 1 uncovered that covid-19 awareness creation had a mean score of 10.996 with a standard deviation of 1.517 while post covid-19 adjustment had a mean score of

26.460 with standard deviation of 2.10173. The outcome further showed that the r-calculated value of 0.102 is significant at .05 level of significance and 766 degrees of freedom. Also, the  $p < .002$  is less than  $p < .05$ . In light of this, the null hypothesis which expressed there is no significant relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State was rejected indicating that there is a significant relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State.

**HO<sub>2</sub>:** The availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) is not significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State. In this hypothesis the independent variable is availability of covid-19 prevention gadgets while the dependent variable is post covid-19 adjustment. In testing this hypothesis, Pearson Product Moment Correlation (PPMC) was used. The result of data analysis is presented in Table 2.

**Table 2:** Pearson Product Moment Correlation (PPMC) of relationship between availability of covid-19 prevention gadgets and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State

Variables	$\bar{x}$	SD	r-ratio	Df	p-level
Covid-19 prevention gadgets (X)	12.746	1.77570	.111*	766	.001
Post covid-19 adjustment Y)	26.460	2.1017			

\*Significant at .05 level;  $p < .05$ .

The finding Table 2 showed that availability of covid-19 prevention gadgets had a mean score of 12.746 with a standard deviation of 1.776 while post covid-19 adjustment had a mean score of 26.460 with standard deviation of 2.1017. The outcome further showed that the r-calculated value of 0.111 is significant at .05 level of significance and 766 degrees of freedom. Also the  $p < .001$  is less than  $p < .05$ . With reference to this result, the null hypothesis which stated that The availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) is not significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State was rejected showing that the availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) is significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State.

### **Discussions of findings**

The result of the first hypothesis revealed that there is a significant relationship between covid-19 awareness creation and post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State. This assertion therefore means the better the post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State. The finding of this study is in consonance with Pandey, Dupta, Bhansali, Balhara, Katira and Fernandes (2020), who carried out a study on Corona Virus (COVID-19) Awareness Assessment -. The results revealed that a considerable percentage of individuals learned about the pandemic through social media and news and were aware of the mode of spread of the virus and also steps to be taken to prevent it from spreading. But considerable percentage of people was also not fully aware regarding the age groups this virus will be affecting. Upon understanding the percentage of people not aware about the age groups this virus will be affecting, keeping in mind good amount of knowledge amongst individuals about maintaining hygiene and social distancing, this survey would help the health care workers to create awareness regarding the effect of this virus on different age groups to help prevent carelessness amongst youth in following the regime

The result of the second hypothesis revealed that the availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) is significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State. This conclusion therefore means the more the availability of covid-19 prevention gadgets (hand sanitizers, face mask etc) the better the post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State. The result of this analysis is in harmony with UNESCO (2020), stating that A well-supported, appropriately equipped, empowered, and protected social service workforce is essential to mitigating the damaging effects of the COVID-19 pandemic. Social service workers can build on their existing strong ties to children, families, and communities to rapidly respond in ways that are effective. However, to do so, they must stay safe and healthy. This document is intended to provide guidance on how to support the social service workforce and empower them to safely serve children, families, and communities during the COVID-19 pandemic. This guidance is for governments, non-governmental organizations, social service workers, and their supervisors

### **Conclusion**

Based on the result of the study the following conclusions were reached that: Covid-19 awareness creation and availability of covid-19 prevention gadgets (hand sanitizers, face

mask etc) are significantly related to post covid-19 adjustment among Catholic Christian organizations in the Southern Senatorial District of Cross River State.

## Recommendations

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

- 1 More effort should be made by the government to promote awareness of infectious diseases such as Covid-19 to prevent the spread or resurfacing of the disease
2. There is need for people to keep to the prescribed rule against infectious diseases by using the prescribed drugs and or preventive gadgets
3. A Seminar or workshops should be organized to sensitize the public against the fear of infectious diseases but just to keep to the preventive guidelines and feel safe and secured

## References

- Amadasun, S. (2020). Public Perceptions of Social Work in Nigeria: Does the Profession has What It Takes to Address Nigeria's Social Problems?', *British Journal of Social works*, 2 (3), 25-33
- Amadasun, S. (2020b) 'Social Work Services to Internally Displaced Persons: Insights from a Qualitative Study in Nigeria', *Social Work and Education* 7(1): 7–24
- Bird , S. T, Bogart LM & Delahanty, D. L. (2004). Health-related correlates of perceived discrimination in HIV care. *AIDS Patient Care STDs*. 18:19–26.
- Brinkerhoff, D. W. (2014). Accountability and health systems: toward conceptual clarity and policy relevance, *Health Policy and Planning*, 19 12- 23
- Bullinger, H. (2011). *The Second Helvetic Confession*. Altenmüster: Jazzybee Verlag Jürgen Back.
- Busari, S. & Adebayo, B. (2020). Nigeria records chloroquine poisoning after Trump endorses it for coronavirus treatment. Retrieved 24 April 2020
- Cudjoe, E. & Abdullah, A. (2020). Towards child-inclusive practices in child protection in Ghana: Perspectives from parents," *Children and Youth Services Review*, Elsevier, 119 Culture and Society in West Africa, K. G. Sour: Hans Zell Publishers.
- Guo, Y. R., Cao, Q. D., Hong, Z.S., Y, Chen, S.D., Jin,. HJ, et al.(2020). The origin, transmission and clinical therapies on coronavirus disease 2019 (COVID-19) outbreak—an update on the status. *Mil Med Research*, 2 (1)
- Han, J., & Lee, C. (2004). Ministry demand and stress among Korean American religious leaders: A briefreport. *Pastoral Psychology*, 52, 473–478.
- Ignatowski, Grzegorz, Łukasz Sułkowski, & Bartłomiej Stopczyński. (2020). The Perception of Organisational Nepotism Depending on the Membership in Selected Christian Churches. *Religions* 11: 47.

- Kawachi, I. (2020). Invited commentary: Religion as a social determinant of health. *American Journal of Epidemiology*. 2020;189(12):1461–1463
- Kinsler, J. J., Wong, M. D., Sayles, J. N., Davis, C. & Cunningham, W. E. (2007). The effect of perceived stigma from a health care provider on access to care among a low-income HIV-positive population. *AIDS Patient Care STDs*. 21:584–92.
- Liang, L., Gao, T., Ren, H., Cao, R., Qin, Z., Hu, Y., Li, C & Mei, S. (2020). Post-traumatic stress disorder and psychological distress in Chinese youths following the COVID-19 emergency. *Journal of Health Psychology*;25:1– 12
- Mafrachi B, Al-Ani, A. & Shkara M. (2021) Awareness and perception of COVID-19 among the general population: A Middle Eastern survey. *PLoS ONE* 16(4): e0250461. <https://doi.org/10.1371/journal.pone.0250461>
- Olapegba, P. O., Chovwen, C. A., Ayandele, O. & Ramos-Vera, C. (2021) carried out a study on Fear of COVID-19 and Preventive Health Behavior: Mediating Role of Post-Traumatic Stress Symptomology and Psychological Distress, *Int J Ment Health Addict*. 20(5): 2922–2933
- Osei-Tutu, A., Dzokoto, V. A., & Affram, A. A. (2021). Common presenting problems in religious lay counselling practice in Ghana. *Mental Health, Religion & Culture*, 22(8), 819–831.
- Pandey, S., Dupta, A., Bhansali, R., Balhara, S., Katira, P. & Fernandes, G. (2020). Corona Virus (COVID-19) Awareness Assessment - A Survey Study amongst the Indian Population. *Journal of Clinical and Medical Research*, 3 (2) 23-45
- Prager, D., & Joseph, T.. (2003). *Why the Jews*. New York: Touchstone.
- Ransome Y. (2020). Religion, spirituality, and health: New considerations for epidemiology. *American Journal of Epidemiology*.;189(8):755–758
- Rothan, H. A. & Byrareddy, S. N. (2020). The epidemiology and pathogenesis of coronavirus disease (COVID-19) outbreak. *J Autoimmun*:102433. pmid:32113704
- Shaukat, R., Asghar, A. & Naveed, D. A. (2021). Impact of Health Literacy on Fear of Covid-19, Protective Behavior, and Conspiracy Beliefs: University Students' Perspective and Conspiracy Beliefs: University Students' Perspective, *Library Philosophy and Practice (e-journal)*. 4620. <https://digitalcommons.unl.edu/libphil>
- Volder, Jan de. (2010). *The Spirit of Father Damian: The Leper Priest—A Saint for Our Time*. San Francisco: I
- Wildman WJ, Bulbulia J, Sosis R & Schjoedt, U. (2020).. Religion and the COVID-19 pandemic. *Religion, Brain and Behavior*.;10(2):115–117

- World Communion of Reformed Churches. (2020). Member Church News: Coronavirus Impacts and Responses. Available online: <http://werc.ch/blog/member-church-news-coronavirus-impacts-and-responses> (accessed on 8 April 2020).
- Wu, Zunyou, & Jennifer McGoogan. (2020). Characteristics of and Important Lessons from the Coronavirus Disease 2019 (COVID-19) Outbreak in China: Summary of a Report of 72 314 Cases from the Chinese Center for Disease Control and Prevention. JAMA.
- Xia, J., Tong, J., Liu, M. et al. (2020). Evaluation of coronavirus in tears and conjunctival secretions of patients with SARS-CoV-2 infection. J Med Virol 2020
- Xiao, S., Luo, D. & Xiao, Y. (2020). Survivors of COVID-19 are at high risk of posttraumatic stress disorder. Global Health Research and Policy ;5(29):1–3.