
EXPLORING THE RELEVANCE OF PHYSICAL AND HEALTH EDUCATION AS A PRIMARY SCHOOL SUBJECT IN NIGERIA

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Abstract

This paper discusses the fundamentality of the curricular of Physical and Health Education for the healthy development of primary school children in Nigeria. As a school subject, this analysis argues that the knowledge children acquire from the curricula contents of this essential subject are quintessential for the healthy development and growth of young children. It appreciates the teaching and learning of this subject in primary schools as an embankment of useful healthy skills which aid Nigeria's young children develop better, become physically stronger, and get properly equipped with the relevant intellectual and physical abilities that support healthy living, which are necessary to empower them grow and become viable citizens of Nigeria. Being a colonial legacy of the British government, this paper argues that the inclusion of this subject in the educational

curricular of Nigeria's primary school system underpins the underlying lifelong benefits which learners are able to acquire from the learning of this subject. Thus, it is the position of this paper that the teaching and learning of this subject in Nigeria's primary schools goes a long way in enriching children's knowledge and awareness about the numerous healthcare benefits and practices which this study programme offers in schools for the greater good of young learners, starting from their earliest years in school.

Keywords: Development, Education, Healthcare, Hygiene, Primary school.

Introduction

Physical and Health Education constitutes one of the major subjects studied in primary schools all over Nigeria. Essentially, this subject counts among the key study programs taught in primary schools, whose curricular contents are designed to equip young learners with relevant healthcare skills they require to maintain a sound healthy living within the community. The fundamentality of the contents of this subject for the overall healthy development of children, coupled with the numerous healthcare lessons it provides to young learners largely underpins the need for the continued retention of this essential subject on Nigeria's educational curricula. In the words of Chiawa (2009), this subject focuses on the child's acquisition of skills necessary for healthy decisions about health and behaviour. It concludes that early and proper education of the young child on the various techniques of adapting to sound physical and health education enhances his or her chances of developing strong physical and mental abilities for life.

In view of these developments, Ejifugha and Uwazie (2014) maintain the opinion that the school constitutes one major vehicle which conveys this quintessential education to young learners in Nigeria. For the government and the planners of the country's curricula for primary school education, the objectives of aiding

young children imbibe strong healthy skills from their earlier years in life remains quite fundamental. This is quite critical as the need to impart young school children with strong healthcare skills remains paramount in the program of primary school education in Nigeria.

The history behind the inclusion of Physical and Health Education in the nation's curricula for primary school education in Nigeria could be traced back to the country's earlier colonial encounter with the British government. This was an encounter which officially lasted for almost a century, having started in 1861 and officially ended on the historic date of 1st October, 1960, when Nigeria gained her political independence from the British government. Meanwhile, all through the 99 years of the British government's absolute dominance over the Nigeria's political, educational, religious, and economic developments, the responsibility of evolving relevant policies which guided their administration were put in place. Policies which enabled the imperial government of Britain exercise full authority and dominance in all areas of the country were systematically enacted (Lugard, 1922; Fafunwa, 1974; Omolewa, 2001).

Having formally assumed the responsibilities of providing formal education to the peoples of the Nigerian territory following the conclusion of the Berlin Conference in 1884/1885, the task of designing the educational curricula for the populations of school goers became eminent. The task of identifying and defining the various subjects which must be taught and learnt in primary and secondary schools within the colonial territory of Nigeria became a matter of governmental policy (Iwunna, 2011).

This led to the formal introduction of Physical and Health Education into Nigeria's educational system in 1948 as a replacement for Hygiene and Sanitation. This historic development emanated from the fact that the teaching and learning of Hygiene and Sanitation at the time faced crucial complications which militated against its effective teaching and learning in schools. As a matter of fact, the need to improve the teaching of this subject, increase its content scope, as well as support learners practice what

they learn on this subject in their daily lives at home and elsewhere, were considered quintessential. The year 1948 saw the end of the teaching of Hygiene and Sanitation in primary schools, while Health Education took its place. This led to the creation of a syllabus for Physical and Health Education in 1950 (Ministry of Education, 1950; & Mkpa, 1987).

In line with this development, Omolewa (2001) candidly observes that “the colonial rulers decided the curriculum in the light of what they perceived as the priority needs of Nigerians.” This is an indication that the choice of school subjects as well as the curricula contents of the subjects approved for study all over the country’s educational system was designed by the British government, putting into perspective the specific areas of need which the expatriate authorities deemed fit for their Nigerian subjects.

Putting these positions into context therefore, Driberg (1932), in Omolewa (2001) poses the following question: “what are the things the savage has to learn if he is to play the part which his society demands of him?” As a response to this question, the source strongly advocates that “the two most important things are the maintenance of life and the perpetuation of his species. He has therefore to have a thorough knowledge of all the economic activities of his tribe and of all the circumstances which may affect them such as insects or other pests.” From the perspectives of these opinions, a few major headlines could be drawn. The British colonial government provided Nigerians with the quality, quantity, and type of education they considered suitable for the populations of the country. In making the choices of such educational activities, the opinions of Nigerians were not consulted. Rather, such decisions and policy directives were unilateral, and represented an act of imposition on the country’s populations. In addition, the urgent need to prepare, harvest, and recruit indigenous labour into the numerous job areas of the colonial establishments constituted another crucial factor (Omolewa, 2001; & Iwunna, 2011).

Thus, the introduction of Physical and Health Education in colonial era Nigerian schools constituted one major educational development which provided young learners with information and awareness of some fundamental healthcare knowledge which they

needed to survive and enjoy some semblance of healthy living within the society. It armed them with knowledge on the need to maintain healthy life styles at home and within their environments. In the minds of the expatriates, it armed learners with the skills and relevant information they require to deal with daily healthcare challenges they face in their local communities. It was their understanding therefore that empowering young learners with the numerous lessons on this subject could enhance their preparedness to deal with minor ailments which were prevalent in their homes, as exacerbated by the poor living conditions within their different local communities (Lugard, 1922; The Advisory Committee on Native Education in the British Tropical African Dependencies, 1925).

Putting these into context, History confirms that the introduction of Physical and Health Education as a school subject into Nigeria's education system was a British colonial legacy, which impacted young learners' dispositions with the awareness of healthy life styles, exposure to some key life care needs, as well as educated them on the techniques of handling simple health challenges at home. Lessons from Physical and Health Education curricular strengthen pupils' knowledge of themselves, their environments, and simple techniques that inform improved physical and mental development, irrespective of the numerous challenging complications encountered in homes and local communities.

Hence, this paper explored a number of key areas of relevance which define and support the continued retention of Physical and Health Education in the curricula of primary school education in Nigeria. As a school subject therefore, its relevance cuts across the entire spectrum of all human communities in Nigeria and beyond, most especially as the question of environmental protection has become a global issue of concern in the comity of world nations. Specifically, for Nigeria's primary school children, good knowledge of this subject exposes them to the awareness of several diseases, their methods of spread, as well as prevention techniques. In which case, children begin from their earlier days at school to get acquainted with the key health awareness techniques which promote good health and healthy living conditions in their families

and local communities. Armed with these life-saving abilities therefore, children and their families could remain safe, strong, and healthy even in the midst of some strong pandemic such as the COVID-19 virus spread which almost wrecked the entire globe and devastated powerful economies.

Conceptual Clarifications

This segment discusses the key concepts, also known as variables which define this analysis. A number of sources shall be consulted to drive these concepts home properly. These shall be discussed under the following subheadings:

Concept of Physical and Health Education

Physical and Health Education counts among the key subjects taught in all primary schools in Nigeria. As a school subject, its curricula contents bring young learners to the awareness of several healthcare lessons which educate and enrich their knowledge of the numerous techniques, practices, and attitudes which promote good health. In the considerations of the country's curricula planners, children's acquaintance with the numerous healthcare lessons approved for this school subject could promote good health among teachers, young learners, and their family members at home. Thus, according to UNICEF (1990), it is not in any doubt that only healthy children are able to attend schools, enrol into schools, invest their precious time in their studies, acquire skills, and participate actively in all educational and non-educational activities performed at school.

The inclusion of this subject into the primary school curricula in Nigeria was never an accidental development. It was a carefully planned educational activity which was intended to enlarge the knowledge banks of young learners in Nigeria on a variety of healthcare activities that could enhance their wellbeing and those of their family members. It is government's expectation that armed with adequate health education knowledge, young children would be able to assist their family members and larger community relations to enjoy good health. At that, families, communities, and government facilities could be saved the ugly trends of investing

scarce economic resources on disease management and treatment of infections among their members and citizens (Ejifugha, & Uwazie, 2014).

Concept of Primary School Subject

The concept of primary school subject being discussed in this paper refers to that subject which is taught in schools to young children within the age ranges of 6-11 years. As a matter of national policy, such a subject, as well as its curricula contents are subjected to the approval of the relevant governmental agencies in charge at the ministry of education. Prior to this development, the content of such subject is subjected to thorough scrutiny by the approved agencies of the government. This is an indication that the different subjects taught and learnt in primary schools receive the formal approval of the various agencies of the Federal Government of Nigeria before they are allowed to come into the school calendar. In the minds of the government, this becomes a crucial policy programme as the young children in primary schools constitute the future of the Nigerian nation. Thus, it is an official policy programme that all subjects must comply with the core educational objectives approved by the government (Federal Republic of Nigeria, 2012).

This explains the fact that the primary school education constitutes the solid foundation and formidable intellectual base upon which all other forms of formal education accessible to children are erected. Primary school education, as conveyed through the various subjects they present to learners, marks the starting point from which children's future educational exploits and professional breakthroughs are erected. Therefore, if a child's education at this stage is weak and shaky, the future becomes bleak for such a child. At that, chances of climbing to the peaks of the academic ladder become truncated, even as their opportunities of making a successful professional life could be perpetually truncated.

Implications for School Health

The question now is: What are the implications of teaching Physical and Health Education as a subject in Nigeria's primary schools?

Answers to this question shall be harmonized under the following subheadings:

Exposure to strong Health Awareness Techniques

Through the study of Physical and Health Education in primary schools in Nigeria, children get properly exposed to the various healthcare information they need for healthy living. On the strength of this assertion, the then East Central State Government (1975) strongly claims that “a good school is a healthy school and a healthy school cannot exist in surroundings of untidiness, dirt, rubbish, squalor or ugliness.” This is an indication that health education is fundamental for the healthy education of young learners.

Keeping this in mind, it becomes a reality that the curricular contents of Physical and Health Education in primary schools teach various skills of personal hygiene. It introduces young learners to the techniques of engaging in various physical exercises which encourage healthy living, as well as educates them on the attitudes of preventing the spread of diseases, most especially in this period of the Corona virus pandemic which is devastating the world and has succeeded in cutting down hundreds of thousands of innocent lives (Chiawa, & Chiawa, 2009).

Furthermore, this subject brings to children’s awareness the need to avoid environmental pollution. It also educates them on the dangers of unnecessary exposure to this environmental hazard, which could affect the quality of the water they drink, the air they breathe, and the environment they live in or work. By that, children begin early to acquire the lessons of maintaining a healthy environment, avoid all unhealthy human activities which could result to pollution, but rather engage in activities which promote healthy human environments (Chiawa, & Chiawa, 2009; & Ejifugha, & Uwazie, 2014).

Finally, the teaching and learning of Physical and Health Education in primary schools guides children on the rules of maintaining optimal health conditions. It educates them on the need to seek professional care whenever the need arises, avoid unwarranted drug abuse, and desist from engaging in all forms of

fetish treatments as a solution to the treatment of human ailments in the family. This subject also educates young learners on the need for informed decisions about their health and other health related matters concerning them and their family members (Ejifugha, & Uwazie, 2014). Thus, knowledge acquired from this subject is able to impact the attitude of healthy living among young learners, their family members, and the larger community they live in.

Awareness of Common Diseases, Spread and Prevention

Another key implication is that the teaching of Physical and Health Education in primary schools introduces young primary school children to the awareness of some of the common diseases which affect human communities, as well as cripple healthy living among persons. This subject educates children to learn the various common diseases which could affect their lives, and similarly opens their minds to the various methods of avoiding them completely. Among such diseases include the dreaded HIV/AIDS, malaria, small pox, measles, cold and catarrh, dysentery, cough, cholera, typhoid fever, and incessant headache, etc. (Chiawa, & Chiawa, 2009; Iwunna, 2011; & Ejifugha, & Uwazie, 2014).

Considering the adverse effect which exposure to these common ailments could landfall on the lives and health conditions of young learners and their family members, this subject also educates them on the various methods of avoiding and preventing them. These include avoidance of mosquito bites, good care of the environment, good personal hygiene habits, treatment of drinking water, proper handling of food and water, good sanitation exercises, proper washing of hands, avoidance of exposure to cold weather conditions, as well as living in a clean environment (Chiawa, & Chiawa & 2009).

On the question of avoiding HIV/AIDS (Human Immuno-deficiency Virus/Acquired Immune Deficiency Syndrome), children are strictly warned to desist from engaging in any sexual activities, as that could result to terrible infections of this dangerous disease, premature pregnancy, and early death. They are also warned to avoid all unnecessary and unprofessional transfusion of blood, as

well as avoid intimate contacts with any infected persons (UNICEF, 2004; Chiawa, & Chiawa, 2009; Iwunna, 2011; & Ejifugha, & Uwazie, 2014).

Thus, the teaching and learning of this subject in schools provides early warnings to young learners on need to maintain good health and avoid any activities that could jeopardize their healthy living. It encourages them to avoid insect bites at all costs. The curricular contents also provide children with simple techniques that could enable them enjoy good health, and desist from all unhealthy practices that could endanger their lives. Following this development therefore, children begin to translate their knowledge gained from this subject beyond the levels of passing their examinations only, but continue to apply them to their daily lives within and beyond the school environments.

Wounds' Treatment Techniques

Furthermore, the subject of Physical and Health Education in primary schools educates young children on the methods of treating wounds, which could result from accidents at home or elsewhere. At same time, children are given the awareness that such accidents could be caused by motor vehicles, falls, knife cuts, physical exercises, fire, and hot water. The result of any of these accidents is that the victim endures terrible pain, even as blood loss is encountered too. Death could also result. Thus, lessons on this subject educate children on how to handle such accidental situations, clean the wounds, and bandage them properly. However, it strongly encourages that affected patients be rushed to hospital for proper medical care after some first aid have been given (Chiawa, & Chiawa, 2009).

Handling of First Aid Cases

Another major implication is that this subject exposes young learners to the handling of First Aid cases. In the words of Chiawa and Chiawa (2009), the "First Aid is the first or immediate help given to an injured person before taking him or her to the hospital." It adds that "we give First Aid when there is fainting or shock or loss

of consciousness, minor fire burn, bleeding from minor cut, drowning in water, choking from food, snake bites, dog bite, scorpion stings, bleeding nose, fracture or broken bones.” This source maintains that children and adults could play important roles when first aid treatment is given in order to restore life in the affected patients. It adds that, for instance, when fainting or loss of consciousness occurs, patients should be allowed to lie flat on the ground, loosen every tight clothes he or she may be wearing, and keep people away so that he or she may take some fresh air.

Furthermore, the source adds that occasions of fainting or loss of consciousness could happen when persons are involved in road accidents or the person receives a blow on the head. When this happens therefore, it is recommended that attention should be made to observe whether the person is still breathing, observe whether the heart is still pumping, and then loosen every tight clothes on the patient, which include belts, tie, stockings, shoes, etc.

Remarkably, Chiawa and Chiawa (2009) observe that choking from food counts among the commonest cases of accidents children encounter at home, which could kill them or even damage their lungs. It adds that choking occurs when food enters the windpipe. In the face of such a situation therefore, this source teaches young learners that if the person is a baby, they should hold the two legs upwards with his or her head pointing downwards, and gently tap at the back between his shoulders. As a second step, this source recommends that the child should be laid across the knee with the head dropping downwards, and slightly beat between the shoulders. Finally, it recommends that a glass of water may be given to the patient, and strongly warns that children must not talk while eating. It warns emphatically that this is a bad habit.

Proper Care of the Environment

The area of caring for the human environment constitutes another key implication exacerbated by this teaching and learning of Physical and Health Education in primary schools. Without doubt, a healthy environment enhances healthy living. There is therefore the need to take proper care of our environments. At that the lessons children

learn from this subject include the following: the home and school environments must be kept in clean conditions. They should be cleaned properly, while all refuse, dirt, stagnant water, and rubbish must be removed.

Homes must be properly cleaned out, while utensils and all domestic items must be maintained in strong hygienic conditions. Homes and school compounds must be swept regularly. Proper toilet facilities and other conveniences should be provided in homes and all public places. Importantly too, decorative flowers, fruits, and other edibles should be planted around the home and all public environments. The benefits of these practices are enormous most especially as they would refresh the quality of the air people enjoy within their vicinities, control pollution, reduce insects bites, and control the spread of diseases within their environments (East Central State Government, 1975; Chiawa, & Chiawa, 2009; Ejifugha & Uwazie, 2014; Opoh, Okou, & Ubung, 2014).

Sound Knowledge of Physical Education

In the areas of physical education too, this crucial primary school subject also plays a fundamental role in the overall physical and mental development of young learners. This subject exposes young learners to the knowledge of a number of physical training exercise which enhance proper mental and physical development. It educates school children on the techniques of maintaining a sound health and a strong physical body. At that, young children are encouraged to engage in the several sporting activities approved by the various authorities of the ministries of education in Nigeria (Ejifugha, & Uwazie, 2014).

Apart from the healthy physical and mental development, the teaching of this subject in primary schools also motivate young learners to develop interest in making lifelong careers out of some professional sporting activities. In the course of regular practices and active participations in the various physical and sporting activities held in school, children gradually develop keen interest in particular areas of sports, and begin to train aggressively in order to become professionals. In view of this development therefore, it is

not surprising that Nigerians have performed excellently well in several areas of sports. Thus, in foot balling, boxing, gymnastics, swimming, acrobatics, wrestling, table and lawn tennis, racing, cricket, etc., Nigerians have performed exceedingly well (Federal Ministry of Information & Culture, 1997; Chiawa, & Chiawa, 2009; Ejifugha, & Uwazie, 2014).

At the professional level therefore, Nigeria has produced a good number of strong competitors and professionals in various areas of sports. A few instances shall be cited putting into consideration the brief scope of this paper. In the areas of boxing, Nigeria produced Hogan Kid Bassey, a Featherweight champion (1957-1959), Dick Tiger Ihetu, Middleweight champion (1962-1963), and Bashiru Ali, Cruiserweight champion (1987), all in the boxing profession. History also confirms that in the area of football, the Championship Cup competitions started in Nigeria in 1945. At that time, it was known as the Governor's Cup competition. In 1955, it got renamed as the Football Association (FA) Cup. It was later rebranded as the Nigeria Challenge Cup in 1960 when they secured her political independence. Thus, over the years, Nigeria has competed strongly in several football competitions at the local and international levels, and has produced world class footballers of great repute, who also won international awards in the profession. These include Rashidi Yekini (1993), Emmanuel Amunike (1994), and Kanu Nwankwo (1996). The same is also the case in other sporting areas, Because of space constraints however, we cannot elaborate more (Federal Ministry of Information & Culture, 1997).

Proper Care of the Body

Most importantly too, the Physical and Health Education curricular taught in schools offer young children the opportunities of learning the numerous methods of caring for their bodies. This is in appreciation of the fact that the human body is so much delicate, fragile, and must be properly cared for, in order to maintain a healthy status. Within the curricular contents of this subject therefore, primary school children begin early enough to learn the various techniques of maintaining healthy body conditions in the

way of cleaning their bodies very properly and regularly too. starting from their first days at school therefore, children are taught to clean their mouths (teeth) daily, wash their bodies daily, keep their hairs in hygienic conditions, clean their nails and cut them whenever necessary, and ensure that they maintain their ears, eyes, and nose in perfect hygienic conditions (Chiawa, & Chiawa, 2009; & Ejifugha, & Uwazie, 2014).

From their early years at school too, young children are taught the important roles which the different parts of the body play, as well as their roles towards maintaining a healthy body condition. They are taught that the eyes provide sight, while the ears are for hearing purposes. At that stage, children also learn that the mouth is for talking and eating purposes. Even as the skin provides protection to the internal body organs, the teeth are for chewing. In the minds of the Education Ministry, these lessons are considered quintessential in order to assist children maintain healthy, strong, and sound body conditions. They also assist children escape unnecessary attacks of diseases and infections associated with poor hygienic conditions (Omolewa, 2001; & Chiawa, & Chiawa, 2009).

Thus, educating children on these crucial rudimentary lessons on Health Education motivate them to maintain hygienic conditions of body and mind wherever they find themselves. It enables them appreciate the great values in the acronym which says that “cleanliness is next to godliness.” This is an indication that ability to keep one’s body in perfect hygienic conditions increases his chances of scaring off diseases and common infections. These have become so imperative in these days of the spread of the Corona virus, globally known as Covid-19, which has cut down several thousands of lives worldwide. Towards tackling the continued spread of this terrible disease effectively therefore, regular washing of the hands with alcoholic soap and relevant hand sanitizers have been highly advocated by the World Health Organization and medical professionals. This is an indication that cleanliness of the body is crucial for the final eradication of this viral disease from the Earth.

Participation in School Health Programmes

The teaching and learning of Physical and Health Education in primary schools also engages the into participating in a number of healthcare programs which are put in place by the authorities, with the intentions of training them to take full responsibility for the good health of school children. According to Chiawa and Chiawa (2009), these include the following: engagement of a nurse for every school, provision of first aid box, maintenance of a health record of pupils, taking care of handicapped children at school, provision of good drinking water, installation of toilet facilities for pupils, availability of health counselling facilities, and control of communicable diseases. Among others, our source maintains that the school nurse enforces the attitudes of personal cleanliness on the pupils, as well as ensures that they keep the school environment clean. The nurse also ensures that the school first aid box is stuffed with the right materials necessary for the administration of first aid treatment whenever the need arises.

At that, the nurse ensures that the school First Aid box is stuffed with the following items: plasters, bandages, cotton wool, scissors, medicine glass for drinking medicine, safety pin, notebook and pencils, bowls for washing of injuries, antiseptics that could be applied to wounds, sanitary towels for cleaning and dressing serious bleeding, and blades for cutting of bandages, etc. This source adds further that towards attaining good healthy conditions in schools, aggressive campaigns and awareness exercises must be engaged in. It is therefore the conclusion of this source that putting these activities into their rightful places would promote healthy living conditions for primary school children as well as checkmate the unwarranted spread of communicable diseases among young learners. To that end, the active participation of parents, teachers, and community members become crucial (Chiawa, & Chiawa, 2009; & Opoh, Okou, & Ubung, 2014).

Conclusion

It is imperative to conclude that a sound state of mind and body, and the maintenance of a healthy environment promote good

health. At that, life becomes more meaningful. The truth is that a healthy state of body, mind, and environment, promotes wealth creation, actualization of one's dreams, the acquisition of new skills, enhance the hunger to make sound economic investments exploits, and create opportunities to escape from poverty. Exposed to the ugly crutches of environmental hazards therefore, heightened spread of diseases, and relentless attack of poverty and failure, and other forms of economic disaster occupy the driving seat in homes, families, and communities. Thus, it has become a huge challenge that all hands must be on the deck in order to maximize the huge benefits associated with making a sound and health environment in our homes. This has become necessary because healthy environment supports life, promotes healthy living, creates wealth, sustains economic life, and cuts down on the levels of disease spread in human communities. Let us therefore support the environment in order that human and aquatic life could be sustained, most especially in this era of the COVID-19 pandemic when human lives, and economic wealth have been dangerously devastated.

Suggestions

At this juncture, it is considered relevant to propose a few suggestions which could enhance the quality of the educational curricula presented by this crucial school subject. This is based on the understanding that human, aquatic and environmental life could improve dramatically. Thus, it is strongly suggested that primary school curricula on Physical and Health Education as a school subject should be reviewed regularly. In doing this, the curricula contents could be better positioned to meet the trending health challenges faced by Nigerians in the recent times. Secondly, teachers and handlers of this subject in primary schools should be supported to undertake periodical training and re-training programs in order to equip them more effectively with the digital era skills necessary to handle this subject at school. At that, there is urgent need to equip the teachers with the relevant ICT (Information and Communication Technology) skills required to enhance their

professional preparedness to handle this subject at school. Teachers' exposure to these technology-driven skills has become quite essential at this period in view of the trending e-learning and long-distance education which the prevalence of the dreaded COVID-19 seems to be propelling. Finally, all primary schools in Nigeria should be provided with portable water boreholes and good toilet facilities in order to check the spread of diseases. This would also go a long way in enforcing and re-enforcing the attitude of cleanliness among young learners, as well as inculcating the cultures of maintaining good hygiene into these young Nigerian citizens.

References

- Chiawa, E.O., & Chiawa, N.S. (2009). *New life physical and health education for primary schools. Book 5*. Enugu: Newlife Educational Publishers.
- Chiawa, N.S. (2009). Preface. In *New life Physical and Health Education for primary schools. Book 5*. Enugu: Newlife Educational Publishers.
- East Central State Government. (1975). *Handbook on school administration*. Enugu: The Government Printer.
- Ejifugha, A.U., & Uwazie, I.U. (2014). Quest for skill-based Health Education: The historical route. *Mediterranean Journal of Social Sciences*, Vol. 5(26), 167-173.
- Fafunwa, A.B. (1974). *History of education in Nigeria*. London: George Allen & Unwin.
- Federal Ministry of Information & Culture. (1997). *Nigeria official handbook. Revised edition*. Abuja: Production Department, Federal Ministry of Information & Culture.
- Federal Republic of Nigeria. (2012). *National policy on education*. Lagos: NERC.
- Iwunna, P. (2011). *The impact of the Catholic primary school education in Igboland. The impact of the Catholic education*. Saarbrücken: LAP Lambert Academic Publishing GmbH & Co. KG.
- Lugard, F.D. (1922). *The dual mandate in British Tropical Africa*. Edinburgh, & London: William Blackwood and Sons.
- Ministry of Education. (1950). *New syllabus for award of the teacher's higher elementary certificate*. Zaria: Gaskya Corporation.
- Mkpa, M.A. (1987). *Curriculum development and implementation*. Owerri: Totan Publishers.

- Njoku, R.A. (1980). *The advent of the Catholic Church in Nigeria. Its growth in Owerri Diocese*. Owerri: Assumpta Press.
- Omolewa, M. (1986). *Certificate history of Nigeria*. London, & Lagos: Longman.
- Omolewa, M. (2001). *The challenge of education in Nigeria*. Ibadan: University of Ibadan Press.
- Opoh, F.A, Okou, F.T., & Ubung, J.A. (2014). Improving the standard and quality of primary education in Nigeria for national development. *Int. J. Res. Rev. Educ.* 2, 1-6.
- Osokoya, I.O. (2015). *Teaching and researching History in Nigeria*. Ibadan: Laurel Educational Publishers.
- The Advisory Committee on Native Education in the British Tropical African Dependencies. (1925). *Education Policy in British Tropical Africa*. London: His Majesty's Stationery Office.
- UNICEF. (1990). *Children and women in Nigeria. A situation analysis*. Ibadan: Johnmof Printers and Stationers.