

ENHANCING HEALTH EMERGENCY MANAGEMENT IN PUBLIC BASIC SCHOOLS IN THE GREATER ACCRA REGION OF GHANA

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INTRODUCTION

Introduction In times of emergency, health management is quite relevant in protecting the wellbeing of students and maintaining a smooth course of study within educational institutions. In Ghana, the Greater Accra Region is known as one of the most inhabited regions and due to its state, it is prone to several emergency crises and disease outbreaks (Damte et al., 2023). The kind of outbreaks that cause failures and disruptions to systems. The public schools with Greater Accra region do experience some challenges in handling medical crises. This was made evident during the COVID-19 epidemic, when hospitals experienced a dearth of basic equipment like masks and ventilators and many medical personnel were not well trained to manage the situation (Crankson et al., 2024). Even educational institutions experienced difficulty in putting national emergency management standards into practice at their own basic level. These and other shortcomings make it difficult to provide medical services during emergencies, which disrupts students’ learning and puts their safety at risk. This highlights the need to improve procedures to ensure that public primary schools in the Greater Accra region are prepared to manage medical emergencies.

The aim of this study – to analyze health emergency management in public primary schools in the Greater Accra Region of Ghana.

Objectives:

- To identify health crisis management problems in public primary schools of Ghana.
- To assess relevant international frameworks and standards that could be applied to improve health emergency preparedness in Ghanaian public schools.
- To submit a proposal for the improvement of health emergency management in public primary schools in the Greater Accra Region of Ghana.

The methods of the research The approach implemented in this paper is primarily analytical and conceptual in nature, putting reliance on a systematic examination of literature and pertinent theories. Since this study is centered on the understanding and interpreting of existing knowledge, rather than collecting new data, the research method consisted of examining a wide selection of existing literature. The choice to select these materials was based on their connection to the topic of health emergency management in schools, and the goal was to indicate different perspectives and practices. The analytic and conceptual nature of the methodology allowed for comparison between findings and facilitated the identification of patterns, while drawing conclusions that could inform and contribute to policy, assist with practice, and provide future directions for research about health emergency preparedness in schools.

Problem statement. Findings are organized by main themes that can be easily understood. Each theme illustrates what schools are doing well and where challenges exist. The themes are briefly describing as below.

Research conducted by Seddighi et al. (2020) and Apronti et al. (2015) indicates that while disaster risk reduction (DRR) material is included in school curricula, there remains a significant disparity between the intended syllabus and the curricula delivered in classrooms. This dissonance is due primarily to the lack of teacher training, limited teaching resources, and inadequate classroom support for teachers to effectively implement the curricula item. DRR education is therefore more theoretical than practically helpful. The theme of the relevant between policy and practice illustrates Systems Theory, which indicates that all components of the system must work in unison for the system to be successful. If teachers have not received training or do not have the resources to teach disaster education, there is a failure of the system.

Resource and Training Deficiencies.

According to Owusu-Addo (2019), schools in certain regions of Ghana have health education and first aid programs, but those efforts fall short. Teachers are doing their best with the resources they have, but they face immense barriers, including a lack of training and supplies. Similarly, Apronti et al. (2015) showed that disaster risk education is limited in schools because teachers have little training and the proper materials to implement education on disaster risk effectively. The two works illustrate that while programs may exist, they are not functioning to their potential because schools do not have the necessary support, resources, or trained personnel. This proves to be a challenge for teachers when providing students with the support and knowledge they need. Also, the topic of lack of resources and training is directly related to resource-based theory (RBT) too; having valuable resources such as trained staff, equipment, and funding, as mentioned in the RBT, is vital for schools. Schools may have health programs, but without equipment or trained staff using the tools effectively, RBT states those were ineffective uses of resources to respond to emergencies.

Role of Committees and Structured Programs.

Bowman et al. (2018) found that when schools had health management committees, they were significantly more likely to provide at least half of the recommended health services than those without health committees. Thus, organized structures support schools in their provision of a broad range of important health services. Similarly, Abbey (2015) underscored the importance of management structures to keep students safe during physical education. However, both studies acknowledged that many schools have not developed these management committees or structured programs, which demonstrates a large gap in improving the provision and access to health services. There is evidence that establishing and supporting these services and management structures can improve school health management. Ultimately, the concept of committees and structured programs is congruent with both theories. Systems Theory posits that structured coordination, such as health committees, enhances the overall performance of the system. At the same time, RBT illustrates that organizing and managing resources through structured programs allows schools to better deliver services.

Main findings. A common feature emerges in all studies – the limited resources and weak policy action. Though the schools recognize what should be done, and there are some documents that provide some guidance, the actual execution will be weak. This stems from a lack of resources, not enough trained staff, and a lack of follow-through with policies. Therefore, schools do not implement their plans successfully. This calls for the need for a stronger, more realistic framework that takes into account public basic schools' local needs in the Greater Accra area.

Hence, in tackling this situation, it is important to look at internationally accepted frameworks and standards for emergency preparedness in schools. Several important international standards and frameworks can be used and adapted to improve health crisis management in public primary schools in Ghana (table 1).

Table 1. International standards and frameworks to improve health crisis management in public primary schools

Standard / Framework	Issuing body	Main focus	How it helps schools	How schools can use it
Sendai Framework for Disaster Risk Reduction (2015–2030)	United Nations Office for Disaster Risk Reduction (UNDRR)	Reducing risks and building resilience to disasters	Promotes risk education, preparedness, and safer infrastructure	Schools can develop safety plans, conduct drills, and include disaster education in lessons
Comprehensive School Safety Framework (CSSF)	Global Alliance for Disaster Risk Reduction and Resilience in the Education Sector (GADRRRES)	School safety through policies, learning, and infrastructure	Guides schools to assess risks and improve safety in a structured way	Schools can assess their own risks, train staff, and improve physical safety
Minimum Standards for Education: Preparedness, Response, Recovery	Inter-Agency Network for Education in Emergencies (INEE)	Education during emergencies and recovery	Ensures learning continues during crises through proper planning	Schools can create simple response plans, keep teaching even in emergencies
Framework for Safe Schools	WHO & UNESCO	Health and safety in school settings	Promotes health services, hygiene, and emergency readiness	Schools can improve sanitation, train staff, and partner with local clinics
International Health Regulations (IHR)	World Health Organization (WHO)	Global public health emergency rules	Helps countries detect, assess, and respond to public health threats	Schools can follow national health alerts and coordinate with health officials

Each framework provided in the table above has a unique contribution to the understanding of school emergency preparedness. The Sendai Framework encourages proactive preparation, considering measures such as safety plans and regular drills, suggesting that preparedness should be a normal state of affairs and not just a reaction to an emergency. The Comprehensive School Safety Framework (CSSF) takes an all-around view that integrates policy, learning, and safe facilities and is aligned with the theories of the study through emphasizing coordination and effective management of resources. The INEE Minimum Standards establishes the need to maintain education from crisis to recovery, which is of special concern for schools in Ghana, as many have limited support and often face instances of disruption. The Framework for Safe Schools recognizes the importance of hygiene, health services and preparedness to more fully integrate health into schools. Lastly, the International Health Regulations (IHR) recommend for schools to collaborate with national health authorities with common community health guidelines, to ensure that schools actively participate in a unified emergency response initiative.

MAIN RESULTS AND CONCLUSIONS

In conclusion, the study highlights the importance of improving preparedness for health emergencies in public primary schools in Greater Accra. Schools find themselves in difficult situations when managing health emergencies due to policy implementation challenges, lack of resources and inadequate teacher training. All stakeholders, including teachers, resources, policy and health committees, need to work together to effectively respond to emergencies.

The research also indicated some international standards, such as the Sendai Framework and the Comprehensive School Safety Framework, which would be useful for Ghanaian schools to learn from. These systems would help schools develop more effective plans, provide higher-quality instruction, and be better prepared. Overall, schools must consider the possibility of jointly managing resources, policies, and systems in the future, while enabling productive partnerships and relationships between policymakers, schools, and healthcare professionals. Accordingly, schools will be in a better position to handle a health emergency, improve overall health emergency management, and create a safer environment for children.

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