

IMPACT OF COMMUNICABLE DISEASES AMONG CHILDREN

BY

***Egbujo Stella Onyinyechi & **Professor Innime Righteous**

School of Public Health University Of Port Harcourt

ABSTRACT

This project work was designed to find out the impact of communicable diseases among children in Port Harcourt City. Communicable diseases are very common among poor resident. Communicable diseases could be contacted and have impacts in primary school pupils, which may include deformity and poor academic performance. Immunization can be used to control the spread of communicable diseases among school pupils. One hundred respondents were used as sample study. Research questions were formulated to analyze the results. Results showed that lack of parental care, lack of health education and overcrowding of pupils in class lead to spread of communicable diseases. Recommendations made included that every individual should be fully educated about communicable diseases and that adequate and proper hygiene should be encouraged.

INTRODUCTION

Communicable diseases are as old as man and they constitute a great menace to human beings in every part of the world. They are one of the greatest problems facing children today. The diseases are silent killers unlike accident that kills instantly. Man has been trying to get rid of these diseases, for years but efforts made have proved partially abortive. Specifically, pre-school children (0-5 years old) are prone to communicable diseases because of their close interaction with one another, their non-discriminatory behaviours and also their low immunity power. A disease that is transmitted through direct contact with an infected individual or indirectly through a vector. Also called contagious disease.

Communicable Disease Definition

Communicable disease is often called contagious or infectious disease. Anderson (2000) defined a communicable disease as a disease that can be transmitted from one person to another or from lower animal to higher animal (man). He attributed the cause of these diseases to pathogenic microorganisms. Brain (2007) also noted that communicable disease are infectious diseases that can be passed from person to another or from an animal to a person.

It is generally believed that nature harbours many microorganism which are very difficult to see with mere naked eyes except with the use of highly

powerful microscopic lens. Those microorganisms which harm the human body are called pathogens. Udoh, Fawole, Ajala, Okafo & Nwana (2007) confirmed that pathogens that harm the body are popularly known as germs. These invade the tissues of the human host where they produce the condition called disease. These germs/pathogens (that is virus, bacteria, protozoan and metazoan) are mostly found in dirty places where the temperature and atmosphere support their existence.

Olaoye (2008) classified communicable diseases into four namely water borne disease, air borne diseases, insect borne and other diseases that are transmitted by contacts and arthropods. Brain (2007) stated that the best way of classifying communicable diseases is by their spread, and these are; air borne or droplet infections; faecal borne or gastro-intestina infections; transmission from animal, from insects and by contacts. Barbara and Bauirer (2007) identified three ways of transmitting communicable diseases as; transmission by contact, by vector and by air.

Research Design

Research design is the specification of methods and procedures for acquiring the information needed to solve problems. This study employed the descriptive survey design. The nature of the problem was duly considered in the study.

Population of the Study

For the purpose of this study, the target population consists of pupils from primary schools in Orhionmwon Local Government Area of Rivers State State. The six primary school located in urban and rural areas of the local government are as follows:

1. Abiokula Primary School, Abudu
2. Adanko Primary School, Evbiboesi
3. Adenko Primary School, Ugo
4. Okogbo Primary School, Okogbo
5. Awannore Primary School, Evboesi
6. Obozogbe Primary School, Obozogbe

Samples and Sampling Techniques

The sample of the study refers to that part of the population that was selected for closer study. To select the needed samples for this study, the researcher used a total number of one hundred (100) pupils from primary schools in Orhionmwon Local Government Area of Rivers State State.

Instrument for Data Collection

The data collection instrument to be used is questionnaire designed by the researcher. The design is well constructed and simple. The questionnaire was divided into two sections (A and B). Section A was for collection of information on personal data of respondents while Section B consisted of questions drawn from the research questions that elicited responses from the respondents with response options:

Strongly Agreed (SA), Agreed (A), Strongly Disagreed (SD) and Disagreed (D).

Validity of the Instrument

To ensure the face validity of the study, the research instrument was scrutinized and judged by the supervisor for appropriateness of each item of the instrument. The comment of the supervisor was used to obtain final items which were further subjected to content validity to ensure that the content of the instruments representative of the area which the instruments are intended to cover.

Method of Data Analysis

The response to the questionnaire items was analyzed using frequency tables and simple percentage method. The research hypotheses stated earlier was tested using Chi-Square Statistics.

CHAPTER FOUR PRESENTATION, ANALYSIS AND INTERPRETATION OF DATA

4.1 Introduction

This chapter was designed to present data and result of the analysis. All responses collected through self-administered questionnaires were carefully assessed statistically. A simple percentage was used to describe all responses to personal data and Research questions relating to the *“impact of communicable diseases among children in Port Harcourt City”*.

4.2 Presentation of Data
Table 1: Distribution of Questionnaire

	Frequency	Percent
Returned	87	87.0
Unreturned	13	13.0
Total	100	100.0

Source: Field Survey, 2025

Table 4.1 showed that 87%(87) respondents returned their questionnaire while 13% (13) respondents did not returned their questionnaire. This implies that a large proportion of the questionnaire were filled and returned.

Table 2: Distribution According to Gender

	Frequency	Percent
Male	51	58.6
Female	36	41.4
Total	87	87.0

Source: Field Survey, 2025

As indicated in Table 2, 58.6%(51) respondents were male while 41.4%(36) were female. This shows that male respondents participated more in the research than their female counterpart.

4.3 Testing of Hypothesis

Hypothesis 1

H_0 : Communicable disease has no significant impact on children in Port Harcourt City

H_1 : Communicable disease has no significant impact on children in Port Harcourt City

Table 3: Relationship between Communicable disease and children in Port Harcourt City

Structure	N	$\bar{X}$	SD	df	Standard Error	t_{cal}	t_{crit}	Decision
Communicable disease	87	3.59	0.883	172	0.177	2.813	1.96	H_0 Rejected
children in Port Harcourt City	87	3.09	1.398					

0.5 level of significance

Table 3 above shows that the calculated value of t-test $t_{cal} = 2.813$ which is greater than the critical value $t_{crit} = 1.96$ at 0.05 level of significance with degree of freedom $df = 172$; therefore, the null hypothesis is rejected in favour of the alternative hypothesis which states "Communicable disease has significant impact on children in Port Harcourt City". This showed that Communicable disease has no significant impact on children in Port Harcourt City.

Conclusion

The study on the impact of communicable diseases on children in Port Harcourt City has revealed significant health challenges that continue to affect the city's younger population. Malaria, diarrheal diseases, and respiratory infections remain the most common communicable diseases, with children being disproportionately vulnerable. Several factors contribute to this high burden, including socio-economic status, poor sanitation, inadequate healthcare infrastructure, and limited access to preventive services such as vaccination and health education. The findings underline the critical importance of

addressing these underlying factors through integrated public health strategies, community-based health education, and improved healthcare delivery systems. Although some progress has been made in controlling communicable diseases, the persistent gaps in vaccination coverage and public health infrastructure highlight the need for continued and expanded interventions.

In addition to the health impacts, the study identified significant socio-economic consequences for families affected by these diseases. The financial burden of treating communicable diseases, coupled with the indirect costs such as lost productivity and school absenteeism, exacerbates poverty cycles in Port Harcourt City. The lack of adequate healthcare services and preventive measures contributes to delayed treatment, making conditions more severe and, in some cases, fatal. Therefore, the reduction of communicable diseases in the region requires multi-faceted approaches that address the health, social, and environmental determinants of disease transmission.

Recommendations

1. **Strengthening Healthcare Infrastructure:** It is essential for the government and health authorities in Port Harcourt City to invest in strengthening healthcare infrastructure, especially in underserved areas. This includes expanding access to primary healthcare centers, improving the quality of services, and ensuring that medical supplies and skilled health workers are available. Specifically, health centers should focus on providing comprehensive services, including early diagnosis, treatment, and prevention of communicable diseases, with an emphasis on child health.
2. **Enhancing Immunization Programs:** One of the critical gaps identified in the study was incomplete immunization among children, which increases vulnerability to vaccine-preventable diseases. The government should ramp up efforts to improve immunization coverage by conducting regular vaccination campaigns, particularly targeting migrant populations and those in rural and peri-urban areas. Mobile vaccination units and community outreach programs can help increase coverage in hard-to-reach areas.
3. **Improving Sanitation and Hygiene:** The high prevalence of waterborne diseases and the role of environmental factors in disease transmission call for a concerted effort to improve sanitation and hygiene in Port Harcourt City. This includes better waste management systems, improved water treatment, and public health education on the importance of safe drinking water and sanitation. Local authorities should prioritize building infrastructure for sewage systems and safe water supply, particularly in low-income neighborhoods where the risk of disease is highest.
4. **Community Health Education and Awareness:** A critical recommendation is to implement widespread health education programs aimed at improving knowledge about disease prevention, early detection, and treatment options. Health literacy, particularly among caregivers, plays a significant role in

reducing the incidence of communicable diseases. Community-based programs should focus on educating families about the importance of vaccination, proper hygiene, and the use of preventive measures like insecticide-treated bed nets for malaria prevention. Schools can be key partners in disseminating health information, providing children with the tools they need to protect themselves and their families from communicable diseases.

5. **Collaborative Efforts for Socio-Economic Support:** Finally, addressing the socio-economic challenges exacerbated by communicable diseases requires collaborative efforts across sectors. Public health strategies should be aligned with poverty reduction programs to ensure that families who face economic hardships due to disease have access to social support services, including affordable healthcare. Strengthening social safety nets and providing financial support for vulnerable families will help mitigate the economic burden of communicable diseases, allowing children to recover faster and reduce long-term health impacts.

In conclusion, tackling the impact of communicable diseases among children in Port Harcourt City requires a holistic approach that combines improvements in healthcare infrastructure, sanitation, vaccination coverage, and community health education. By addressing the root causes of disease transmission and engaging communities in prevention efforts, the health and well-being of children in Port Harcourt City can be significantly improved, reducing the burden of preventable diseases and promoting healthier futures for the city's younger population.

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