

COVID-19 PANDEMIC IN THE SOCIETY: BASIC ISSUES AND IMPLICATIONS FOR COUNSELLING

OPARADURU, John Onyemauche
Department of Educational Foundations,
Faculty of Education,
National Open University of Nigeria, Abuja.

Abstract

Fear and anxiety are adaptive animal defense mechanisms that are fundamental for survival and involve several biological processes of preparation for a response to potentially threatening events. However, when threat is uncertain and continuous, as in the current coronavirus disease of 2019 (COVID-19) pandemic, fear and anxiety can become chronic and burdensome whereby they become excess in the face of events standing as stimulus for their cause. It is quite imperative to identify the causes of coronavirus in order to critically look at the way forward in managing this deadly disease that has changed almost the entire systems of the globe. The damage so far done by coronavirus all over the world and especially here in Nigeria cannot be over emphasized. As a result of various challenges of such like; Ebola outbreak between 2013 and 2014, the increase in fear and anxiety over the havoc this pandemic is generating globally and Nigeria in particular becomes uncontrollable. The rise in its spread becomes daily news. As a result, this article therefore examined some basic issues like the causes of coronavirus in Nigeria and world at large, the consequences of contracting coronavirus, control measures of fear and anxiety factors in the spread of this disease and its counselling implications were also outlined.

Key words: COVID-19, Pandemic, Society, Issues, Counselling Implications

Introduction

The outbreak of coronavirus disease (COVID-19) has been declared a Public Health Emergency of International Concern (PHEIC) and the virus has now spread to many countries and territories. While a lot is still unknown about the virus that causes COVID-19, we do know that it is transmitted through direct contact with respiratory droplets of an infected person (generated through talking, coughing and sneezing). Individuals can also be infected from touching surfaces contaminated with the virus and touching their face (e.g., eyes, nose, and mouth). While COVID-19 continues to spread it is important that communities take action to prevent further transmission, reduce the impacts of the outbreak and support control measures. The coronavirus disease (COVID-19) pandemic as declared by WHO, caused by severe acute respiratory syndrome coronavirus 2 (SARS-COV-2) was identified in China at the end of 2019 has a high contagious potential, and its incidence has increased exponentially. Its widespread transmission was recognized by the World Health Organization (WHO) as a pandemic. Dubious or even false information about factors related to virus transmission, the incubation period, its geographic reach, the number of infected, and the actual mortality rate has led to insecurity and fear all over the world. The situation has been exacerbated due to the insufficient control measures and a lack of effective therapeutic mechanisms (Malta, Rimon and Stranthdee, 2020). These uncertainties have had consequences in a number of sectors, with direct implications for the population's daily life and mental health globally. This scenario raises a number of questions: Is there a fear/stress pandemic concomitant with the COVID-19 pandemic? How can we guide and counsel individuals in order to reduce the spread of this pandemic?

To understand the psychological repercussions of a pandemic, the fear and anxiety, must be considered and observed. Fear and anxiety are adaptive animal defense mechanisms that are fundamental for survival and involve several biological processes of preparation for a response to potentially threatening events. However when fear and anxiety becomes chronic, they become harmful and can be key components in the development of various psychiatric disorders (Shin & Liberzon, 2010) and (Garcia, 2017). In a pandemic, fear increases anxiety and stress levels in healthy individuals and intensifies the symptoms of those with pre-existing psychiatric disorders (Shigemura, Ursano, Morganstein, Kurosawa and Benedek, 2019).

Since the economic costs associated with fear factors in the spread of COVID-19 is high, improving counselling strategies can lead to gains in both physical health and the economic sector. In addition to a concrete fear of death, the COVID-19 pandemic has implications for other spheres: family, organizations, closing of schools, companies and public places, changes in work routines, isolation, leading to feelings of helplessness and abandonment. Moreover, it can heighten insecurity and moral decadence such as “**banditry and rape**” due to the economic and social repercussions of this large scale tragedy.

During the Ebola outbreak, for example, fear-related behaviours had an epidemiological and psychological impact both individually and collectively during the phases of the event, increasing the suffering and psychiatric symptoms rates of the population, which contributed to increase in indirect mortality from causes other than Ebola (Shultz, Cooper, Baingana, Oquendo, Espinel and Althouse, 2016). Currently, ease of access to communication technologies and transmission of sensational, inaccurate of false information can increase harmful social reactions, such as anger and aggressive behaviour (Wang, Mekee, Torbica, and Stuckler, 2019).

Diagnostic, tracing, monitoring and containment measures for COVID-19 have been established in several parts of the world in which Nigeria is not excepted (Ferguson, Laydon, Nedjati, Imai, Ainslie and Baguelin, 2020). However, there are still no accurate epidemiological data on disease-related counselling implications or their impact on public health. A Chinese study provided some insights in this regard. Approximately half of the interviewees classified the psychological impact of the epidemic as moderate to severe, and about a third reported moderate to severe fear factors (Wang, Pan, Wan and Tan, 2020). Similar data have been reported in Japan, where the economic impact has also been dramatic (Shigenura, et al, 2020).

In conjunction with actions to help infected and quarantined patients, strategies targeting the general population and specific groups must be developed, including counselling professional who would be able to address the issues emanating from the health workers who are directly exposed to the pathogen and have high stress rates (Kang, Chen, Yan and Yan, 2020).

Finally, it is extremely necessary to ensure that professional counselors are on ground already equipped with several Psychotherapeutic skills to implement COVID-19 pandemic policies in conjunction with epidemic and pandemic response strategies, before, during and after the counselling exercise (Shultz et al, 2016). This will go a long way to ameliorate the rate of fear factors in the spread of Covid-19 pandemic.

Theoretical Framework

There are several theories of the motivation of fear and anxiety. For the purpose of this paper, the following theories would be discussed on which the implications for counselling will be based upon.

The Cognitive Theory of Fear and Anxiety (Jean Piaget, 2018 Revised Edition): There are three reasons for the motivation of fear and anxiety from the cognitive perspective; loss of control, inability to make a coping response, and **state anxiety** versus **trait anxiety**. Loss of control refers to a situation when there are unpredictable or uncontrollable events in one's life which lead to anxiety and/or depression. As a result, feelings of helplessness develop. The unpredictability which may be associated with a task may cause anxiety (Seligman, 1975). The inability or perceived inability to make an adaptive response to a threatening event or the fact or perception that no such response is available will lead to feelings of anxiety. Since anxiety is very ambiguous, it is the key which prevents the elaboration of clear action patterns to handle the situation effectively (Lazarus, 1991).

According to the cognitive perspective, the most effective way to deal with the anxiety is to transform the anxiety into fear. Then one will know exactly what is bothering them. Then a plan should be devised to deal with what is feared. Another notion of coping responses is whether a person is self-certain or not (Franken, 1994). **Self-certain** people are those who know their own strengths and weaknesses. People who are not self-certain only know their strengths. And since they do not know their own weaknesses, there is a lack of knowledge, thus an inability to create an effective coping response. These tend to be insecure, whereas self-certain people tend to have better self-esteem. Self-certain people tend to make plans to deal with their weaknesses. According to the cognitive perspective, one creates coping responses by transforming the anxiety into fear, and develops a plan to deal with it, which will create a sense of security.

Learning Perspective Theory of Fear and Anxiety (Carissa Kelvens, 1997): Anxiety is an acquirable or conditioned drive which functions to motivate avoidance responding (Mowrer, 1939). Therefore, the avoidance response is assumed to be reinforced by a reduction in anxiety. Fear is a conditioned response to pain. If one experiences pain in a specific situation, the stimuli associated with that situation acquires the ability to evoke the same emotional reaction that the pain originally elicited (Miller, 1948).

According to the avoidance learning paradigm, a participant must learn to make some response to avoid an aversive stimulus. When the response is made early, any anxiety that occurs is immediately reduced (Solomon and Wynne, 1954). The reduction in anxiety evolves into the reinforcer of the avoidance response. As a result of Pavlovian conditioning, this problem can persist for a long time in the absence of reinforcement. Humans tend to exhibit less fear when encountered with a symbolic form of a stimulus, and extreme fear of a concrete stimulus.

Causes of coronavirus (COVID-19)

Infection with the new coronavirus (Severe acute respiratory syndrome coronavirus 2, or SARS-COV-2) causes coronavirus disease 2019 (COVID-19) (Shigenura, et al, 2020). The recent outbreak began in Wuhan, a city in the Hubei province of China Reports of the first COVID-19 cases started in December, 2019. Coronavirus are common in certain species of animals, such as cattle and camels, although the transmission of coronaviruses from animals to humans is much likely (Malta, et al, 2020). However, it remains unclear exactly, how the virus first spread to humans.

Some people trace the earliest cases back to a seafood and animal market in Wuhan. It may have been from here that severe acute respiratory syndrome coronavirus 2 started to spread to humans. The virus appears to spread easily among people, and more continues to be discovered over time about how it spreads. Data have shown that it spreads from person to person among those in close contact (within about 6 feet, or 2 meters). The virus spreads by respiratory droplets released when someone with the virus coughs, sneezes or talks. These droplets can be inhaled or land in the mouth or nose of a person nearby (Mayo,2020) It can also spread if a person touches a surface with the virus on it and touches his or her mouth, nose or eyes, although this isn't considered to be the main way it spreads. Be it as it may, the most common way that this illness spreads is through close contact with someone who has the infection. Close contact is most contagious when a person's symptoms are at their peak (Mayo, 2020). Although it is possible for someone who does not manifest any of the symptoms of coronavirus to spread the virus. A study according to Mayo (2020) suggests that 10% of infections are from people exhibiting no symptoms. Droplets containing the virus can also land on nearby surface or objects. Other people can pick up the virus by touching these surfaces or objects. Infection is likely if the person then touches their nose, eyes, or mouth.

Consequences of coronavirus (COVID-19) pandemic

COVID-19 affects people every day. Older people, and people with chronic medical conditions, such as diabetes and heart disease, appear to be more at risk of developing severe symptoms. As this is a new virus, we are still learning about how it affects children. We know it is possible for people of any age to be infected with the virus, but so far there are relatively few cases of COVID-19 reported among children. This is a new virus and we need to learn more about how it affects children. The virus can be fatal in rare cases, so far mainly among older people with pre-existing medical conditions. The COVID-19 pandemic has had far-reaching consequences beyond the spread of the disease itself and efforts to quarantine the victims of the disease, including political, educational, cultural and social implications (Kang, Chen, Yang & Yang (2020).

Political Impacts: A number of provincial-level administrators of the Communist Party of China (CPC) were dismissed over their handling of the quarantine efforts in central China, a sign of discontent with the political establishment's response to the outbreak in those regions. Some experts believe this is likely in a move to protect Communist Party general secretary Xi Jinping from people's anger over the coronavirus pandemic (Mayo, 2020).

The United States president Donald Trump was criticized for his response to the pandemic (Malta, Rimoin & Strathdel, 2020). The Government of the Islamic Republic of Iran has been heavily affected by the virus, with at least two dozen members (approximately 10%) of the Iranian legislature being infected, as well as at least 15 other current or former top government officials, including the vice-president (Malta et al, 2020).

Here in Nigeria, the Nigerian president was accused of not closing the international Airports on time which warranted the Italian businessman to come into the country and infected the citizens (WHO & NCDC, 2020). Both house of Representatives and the National Assembly were unable to sit during the first four weeks to address issues concerning the nation which requires urgent attention such as; Banditry, Kidnapping, Rape, and insurgency. Most especially the issue of rape was on the high side in Nigeria during the period of COVID-19 pandemic lockdown.

Impact on sovereignty: Geo-economics and country risk-experts have emphasized the potential erosion of political and economic sovereignty that may affect some already-enfeebled countries like Italy: Edward Luttwak has called covid-19 “the virus of truth” (Kang, et al, 2020).

Civil rights and democracy: Iran, Jordan, Morocco, Oman, and Yemen banned the printing and distribution of newspapers (Wang et al, 2020). On the 30th of March, 2020, the parliament of Hungary granted Prime Minister Viktor Orban the power to rule by decree for an indefinite period.

Educational Impact: The pandemic has affected educational systems worldwide, leading to the widespread closures of schools and universities. According to data released by UNESCO on 25 March, school and university closures due to COVID-19 were implemented nationwide in 165 countries including Nigeria. This affected over 1.5 billion students’ worldwide, accounting for 87% of enrolled learners of which Nigeria is inclusive. The Nigerian Government through the Minister of Education Mallam Adamu Adamu has stated that the Federal Government Colleges will not be allowed to sit for the WAEC 2020 to ensure that the pandemic will not spread to the students thereby risking the lives of the hope of future Nigeria. All schools in Nigeria from primary, secondary, tertiary and universities have to resort to online teaching via zoom and other web applications. This is primarily aimed at keeping the students busy learning until the pandemic is partially or fully over. As at the time of this article is barely two months ago between the September and October that the students sat for their 2020 WAEC.

Religious Impact: The pandemic has impacted religion in various ways, including the cancellation of the worship services of various faiths, the closure of Sunday schools, as well as the cancellation of pilgrimages surrounding observances and festivals (Malta, et al, 2020). Many churches, synagogues, mosques, and temples have offered worship through live stream amidst the pandemic.

Psychological Impact: The World Health Organization issued a report related to mental health and psychosocial issues by addressing instructions and some social considerations during the COVID-19 outbreak. **Suicide:** The coronavirus pandemic has been followed by a concern for a potential spike in suicides, exacerbated by social isolation due to quarantine and social-distancing guidelines, fear, and unemployment and financial factors (Shigemura, Ursano, Morgansten, Kurosawa and Benedek, 2020).

Risk Perception: Chaos and the negative effects of the COVID-19 pandemic may have made a catastrophic future seem less remote and action to prevent it more necessary. However, it may also have the opposite effect by having minds focus on the more immediate threat of the pandemic rather than the climate crisis or the prevention of other disasters.

Personal Gatherings: The consequences on personal gatherings has been strong as medical experts have advised, and local authorities often mandated stay-at-home orders to prevent gatherings of any size, not just the larger events that were initially restricted. Such gatherings may be replaced by teleconferencing, or in some cases with unconventional attempts to maintain social distancing with activities such as a balcony sing-along for a concert, or a “birthday parade” for a birthday party. Replacement of gatherings has been seen as significant to mental health during the crisis. Social isolations among alcohol users has also adopted a trend towards “Kalsarikanni or “pants drinking” a Finnish antisocial drinking culture.

Domestic Violence: Many countries have reported an increase in domestic violence and intimate partner violence attributed to lockdowns amid the COVID-19 pandemic. Financial insecurity, stress, and uncertainty have led to increased aggression at home, with abusers able to control large amounts of their victims' daily life.

Control Measures of Fear and Anxiety Factors in the spread of COVID-19 Pandemic in schools

The following are some of the control measures in steps to reduce the risk of infection and spread of COVID-19 pandemic in schools. The following guidelines will provide clear and actionable guidance for safe operations through the prevention, early detection and control of COVID-19 in schools and other educational facilities. The guidance, while specific to countries that have already confirmed the transmission of COVID-19, is still relevant in all other contexts. Education can encourage students to become advocates for disease prevention and control at home, in school, and in their community by talking to others about how to prevent the spread of viruses. Maintaining safe school operations or reopening schools after a closure requires many considerations but, if done well, can promote public health.

School Administrators, Teachers and Staff

Following basic principles can help keep students, teachers, and staff safe at school and help stop the spread of this disease. Recommendations for healthy schools are:

- Sick students, teachers and other staff should not come to school
- Schools should enforce regular hand washing with safe water and soap, alcohol rub/hand sanitizer or chlorine solution and, at a minimum, daily disinfection and cleaning of school surfaces
- Schools should provide water, sanitation and waste management facilities and follow environmental cleaning and decontamination procedures

Implement social distancing practices that may include:

- Staggering the beginning and end of the school day
- Cancelling assemblies, sports games and other events that create crowded conditions
- When possible, create space for children's desks to be at least one metre apart
- Teach and model creating space and avoiding unnecessary touching

Establish procedures if students or staff become sick

Plan ahead with local health authorities, school health staff and update emergency contact lists. Ensure a procedure for separating sick students and staff from those who are well – without creating stigma – and a process for informing parents/caregivers, and consulting with health care providers/health authorities wherever possible. Students/staff may need to be referred directly to a health facility, depending on the situation/context, or sent home. Share procedures with staff, parents and students ahead of time. Promote information sharing, coordinate and follow guidelines from the national health and education authorities. Share known information with staff, caregivers and students, providing updated information on the disease situation, including prevention and control efforts at school. Reinforce that caregivers should alert the school and health care authorities if someone in their home has been diagnosed with COVID-19 and keep their child at home. Utilize parent-teacher committees and other mechanisms to promote information sharing. Also be sure to address children's questions and concerns, including through the development of child-friendly materials such as posters which can be placed on notice boards, in restrooms, and other central

locations. Adapt school policies where appropriate. Develop flexible attendance and sick leave policies that encourage students and staff to stay home when sick or when caring for sick family members. Discourage the use of perfect attendance awards and incentives. Identify critical job functions and positions, and plan for alternative coverage by cross training staff. Plan for possible academic calendar changes, particularly in relation to breaks and exams. Monitor school attendance, implement school absenteeism monitoring systems to track student and staff absence and compare against usual absenteeism patterns at the school. Alert local health authorities about large increases in student and staff absenteeism due to respiratory illnesses.

Plan for continuity of learning

In the case of absenteeism/sick leave or temporary school closures, support continued access to quality education. This can include:

- Use of online/e-learning strategies
- Assigning reading and exercises for home study
- Radio, podcast or television broadcasts of academic content
- Assigning teachers to conduct remote daily or weekly follow up with students
- Review/develop accelerated education strategies Implement targeted health education Integrate disease prevention and control in daily activities and lessons. Ensure content is age-, gender-, ethnicity-, and disability-responsive and activities are built into existing subjects.

Checklist for School Administrators, Teachers and Staff (Lisa, 2020)

1. Promote and demonstrate regular hand washing and positive hygiene behaviors and monitor their uptake. Ensure adequate, clean and separate toilets for girls and boys. Ensure soap and safe water is available at age-appropriate hand washing stations. Encourage frequent and thorough washing (at least 20 seconds). Place hand sanitizers in toilets, classrooms, halls, and near exits where possible. Ensure adequate, clean and separate toilets or latrines for girls and boys
2. Clean and disinfect school buildings, classrooms and especially water and sanitation facilities at least once a day, particularly surfaces that are touched by many people (railings, lunch tables, sports equipment, door and window handles, toys, teaching and learning aids etc.)
 - Use sodium hypochlorite at 0.5% (equivalent 5000ppm) for disinfecting surfaces and 70% ethyl alcohol for disinfection of small items, and ensure appropriate equipment for cleaning staff
3. Increase air flow and ventilation where climate allows (open windows, use air conditioning where available, etc.)
4. Post signs encouraging good hand and respiratory hygiene practices
5. Ensure trash is removed daily and disposed of safely

Parents/Caregivers and Community Members

The virus can be fatal in cases, so far mainly among older people with pre-existing medical conditions. Know the latest facts, understand basic information about coronavirus disease (COVID-19), including its symptoms, complications, how it is transmitted and how to prevent transmission. Stay informed about COVID-19 through reputable sources such as UNICEF and WHO and national health ministry advisories. Be aware of fake information/myths that may circulate by word-of-mouth or online. Recognize the symptoms of COVID-19 (coughing, fever, shortness of breath) in your child, seek medical advice by first calling your health facility/provider and then take your child in, if

advised. Remember that symptoms of COVID-19 such as cough or fever can be similar to those of the flu, or the common cold, which are a lot more common. If your child is sick, keep him/her at home and notify the school of your child's absence and symptoms. Request reading and assignments so that students can continue learning while at home. Explain to your child what is happening in simple words and reassure them that they are safe. Keep children in school when healthy. If your child isn't displaying any symptoms such as a fever or cough it's best to keep them in school – unless a public health advisory or other relevant warning or official advice has been issued affecting your child's school. Instead of keeping children out of school, teach them good hand and respiratory hygiene practices for school and elsewhere, like frequent hand washing.

The steps below will throw better light in the area of discuss, covering a cough or sneeze with a flexed elbow or tissue, then throwing away the tissue into a closed bin, and not touching their eyes, mouths or noses if they haven't properly washed their hands. Washing hands properly

Step 1: Wet hands with safe running water

Step 2: Apply enough soap to cover wet hands

Step 3: Scrub all surfaces of the hands – including backs of hands, between fingers and under nails – for at least 20 seconds

Step 4: Rinse thoroughly with running water

Step 5: Dry hands with a clean, dry cloth, single-use towel or hand drier as available. Wash your hands often, especially before and after eating; after blowing your nose, coughing, or sneezing; going to the bathroom/ toilets/latrines and whenever your hands are visibly dirty. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water, if hands are visibly dirty. Help children cope with the stress. Children may respond to stress in different ways. Common responses include having difficulties sleeping, bedwetting, having pain in the stomach or head, and being anxious, withdrawn, angry, clingy or afraid to be left alone. Respond to children's reactions in a supportive way and explain to them that they are normal reactions to an abnormal situation. Listen to their concerns and take time to comfort them and give them affection, reassure them they're safe and praise them frequently. If possible, create opportunities for children to play and relax. Keep regular routines and schedules as much as possible, especially before they go to sleep, or help create new ones in a new environment. Provide age-appropriate facts about what has happened, explain what is going on and give them clear examples on what they can do to help protect themselves and others from infection. Share information about what could happen in a reassuring way. For example, if your child is feeling sick and staying at home or the hospital, you could say, "You have to stay at home/at the hospital because it is safer for you and your friends. I know it is hard (maybe scary or even boring) at times, but we need to follow the rules to keep ourselves and others safe. Things will go back to normal soon."

Checklist for Parents/Caregivers & Community Members (Lisa, 2020)

1. Monitor your child's health and keep them home from school if they are ill
2. Teach and model good hygiene practices for your children. Wash your hands with soap and safe water frequently. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water, if hands are visibly dirty. Ensure that safe drinking water is available and toilets or latrines are clean and available at home. Ensure waste is safely collected, stored and disposed of. Cough and sneeze into a tissue or your elbow and avoid touching your face, eyes, mouth and nose.

3. Encourage your children to ask questions and express their feelings with you and their teachers. Remember that your child may have different reactions to stress; be patient and understanding.
4. Prevent stigma by using facts and reminding students to be considerate of one another
5. Coordinate with the school to receive information and ask how you can support school safety efforts (though parent-teacher committees, etc.)

Age-specific health education

Below are suggestions on how to engage students of different ages on preventing and controlling the spread of COVID-19 and other viruses. Activities should be contextualized further based on the specific needs of children (language, ability, gender, etc.).

Preschool

- Focus on good health behaviours, such as covering coughs and sneezes with the elbow and washing hands frequently
- Sing a song while washing hands to practice the recommended 20 second duration. - Children can “practice” washing their hands with hand sanitizer
- Develop a way to track hand washing and reward for frequent/timely hand washing
- Use puppets or dolls to demonstrate symptoms (sneezing, coughing, and fever) and what to do if they feel sick (i.e. their head hurts, their stomach hurts, and they feel hot or extra tired) and how to comfort someone who is sick (cultivating empathy and safe caring behaviours)
- Have children sit further apart from one another, have them practice stretching their arms out or ‘flap their wings’, they should keep enough space to not touch their friends.

Primary School

- Make sure to listen to children’s concerns and answer their questions in an age-appropriate manner; don’t overwhelm them with too much information. Encourage them to express and communicate their feelings. Discuss the different reactions they may experience and explain that these are normal reactions to an abnormal situation.
- Emphasize that children can do a lot to keep themselves and others safe. - Introduce the concept of social distancing (standing further away from friends, avoiding large crowds, not touching people if you don’t need to, etc.) - Focus on good health behaviors, such as covering coughs and sneezes with the elbow and washing hands
- Help children understand the basic concepts of disease prevention and control. Use exercises that demonstrate how germs can spread. For example, by putting colored water in a spray bottle and spraying over a piece of white paper. Observe how far the droplets travel.
- Demonstrate why it is important to wash hands for 20 seconds with soap and water - Put a small amount of glitter in students’ hands and have them wash them with just water, notice how much glitter remains, then have them wash for 20 seconds with soap and water
- Have students analyze texts to identify high risk behaviours and suggest modifying behaviours
11 - For example, a teacher comes to school with a cold. He sneezes and covers it with his hand. He shakes hands with a colleague. He wipes his hands after with a handkerchief then goes to class to teach. What did the teacher do that was risky? What should he have done instead?

Lower Secondary School

- Make sure to listen to students’ concerns and answer their questions.
- Emphasize that students can do a lot to keep themselves and others safe. - Introduce the concept of social distancing - Focus on good health behaviors, such as covering coughs and sneezes with

the elbow and washing hands - Remind students that they can model healthy behaviours for their families

- Encourage students to prevent and address stigma - Discuss the different reactions they may experience and explain these are normal reactions to an abnormal situation. Encourage them to express and communicate their feelings
- Build students' agency and have them promote facts about public health. - Have students make their own public service announcements through school announcements and posters
- Incorporate relevant health education into other subjects - Science can cover the study of viruses, disease transmission and the importance of vaccinations - Social studies can focus on the history of pandemics and evolution of policies on public health and safety - Media literacy lessons can empower students to be critical thinkers and makers, effective communicators and active citizens

Upper Secondary School

- Make sure to listen to students' concerns and answer their questions.
- Emphasize that students can do a lot to keep themselves and others safe. - Introduce the concept of social distancing
- Focus on good health behaviors, such as covering coughs and sneezes with the elbow and washing hands Encourage students to prevent and address stigma - Discuss the different reactions they may experience and explain these are normal reactions to an abnormal situation. Encourage them to express and communicate their feelings.
- Incorporate relevant health education into other subjects - Science courses can cover the study of viruses, disease transmission and the 12 importance of vaccinations - Social studies can focus on the history of pandemics and their secondary effects and investigate how public policies can promote tolerance and social cohesion.
- Have students make their own Public Service Announcements via social media, radio or even local television broadcasting.

Implications for Counselling

Having seen the trend of cases, causes and measures to be taken in order to ensure that this outbreak of coronavirus (COVID-19) would be brought to a control without lasting so long considering the consequences it has already brought to the entire world and Nigeria in particular affecting every sector of life and economy at large. It therefore becomes quite imperative that qualified counselors should be engaged just like other health workers to do the following:

- To ensure that in every local government's wards within the constituency in every Local Government Areas, State and Federal levels would be engaged with professional counselors who are well-equipped with psychotherapeutic intervention strategies to ensuring that, this outbreak would be effectively and efficiently handled.
- To sensitize the citizens on the need to accept the reality concerning the COVID-19 pandemic. This will enable the citizens to appreciate the fact that this disease has come to stay with us like other sicknesses and diseases such as; Malaria, Ebola, HIV&AIDS and others.
- To ensure that, there would be constant general group and individual counselling exercises on most of the common practices expected of everyone to practice on daily basis such as; educating people to be aware that, as they touch someone, surfaces and objects throughout the day, they are likely to accumulate germs on their hands. As a result of this, they can infect themselves with these germs by touching their eyes, nose and mouth.

- To be able to apply some of the theoretical frameworks on fear, anxiety and phobia which will help to reduce the level of psychological problems this COVID-19 will be causing to man.

Conclusion

People and organizations all over the world are becoming more interested and embracing policies that would help to prevent the spread of this disease 'coronavirus' (COVID-19). Hence, the saying "prevention is better than cure". This is because, the problems arising from this outbreak has affected all sectors of humanity such as; political, education, social and religious` groups. Having seen its acclaimed causes, mode of spreading and the consequences it has brought to the world`s economy and Nigeria in particular, it becomes quite imperative that the engagement of professional counsellors who are well-trained and equipped with skills to assist the government and other agencies to the fight against the spread of COVID-19 pandemic. Hence the saying "prevention is better than cure" since there is no permanent cure already discovered by health organizations for example, World Health Organization (WHO), Nigeria Centre for Disease Control (NCDC) and others across the globe.

Suggestions for Improvement

There is an urgent need for professional counsellors to be engaged in the fight against coronavirus disease (COVID-19). This will enable easy reach out to the people in the downstream creating the awareness on issues concerning COVID-19 without causing much fear and anxiety to the citizens. This can be done through frequently organizing both individual and group counselling programmes to sensitize people more on the insights of COVID-19, causes, consequences and control measures of fear factors in the spread of the pandemic. Health related workers should be encouraged to refer cases which require psycho-therapeutic interventions to work on their stress and anxiety before application of pure medical services. Therefore, government should act fast by granting the professional counselling associations legislative backing to bring this into action. This will assist in the fight of this pandemic and quick recovery of our economy before it would go into serious recession.

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