

Evaluating the ‘Whys’ of Noncompliance with COVID-19 Safety Measures in Lecture Halls/Theatres by Nigerian Undergraduates: The Perspectives of Students of Nnamdi Azikiwe University, Awka

Mary Nneka Nwiko, Azukaego Ifeoma Eluemuno, Israel Ugoma Obedjemurho, and Thompson Adagba Onah

ABSTRACT

Following the relaxation of lockdown necessitated by the outbreak of COVID-19, schools reopened and the need to contain the spread in schools became pivotal; making authorities of schools, including Nnamdi Azikiwe University (NAU), Awka, set up a response committee which came up with clearly spelled-out control measures for both staff and students. However, it is one thing to come up with a well-meaning policy and another and more importantly, to enforce unflinching compliance with the policy. It was the researchers’ observation that this safety policy did not enjoy unalloyed compliance and therefore, they considered it necessary to find out the whys of this noncompliance to put the school management and government at a vantage point to handle any eventual new waves of the pandemic. This study, therefore, sought to investigate the factors which militated against total compliance with COVID-19 pandemic safety measures in Nigerian schools and specifically the universities, from the perspectives of students of NAU, Awka. The present study adopted the descriptive survey design to examine the factors. The sample size was 786 (352 females and 434 males) ages 16 – 20 years who were randomly selected through a multistage sampling technique. The researcher-developed questionnaire titled Students’ Responses to COVID-19 Safety Measures Questionnaire (RCSMQ) was used to obtain the data for the study during their first semester examinations. The instrument was duly validated by two experts from the departments of Educational Foundations and Education Management and Policy, NAU, Awka respectively. The reliability of the instrument was determined using Cronbach alpha and an alpha coefficient of 0.82 was obtained which was high enough and therefore deemed reliable. Three research questions guided the study. They were answered using frequency and percentages and means. Results indicated that the interaction of factors such as school, lecturers and students-related hindered compliance of staff and students to the COVID-19 safety measures guiding the university. Factors found to have impeded compliance included a lack of enough lecture halls while the available ones were not spacious enough to allow for physical distancing, students’ delusion of the non-existence of the pandemic, and lack of interest from both lecturers and students, among others. The researchers concluded that there is a lot that lay on the hands of every stakeholder in the education system to keep our Nigerian schools safe from the menace of an eventual new wave of COVID-19 virus or outbreak of other tragic and challenging health problems that may occur in future, especially those that spread faster in overcrowded settings like school settings, and therefore, recommend that the government should increase budgetary allocation that can adequately fund university education needs while the school management should judiciously manage the funds to construct enough spacious lecture halls and provide other facilities, organize necessary programs for lecturers to orient them on the management of students in health challenging situations like that of COVID-19. Programs organized to eliminate the doubts of doubting Thomases among the students against the reality of COVID-19 and other health problems and their illusion of invulnerability are also recommended.

Keywords: COVID-19, Noncompliance, Lecturer-Related Factors, Student-Related Factors, School-Related Factors.

Published Online: November 03, 2022

ISSN: 2736-5522

DOI: 10.24018/ejsocial.2022.2.6.333

M. N. Nwiko

Nnamdi Azikiwe University, Department of Educational Foundations, Nigeria.

(e-mail: nm.nwiko@unizik.edu.ng)

A. I. Eluemuno*

Nnamdi Azikiwe University, Department of Educational Foundations, Nigeria.

(e-mail: ai.eluemuno@unizik.edu.ng)

I. U. Obedjemurho

University of Delta, Department of Educational Foundations, Nigeria.

(e-mail: Ugomaisrael22@gmail.com)

T. A. Onah

Alvan Ikoku Federal College of Education, Department of Educational Psychology Nigeria.

(e-mail: thompsononah@yahoo.com)

*Corresponding Author

I. INTRODUCTION

Although the swift actions - lockdown measures against the spread of the Coronavirus (COVID-19) pandemic, were adjudged to have been effective (Lone & Ahmad, 2020), nevertheless, the measures could not sustain for long due to their high impacts on the nation's socio-economy. Nduka (2020), capturing the intense setback which lockdown brought on the means of livelihood of people, observed that many people in the big cities were already living a hand-to-mouth existence and feared that the restrictions which cut off their means to earn money could leave them hungry. During the lockdown, people experienced untold hardships, job losses, and loss of social connections; businesses went grounded and bankrupt. Consequent to the aforementioned effects, there was a need for nations to begin to phase out the lockdown, even if partially. To ensure that COVID-19 cases didn't escalate following the ease-up, the World Health Organization rolled out guidelines that every nation must follow to ease up lockdown. During the media briefing on COVID-19 by World Health Organization (WHO) on 19 April 2020, all nations seeking to reopen the economy either partially or fully were issued six guidelines. These conditions which qualify for reopening include first, evidence that the transmission is well under control which involves both individual and community transmission channels. Second, an assurance that the health system is at its full capacity to detect, test, isolate, and treat every reported case and trace the associated contacts. Third, the major health facilities, centers, and nursing homes should be capable of minimizing the pandemic. Fourth, conscious plans and implementations should be in place to prevent infection transmission in workplaces, schools, houses of worship, and other essential places. Fifth, adequate plans to be in place to ensure the risks of COVID-19 importation are well monitored, and finally, aggressive education, engagement, and empowerment in the light of the "new norm" should be taken as a priority (Ajide *et al.*, 2020)

It is important to point out that the aforesaid steps were not fully in place in Nigeria despite the call for ease of the lockdown (Ibrahim *et al.*, 2020). Nevertheless, the economic implications of the situation propelled the decision to go ahead with phasing out the lockdown. As a result, the lockdown was eased and restrictions relaxed; returning human activities and interaction to normalcy. Schools reopened, as well as religious activities and social interactions. As expected, many people particularly students saw the ease of lockdown as a relief from boredom, hence a very welcome development. They were already feeling 'suffocated' in what seemed like home imprisonment for more than 6 months. People were eager to reopen their businesses while many students couldn't wait any longer to go back to school. Conversely, the easing up of the lockdown did not come without a strong worry for medical experts and health personnel who saw the action as premature and without a sustainable response and measures to control the transmission of COVID-19.

This timely warning from health experts domain, reinforced by the reality that fresh cases of COVID-19 were still being reported in Nigeria despite all scientifically proven preventive measures (Omaka, Aleke, Obande-Ogbuinya, Ngwakwe, Nwankwo and Afoke, 2020), the need to receive students back to school on the heels of the ease of lockdown poses a lot of questions. Chiefs among the questions that readily came to mind were: how prepared are Nigerian schools' (primary, secondary and tertiary) policymakers and authorities to contain the spread of coronavirus in the school communities in order to keep pupils and students protected? What measures had been put in place to enforce COVID-19 safety measures, and ensure strict compliance with such measures among staff and students? The responses to the above were answered in affirmative, given the COVID-19 safety measures contained in the internal memo of 25 January 2021, approved and duly circulated to the staff and students of the university by the NAU COVID-19 Response Committee headed by Professor Ikechebelu. However, the next question became; what were those factors which did not permit unflinching compliance with the measures by staff and students? These concerns motivated this study hence researchers set out to investigate what factors impeded unflinching compliance with COVID-19 safety measures in Nigerian schools, using Nnamdi Azikiwe University, Awka (NAU) as a case. It is important to state that these researchers, who are lecturers in the university, were particularly interested in the level of compliance with the safety protocols as it concerned lecture halls/theatres where lecturers meet with students for teaching and learning interactions.

There have been numerous excellent research publications that addressed this global menace called the COVID-19 pandemic. Examples of such research works are that of Bai *et al.* (2020), on the epidemiological history and clinical characteristics of 7 cases of COVID-19, and the determination of the incubation period of COVID-19 in which Elias *et al.* (2021) pooled estimate of the mean incubation period across 99 studies and arrived at 6.38 days, 95% CI (5.79; 6.97), etc. Some other authors published reviews of insights from behavioral and social sciences to give governments and policy-makers recommendations on how to fight the outbreak of COVID-19 from a behavioral point of view. For example, Lunn *et al.* (2020) provided a narrative review on evidence from behavioral science, covering 5 issues: hand-washing, face touching, self-isolation, public-spirited behavior, and responses to crisis communication. Based on their review, their main finding was that the effectiveness of communication stands out as a crucial issue to generate desirable behavior. Furthermore, Van Bavel *et al.* (2020) provided a review of insights from social and behavioral

sciences on how to align human behavior with recommendations from healthcare experts and epidemiologists. They used evidence from a selection of research topics relevant to pandemics, such as social and cultural influences on behavior, moral decision-making, and leadership.

Regarding preventive measures against the spread of the virus, Omaka *et al.* (2020) noted that despite all COVID-19 scientifically-proven preventive measures in Nigeria which include hand washing, use of sanitizers, wearing of face masks, lockdown and social distancing, cases of the disease was still being reported. Such undermining factors include poor compliance attitude, selective lockdown, social media interference, misconceptions and myths, stigmatization, fear, inadequate health facilities, and distrust of the government. A community-based cross-sectional study by Oromia *et al.* (2021), investigated factors limiting youths' practice of preventive measures toward the containment of COVID-19, using data from 384 youths, and found that the practice is militated against by several associated risk factors that include belief in the body's immunity to resist the disease, lack of paying attention to the disease, ignorance of evidence to the disease, ease of restriction of movements, lack of sensitization to actions in the community, and substance use. They further reiterated that while male youths were less likely to practice preventive measures than their female counterparts, older youth with higher education levels with higher incomes were more likely to practice preventive measures.

In another study in the Netherlands, using 568 participants, Kuiper *et al.* (2020) assessed how compliance with the Dutch approach to mitigate the COVID-19 virus has worked out in practice and what factors might affect whether Dutch people comply with the measures. The study's overall results showed reported high compliance which suggested that the Dutch approach has to a large extent worked as hoped in practice. Repression did not play a significant role in compliance, while intrinsic (moral and social) motivations did produce better compliance. In non-compliance research during the COVID-19 pandemic in Zurich, Switzerland, Nivette *et al.* (2020) found some areas of non-compliance that require additional attention from public health campaigns. They found a high rate of non-compliance with certain hygiene and social distancing measures, including cleaning and disinfecting mobile phones or standing 1.5–2 m apart while non-compliance with certain other protective measures, such as avoiding groups, coughing or sneezing into one's elbow, and washing one's hands regularly, was generally low. This confirms their earlier observation that adolescents and young adults were identified internationally as a group with potentially low compliance rates with public health measures aimed at curbing the spread of coronavirus disease 2019 (COVID-19). Their finding was in consonance with that of Ogbonda *et al.* (2020) in their study of knowledge and compliance with standard precautions amongst healthcare workers in selected hospitals in Rivers State, Nigeria from their study which revealed HCW's noncompliance with SPs for various job categories; cleaners/porters (85.8%), followed by nurses (70.4%), attendants (66.7%), radiographers (64.5%), administrators (62.1%), technicians (61.3%), pharmacists (60.9%) and lastly doctors (60.2%). Albaqawi *et al.* (2020) carried out a quantitative, descriptive, and cross-sectional study in Saudi Arabia, using a convenience sample of 1,226 student nurses from seven universities on an online survey on demographic characteristics, perceptions, knowledge, and preventive behavior of Saudi student nurses. Nearly all the students were aware of the outbreak (99.2%), and most of them received information on COVID-19 primarily from social media (71.0%). Over three-fourths of the students were confident that the government (89.1%) and Ministry of Health (MOH) (86.5%) were doing a good job responding to the COVID-19 outbreak in the country. The overall average score in the knowledge questionnaire was 9.85 (SD = 1.62, range = 0–12), which is equivalent to 82.1%. The majority of the students always performed most of the preventive behavior identified in the survey, except “washing hands with soap and water for at least 20 s after blowing my nose, coughing, or sneezing” (39.2%) and “daily cleaning and disinfecting frequently touched surfaces” (41.6%). Being female, being in the fourth year, and gaining good perceived knowledge were associated with high actual COVID-19 knowledge. University, gender, age, academic level, and perceived COVID-19 knowledge were the associated factors.

The above literature overview showed no evidence of empirical work carried out to establish the impedances to satisfactory compliance to the control measures against the spread of COVID-19 in schools in Nigeria, and if at all, none has studied Nnamdi Azikiwe University, Awka in this regard. This study, therefore, tends to close the gap.

II. PURPOSE OF THE STUDY

The main purpose of the study was to evaluate the ‘whys’ of noncompliance with COVID-19 safety measures in lecture halls/theatres by Nigerian undergraduates: the perspectives of students of Nnamdi Azikiwe university, Awka. Specifically the study intends to:

- i. Examine the school related factors that impedes compliance with COVID-19 safety measures among undergraduates in NAU, Awka.

- ii. To find out the Lecturer related factors that impedes compliance with COVID-19 safety measures among undergraduates in NAU, Awka.
- iii. To determine the student-related factor that impedes compliance with COVID-19 safety measures among undergraduates in NAU, Awka.

A. Research Questions

1. What were the school-related factors that impeded compliance with COVID-19 safety measures among undergraduates in NAU, Awka?
2. What were the lecturer-related factors that impeded compliance with COVID-19 safety measures among undergraduates in NAU, Awka?
3. What were the student-related factors that impeded compliance with COVID-19 safety measures among undergraduates in NAU, Awka?

III. METHOD

In this study, the researchers adopted a descriptive research design. A descriptive survey aims at collecting data on and describing in a systematic manner the features and facts about a given population (Akinlua, 2019). The researchers considered the design suitable for the present study which collected and analyzed data to explain undergraduate students' challenge in complying with COVID-19 safety protocols in the lecture halls as contained in the internal memo of 25 January 2021, approved and duly circulated to the staff and students of the university by the NAU COVID-19 Response Committee headed by Professor Ikechebelu. The researchers found the paper a worthy instrument in the structuring of the questionnaire.

A. Participants

The study covered 8 departments from the Faculty of Education, NAU, Awka. The students from the 8 departments offer Education faculty-wide courses known to have a very large population of students. The courses included Sociological Foundation of Education (Edu 101), Historical Foundation of Education (Edu 103), Introduction to Educational Psychology (Edu 111), Introduction to Psychology of Learning (Edu 212), Basic Methodology (Edu 222), Educational Measurement and Evaluation (Edu 333), Special Education (Edu 335) all from the Educational Foundations department, Faculty of Education, Nnamdi Azikiwe University, Awka. The participants were 352 female and 434 male undergraduate students of NAU, Awka, whose ages ranged from 16 and 20 and mean age of 19.24 years and a standard deviation of 4.39. Multi-stage sampling technique which involved purposive, stratified, and simple random techniques was used to obtain the sample. Purposive was used to make a choice of faculty; stratified sampling was used to select departments and gender and simple random sampling was used to select participants from their respective departments.

B. Data Collection

Before the researchers went out to interact with the respondents on why compliance with the safety measures in the lecture halls was difficult, they scrutinized the five COVID-19 safety measures duly circulated to staff and students of the university by the committee in charge. The researchers found the paper a worthy document to work with, hence its inclusion as an instrument in the study. The committee outlined five COVID-19 safety protocols recommended and approved for urgent and strict compliance in the lecture halls/theatres by those concerned. They are:

- i. Compulsory use of a facemask
- ii. Hand washing or Hand sanitization at the entrance
- iii. Maintenance of physical distancing of not less than 2 meters
- iv. Ensure good ventilation
- v. All meetings, lectures, and examinations should be moderated according to Covid-19 recommendation

A researchers-structured questionnaire titled Students' Responses to Covid-19 Safety Measures Questionnaire (RCSMQ) was used in eliciting responses from the respondents. The Questionnaire contained 17 items with 4 clusters (compliance level: 1, school factor: 7 items, lecturer factor: 5 items, and student factor: 4 items,) to address each of the research questions. The response system of the questionnaire was on a four-point Likert scale of strongly agreed, agreed, disagreed, and strongly disagreed weighing 4, 3, 2, and 1 respectively. The questionnaire was validated by 2 experts in the department of Educational Foundations and Education Management and Policy, Faculty of Education, Nnamdi Azikiwe University, Awka, Nigeria. The reliability of the instrument was determined through pilot-testing the instrument on 70 undergraduate students of the Faculty of Law, at Nnamdi Azikiwe University who were not part of the sample. Cronbach Alpha was employed in determining the reliability of the instrument and an alpha coefficient of 0.82 was obtained which was considered high and fit for use.

C. Procedure

The study started with a pilot study to ensure the instruments for the study were a reliable measure of the construct. The questionnaire was administered by the researchers with the help of two Graduate Assistants (GAs) in the researchers' office who did the work of research assistants for them. The two research assistants that were engaged by the researchers, being university graduates already were used to the norms and practices of research. All the same, the researchers trained them, especially on the details of data collection for this study. The researchers together with the research assistants visited the departments and gave out the questionnaire. The participants were assured of the confidentiality of the questionnaire to participants who were willing to be part of the study. They were assured that their responses were needed only for the purpose of empirical inquiry. The questionnaire was prepared in a booklet and was hand-distributed to the participants. The participants were given both oral and written instructions on how they may fill in the items to represent their responses as there are no right or wrong answers. The inquiry is only for academic purposes. Filling out their responses to the item questions took each of the respondents about 15 minutes. Afterward, the researchers collected back the filled questionnaire from the respondents. After collecting the filled questionnaire, they were sorted and only the valid ones were coded in an excel spreadsheet for analysis. The analysis included a descriptive evaluation of participants' responses.

IV. RESULTS

A. Views of Undergraduate Students on Their Compliance Level with COVID-19 Safety Policy for The University's Lecture Halls/Theatres

Table I reveals a high level of non-compliance with the university's covid-19 safety policy in the lecture halls/theatres for undergraduate students. With only 129 undergraduate students representing 16.4% indicating that they always unflinchingly complied, 296 representing 37.6% of them exhibited partial compliance while as many of the undergraduate students as 361 which is representative of 46% agreed they never complied, compliance with the policy was poor among undergraduate students.

B. What Were The School-Related Factors Which Impeded Undergraduate Compliance With COVID-19 Safety Policy In NAU, Awka?

Table II reveals that all the items (1, 2, 3, 4, 5, 6, and 7) obtained a mean rating above the criterion of 2.50 which indicates they were agreed on as the school-related factors that impeded undergraduate students' compliance with COVID-19 safety policy for university's lecture halls/theatres.

TABLE I: FREQUENCY AND PERCENTAGE DISTRIBUTION OF UNDERGRADUATE STUDENTS' VIEWS ON THEIR COMPLIANCE LEVEL WITH COVID-19 SAFETY POLICY FOR THE UNIVERSITY'S LECTURE HALLS/THEATRE

Item	Responses	Frequency	Percentage
Students' compliance rate with COVID-19 safety policy in lecture halls/theatres	Always	129	16.4
	Not always	296	37.6
	Never	361	46
	Total	786	100

TABLE II: MEAN RATING OF RESPONDENTS ON SCHOOL-RELATED FACTORS WHICH AFFECTED UNDERGRADUATES' COMPLIANCE WITH COVID-19 SAFETY POLICY IN UNIVERSITY'S LECTURE HALLS/THEATRES

S/N School-related factors that affected undergraduate compliance with COVID-19 safety policy in lecture halls	X	SD	Remarks
There was a dearth of spacious lecture halls to allow for physical distancing	3.71	1.18	Agree
The facilities in the few existing lecture halls were overused and dilapidated hence forced the students to always cluster around the few good ones	2.90	1.17	Agree
Distance could not be maintained during lectures because there were no functional public address system (PAS) to amplify lecturers' voice volume to reach students who were distanced in compliance	2.80	1.67	Agree
Lack of constant provision of necessary materials for COVID-19 prevention in the lecture halls/theatres	3.08	1.77	Agree
Lack of good ventilation made the compulsory wearing of facemask difficult	3.30	1.84	Agree
University monitoring committee for enforcement of COVID-19 recommendations did not always come around	2.58	1.00	Agree
Fewness of lecturers' office accommodations	3.70	1.18	Agree
Cluster mean	-	3.06	-

C. What Were The Lecturers-Related Factors Which Impeded Undergraduate Compliance With COVID-19 Safety Policy In NAU, Awka?

Table III shows the mean ratings of the undergraduate students of NAU, Awka on the lecturer-related factors that affected their (students) noncompliance with COVID-19 safety policy in university lecture halls/theatres. Table III revealed that all the items (1, 2, and 3) were agreed on by the undergraduate students because their mean scores were above the criterion mean of 2.50.

D. What Were The Student-Related Factors That Were Responsible For Undergraduate Noncompliance With COVID-19 Safety Policy In Lecture Halls/Theatres In NAU, Awka?

Table IV reveals the mean ratings of the opinions of undergraduate students of NAU, Awka on the students-related factors which caused them not to comply with COVID-19 safety policy in their lecture halls/theatres. The table revealed that all the items (1, 2, 3, and 4) were agreed on by the undergraduate students as factors that impeded their unflinching compliance because their mean scores were above the criterion mean of 2.50.

TABLE III: MEAN RATING OF RESPONDENTS ON LECTURER-RELATED FACTORS THAT AFFECTED UNDERGRADUATE STUDENTS' COMPLIANCE WITH COVID-19 SAFETY POLICY IN UNIVERSITY'S LECTURE HALLS/THEATRES

S/N Lecturer-related factors that affected undergraduate compliance with COVID-19 safety policy in lecture halls	X	SD	Remarks
Many of our lecturers we looked up to as role models did not comply with COVID-19 Safety policy	3.50	1.87	Agree
Lack of commitment on the part of the lecturers in enforcing compliance with COVID-19 policy among their students	2.60	1.61	Agree
Some lecturers did not believe in reality of COVID-19 hence saw the call for prevention of spread as deserving no attention	2.90	1.17	Agree

TABLE IV: MEAN RATING OF RESPONDENTS ON STUDENT-RELATED FACTORS RESPONSIBLE FOR UNDERGRADUATE STUDENTS' NONCOMPLIANCE WITH COVID-19 SAFETY POLICY IN NAU LECTURE HALLS/THEATRES

S/N Student-related factors affecting undergraduate students' compliance with COVID-19 safety policy in lecture halls	X	SD	Remarks
Students' delusion on nonexistence of COVID-19	3.10	1.76	Agree
Penchant to disregard rules made by the school authority particularly when their opinions were not sought over matters that concern them	3.40	1.84	Agree
Belief that even if COVID-19 is real, it won't affect them because of their seemingly strong immunity	2.90	1.17	Agree
Insufficient funds to provide the needed materials	2.80	1.7	Agree

V. DISCUSSION

The study explored the perspectives of 786 undergraduate participants from Nnamdi Azikiwe University, Awka, regarding the level of compliance with COVID-19 safety protocols and why compliance was not total in Nigerian schools. The study revealed a good knowledge of the measures but high level of non-compliance in the lecture halls/theatres by the students. While only 16.4% of the study participants exhibited unflinching compliance, 37.6% comply some of the times and 46% of them reported total non-compliance. This finding is in consonance with the observation of Nivette *et al.* (2020) that adolescents and young adults were identified internationally as a group with potentially low compliance rates with public health measures aimed at curbing the spread of coronavirus disease 2019 (COVID-19). This could be because these undergraduates are in the age bracket of individuals who perceive a low risk of contracting or being harmed by the virus, and even while infected, displays mild or no symptoms. This sentiment is in agreement with Centers for Disease Control [CDC] COVID-19 Response Team (2020) which observed that this group often displays only mild or no symptoms of COVID-19, even while being infectious. This finding, however, differs from that of Kuiper *et al.* (2020) which assessed how compliance with the Dutch approach to mitigate the COVID-19 virus have worked out in practice in Netherlands and reported high compliance. It is critical to note, however, that the Dutch approach focuses less on repression and more on moral appeals, and self-discipline has to a large extent worked as hoped in practice. They found that repression did not play a significant role in compliance, while intrinsic (moral and social) motivations did produce better compliance.

This study equally brought to the fore the need to focus attention not just on the variable of student-factors while seeking to know why compliance with COVID-19 safety protocols in the lecture halls and theatres had been far-fetched. Other factors revealed in this study as reasons why the students failed to comply were categorized as school-related and lecturer-related respectively. Prominent among school-related factors which mitigated students' compliance were dearth of spacious lecture halls which made the students clustered around one another in total disregard to physical distancing; lack of good ventilation in the lecture halls which made the compulsory wearing of facemask difficult and inadequate provision of

necessary hand washing and sanitizing materials in the lecture halls/theatres by the school stakeholders and managers. The factors worried the researchers so much, considering the very important place that physical distancing occupies in curbing the spread of the COVID-19 which is a contagion. The researchers' sentiment agrees with WHO (2020) which observed that COVID-19 is caused by the SARS-CoV-2 virus, which spreads between people, mainly when an infected person is in close contact with another person. Another school-related factor was the lack of adequate lecturers' offices. There is no denying the fact that lecturers who carry out their duties which among others include, preparation of their lecture note, marking of students' scripts, attending to project supervision, modifying inappropriate behaviors of ailing students, etc. under the mango trees rather than comfortable offices, would usually enter the lecture halls too fatigued to be able to enforce students' compliance with the safety measures. This factor was as embarrassing as it is unfortunate, considering the effect which teacher burnout could have on students' academic achievement and general well-being. The study by Madigan and Kim (2020) confirmed that teacher burnout is associated with worse academic achievement and lower-quality student motivation.

The study equally revealed some lecturer-related factors which caused students' poor compliance with COVID-19 safety measures in the lecture halls/theatres. The factors identified were the failure of lecturers to role-model unflinching compliance with COVID-19 Safety policy; lack of commitment on the part of the lecturers in enforcing students' compliance with COVID-19 policy and the fact that some lecturers themselves did not believe in the reality of COVID-19 which made the call for prevention of spread one that deserved no attention. It was evident in the students' responses that the lecturers themselves were not disciplined in their compliance with COVID-19 safety measures. The implication of this finding is that the students saw no reason why they must comply when their lecturers were not. This finding can be explained using the social learning theory of Bandura (1977). Adolescents commit into memory any action they observe from their significant adults such as parents/guardians and teachers whom they consider models and reproduce such behaviors when similar occasions demand. This is why what learners see teachers do, impacts them more than what they hear from them. This played out in the case of non-compliance with COVID-19 preventive measures. Adolescents observed the behaviors of their social models and behaved in a similar fashion. This is supported by the findings of Wakoli (2018) that advertisements, novels, and movies are some of the factors that influence drinking and smoking among students.

Going further, the study revealed delusion on the nonexistence of COVID-19; a penchant to disregard rules made by the school authority particularly when their opinions were not sought over matters that concern them; belief that even if COVID-19 is real, it won't affect them because of their seemingly strong immunity and insufficient funds at the disposal of the students to provide the needed materials for themselves were the student-related factors which militated against compliance with preventive measures. This finding is in agreement with that of Feyisa (2021) WHO carried out a similar study in Oromia, Ethiopia to investigate factors limiting youths' practice of preventive measures toward the containment of COVID-19. Using data from 384 youths, the researcher found out that the practice is militated against by several associated risk factors that included belief in the body's immunity to resist the disease, lack of paying attention to the disease, ignorance of evidence of the disease, ease of restriction of movements, lack of sensitization to actions in the community, and substance use.

VI. CONCLUSION

The facts that emerged from the study afforded the researchers a thorough understanding of factors that inhibited Nigerian undergraduates from unflinchingly complying with COVID-19 safety measures in the lecture halls/theatres even when they had knowledge of the measures at their fingertips and can read them out off the cuff. The researchers gained the knowledge that students are not solely to be blamed for the non-compliant manner many of them handled the university's policy on the prevention of the spread of COVID-19. There is a lot that lay in the hands of every stakeholder in the education system to keep our Nigerian universities safe from the menace of the COVID-19 virus.

VII. RECOMMENDATIONS

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

- i. Government should increase budgetary allocation that will be enough to adequately fund university Education needs, especially infrastructure.
- ii. School management should judiciously manage the funds provided by the government as well as Internally Generated Revenue (IGR) to attack the problem of lack of spacious lecture halls/theatres, lecturers' offices, etc. to be able to check the problem of noncompliance in the event of a new wave of the pandemic and/or outbreak of a similar dangerous public health challenge.

- iii. Public health personnel in collaboration with Guidance Counsellors should be organizing quarterly health programs to orient their enlightenment to both lecturers and students who are often in doubt of the reality of health-challenging situations like that of COVID-19.

REFERENCES

- Ajide, K. B, Ibrahim, R. L, & Aliu, O.Y. (2020). Estimating the Impacts of Lockdown on COVID-19 Cases in Nigeria. *Transportation Research Interdisciplinary Perspective*, 7, 100217. <https://www.sciencedirect.com/science/article/pii/S2590198220301287>.
- Akinlua, S. (2019). *Comparing and Contrasting Descriptive Designs: Observational Studies, Correlational Research Development Design and Survey Research*. Retrieved from <http://www.researchgate.net/333981908>.
- Albaqawi, H. M., Alquwez, N., Balay-Odao, E., Bajet, J. B., Feleban, E. M., Alsolami, F., Tumala, R. B., et al. (2020). Nursing Students' Perceptions, Knowledge and Preventive Behaviours Towards COVID-19: A Multi-University Study. *Front Public Health*, 8, 573390. DOI: 10.3389/fpubh.2020573390.
- Bai, S. L., Wang, J. Y., Zhou, Y. Q., Yu, D. S., Gao, X. M., Li, L. L., & Yang, F. (2020). Analysis of the first cluster of cases in a family of novel coronavirus pneumonia in Gansu. *Zhonghua yu fang yi xue za zhi (Chinese journal of preventive medicine)*, 54(0), E005. Advanced online publication. <https://doi.org/10.3760/cma.j.issn.0253-9624.2020.0005>.
- Bandura, A. (1977). *Social Learning Theory*. Englewood Cliffs, New Jersey: Prentice Hall.
- Elias, C., Sekri, A., Leblanc, P., Cucherat, M., & Vanhems, P. (2021). The incubation period of COVID-19: A meta-analysis. *International Journal of Infectious Diseases*, 104, 708–710. <https://doi.org/10.1016/j.ijid.2021.01.069>.
- Feyisa, Z. T. (2021). Factors limiting youths' practice of preventive measures toward the outbreak of COVID-19 in Oromia special zone surrounding Finfinnee, Ethiopia. *PLOS ONE*, 16(3), e0248495. <https://doi.org/10.1371/journal.pone.0248495>.
- Ibrahim, R. L., Ajide, K. B., Olatunde Julius, O. (2020). Easing of lockdown measures in Nigeria: Implications for the healthcare system. *Health Policy and Technology*, 9(4), 399–404. <https://doi.org/10.1016/j.hlpt.2020.09.004>.
- Kuiper, M. E., de Bruijn, A. L., Reinders Folmer, C., Olthuis, E., Brownlee, M., Kooistra, E. B., Fine, A., van Rooij, B. (2020). The Intelligent Lockdown: Compliance with COVID-19 Mitigation Measures in the Netherlands. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.3598215>.
- Lone, S. A., Ahmad, A. (2020). COVID-19 pandemic – an African perspective. *Emerging Microbes Infections*, 9(1), 1300-1308. DOI: 10.1080/22221751.2020.1775132.
- Luo, Y., Trevathan, E., Qian, Z., Li, Y., Li, J., Xiao, W., Tu, N., et al. (2020). Asymptomatic SARS-CoV-2 Infection in Household Contacts of a Healthcare Provider, Wuhan, China. *Emerging Infectious Diseases*, 26(8), 1930–1933. <https://doi.org/10.3201/eid2608.201016>.
- Lunn, P., Belton, C., Lavin, C., McGowan, F., Timmons, S., Robertson, C. (2020). Using Behavioural Science to fight the Coronavirus. Working Paper No. 656, 1- 26. *Economic and Social Research Institute ESR, Dublin*. Econstor.eu.
- Madigan, D. J., Kim, L. E. (2020) Does Teacher Burnout Affect Students? A Systematic Review of its Association with Academic Achievement and Student-Reported Outcomes. *International Journal of Educational Research*, 105(2). DOI:10.1016/j.ijer.2020.1017.
- Nivette, A., Ribeaud, D., Murray, A., Steinhoff, A., Bechtiger, L., Hepp, U., Shanahan, L., Eisner, M. (2021). Non-compliance with COVID-19-related public health measures among young adults in Switzerland: Insights from a longitudinal cohort study. *Social Science & Amp; Medicine*, 268, 113370. <https://doi.org/10.1016/j.socscimed.2020.113370>.
- Nduka, O.(2020). Coronavirus lockdown: Nigerians cautious as restrictions eased in Lagos and Abuja. BBC News, Lagos.
- Ogbonda, P. N., Douglas, K., Moore, B. M. (2020). Knowledge and Compliance with Standard Precautions amongst Healthcare Workers in Selected Hospitals in Rivers State, Nigeria. *Asian Journal of Medicine and Health*, 18(2), 11-22. <https://doi.org/10.9734/ajmah/2020/v18i23018>.
- Omaka-Amari, L. N., Aleke, C. O., Obande-Ogbuinya, N. E., Ngwakwe, P. C., Nwankwo, O., Afoke, E. N. (2020). Coronavirus (COVID-19) Pandemic in Nigeria: Preventive and Control Challenges within the First Two Months of Outbreak. *African Journal of Reproductive Health*, 24(2). Special Edition for COVID-19.
- Severe Outcomes Among Patients with Coronavirus Disease 2019 (COVID-19). (2020, March 26). Centers for Disease Control and Prevention. Retrieved from: <https://www.cdc.gov/mmwr/volumes/69/wr/mm6912e2.htm>.
- Van Bavel, J., Baicker, C., Willer, R. (2020). Using Social And Behavioural Science to Support COVID-19 Pandemic Response. *Human Nature Behaviour*, 4, 460-471.
- Wakoli, C. O. (2018). Relationship between Exposure to Mass Media and Drug Abuse among Adolescent Students in Secondary Schools in Kenya. *International Journal of Scientific and Research Publications (IJSRP)*, 8(12). <https://doi.org/10.29322/ijrsp.8.12.2018.p84104>.