The Imperatives of Lobbying for Improved School Health Education Programme in Nigeria

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ABSTRACT

Information about health is a priceless commodity. This is because getting the right information at the right time saves a lot of lives. School education programme therefore is an imperative scheme which relevant authorities must identify with. This review is therefore assessing the imperatives of lobbying for improved school Health Education programme in Nigeria. The primary aim is to encourage lobbyists to establish a strong School Health Education Programme, comprehensive enough to meet students' needs. The study gathers that the success of School Health Education Programme is determined by how effective its lobbyists can participate in the lobbying competition. Based on the findings of this study, it is concluded that in Nigeria, competition for school time and fund allocation is stiff. Consequently, lobbyist should adopt a more flexible and creative strategy and make, in advance, a personal and continuous contact with decision makers so as to secure a better place for school health education programme in the education industry in Nigeria.

***Keywords**: Lobbying, Lobbyist, school health education programme, decision-makers*

INTRODUCTION

Schools are clearly one of the best settings for the promotion of health and change of attitude towards health issues among children of preschool, primary and secondary school age. These children spend most of their time in school which is an opportunity to impart health education. Ogbalu (2002) says that school has the responsibility to produce educated, responsible and healthy individuals. Despite this excellent opportunity to influence the health of children, many schools and communities have not accepted the responsibility for developing and implementing health education programmes.

In schools where school health education programmes have been established or are attempting to start, they are competiting with other programmes. Faced with shortage of teachers, opposition from organized conservative groups and tightening budgets, health education also competes with other classes for time allocation, supplies and materials, classroom facilities and professionally prepared health teachers. The school health education adopts the crisis-oriented approach with fragmented programmes in which a bit of health is offered in physical education, home economics, science and social science (Kane, 2010), the victims of this competition and approach according to Kane (2010) are children who have been denied access to accurate health information and skills essential to choosing and practising healthy lifestyle. For this reason, there is need to have a school health

education Lobbyist who will lobby the policy makers and others to pay more attention to school health education issues as it affects the school children. This study is therefore evaluating the imperatives of lobbying for improved school health education programme in Nigeria.

Lobby, Decisions and Decision-Makers

Lobbying is the strategy and process that is used by interest groups to influence decision-making. It is a way of soliciting favour. It is the strategy an interest group used to influence policy makers or people in authority to introduce, change or make a policy decision that will favour that particular interest group (Kane, 2010). The goal for school health education lobbyist is to establish a strong school health education programme which must be comprehensive to meet students' needs. In order to do this, it is important to identify the decisions and individuals responsible for making decisions regarding the programme. Policymakers make several types of decisions which affect programmes. These decisions include the mechanics of the programme; funding and administration. Goodlad (2005) identifies the area of programme decisions such as those which determine programme goals and objectives; decide programme allocations and expenditures; develop regulations; guide implementation and establish the administrative structures and other necessities for programme management. In order to establish quality programmes, school health education lobbyists must be prepared to influence decisions in all these areas. Lobbyist must work long and hard to secure a mandate for change. In most cases lobbyist usually find out that when it is time to implement the programme adequate funds are not appropriated or no mechanisms have been put in place to facilitate the implementation. This shows that whatever decision that is made was in principles.

Policy decisions that affect school health education programmes are made at variety of different political levels – Local, State and Federal. Each decision-making level has its own authority, and, consequently, there are some decisions that can be at one level which cannot be made at another (Makenzie, Pinger and Kotechi, 2012). For instance, a federal decision to make funds available for school health education programme does not mean that all schools will have a health education programme. The decision to implement or not to implement a programme may rest with the local authority. Also, the decision on the part of a local authority to seek federal funds for a specific programme may have no meaning if no funds have been allocated for such a programme. It is important, therefore, that the lobbyist should be aware of the capabilities and authority of policymakers at different levels, and to direct attention to the appropriate levels decision-makers, including both the education and appropriations committees in the Senate and House, Ministries of Education and Health. Lobbyists' efforts should be aimed at appropriate decision-making level to the aforementioned individuals or their staff. The lobbyist should make these decision-makers to understand the issues, what is desired, what the potential is, how it might be implemented and what advantages the programmes have for them. For this to happen, school health education needs a strong lobbyist who will get involved in the politics of decisions and decision making as it affects school health education programmes. Without lobbyists, it will be difficult to get to decision makers.

Imperatives of being a lobbyist for School Health Education Programme: School health education lobbyists who are willing to involve in the politics of school health education may be health educators, parents, school administrators, organizations or other personnel who are interested in the children's well-being. Being a lobbyist for health education in schools requires more than the knowledge of health, educational strategies and teaching methodology. Goodlad (2005) states that advocates must understand who makes the decision which affect programmes, the categories of policymakers, and who can influence the decision being made. This assumption also applies to school health education lobbyist. They must understand the politics of the social systems in which the schools operate. Health educators and other health personnel may find lobbying a new role which challenges their value system. Dryfoos (2008) shows that teachers do not take advantage of many opportunities to become involved in the decision-making process in community affairs. According to Dryfoos (2008), many educators and many citizens, view politics as a "dirty business" thus avoiding it. Politics is not a "dirty business" but people who are in it make dirt out of it especially in Nigeria where their main purpose is personal benefits not the welfare of the people. School health education lobbyist should get involved in the politics of decision making and find a way of influencing decision-makers on school health education issues without compromising their integrity.

Influencing Decision-Makers: Keys to influencing decision-makers are flexibility and creativity according to Sparber (2002), no two individuals or policymakers can be influenced in the same way. Many organizations can influence decision-makers on school health education programmes, but organization must be well-known and its members must be broad-based acknowledged expertise in health education areas. Every decision-maker works with, or knows personally, members of the national organizations with state or local affiliates. Some of these organizations that can influence decision-makers on school health education programmes include Nigerian School Health Association, Nigerian Association for Physical, Health Education and Recreation; Nigerian Association of Health Education Teachers, Parents and Teachers Association; National Union of Teachers and All Nigerian Committee of Principals of Secondary Schools. These organizations should double their efforts in lobbying the policy-makers to make policies that will favour school health education programme or issues in Nigeria.

CONCLUSION AND RECOMMENDATIONS

This paper has highlighted the importance of lobbying for school health education programmes. If school health education is going to survive and continue to grow, health educators must become more skilled in lobbying. Lobbying requires specific knowledge and skill and motivation to become involved in the politics of the social system in which school health education programmes operate. Lobbying requires commitment from individuals and the profession and from those responsible for professional preparation programmes. Competition for school time and fund allocation is stiff. The success of school health education programme will be determined by how effective its lobbyist can participate in the lobbying competition.

Based on the aforestated observations, it is recommended that:

(i) Personal contacts with decision-makers must be continuous and made well in advance of the programme by lobbyists.

(ii) A more flexible and creative strategy should be adopted by lobbyist of School Health Education Programme.

(iii) Lobbyists should not assume that decision-makers understand school health education issues.

(iv) Lobbyist should provide information in writing, because supporters may not articulate the concerns and may interpret the information wrongly.

(v) Lobbyists should bear in mind that staff who work for those decision making positions are frequently the decision-makers themselves.

(vi) Lobbyists should organize face to face meetings with decision makers as this may produce the best results.

(vii) Lobbyist should talk to others that are not even supporters of the school health education issues.

(viii) Lobbyist should not provide too much information; they should give only required and relevant information.

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