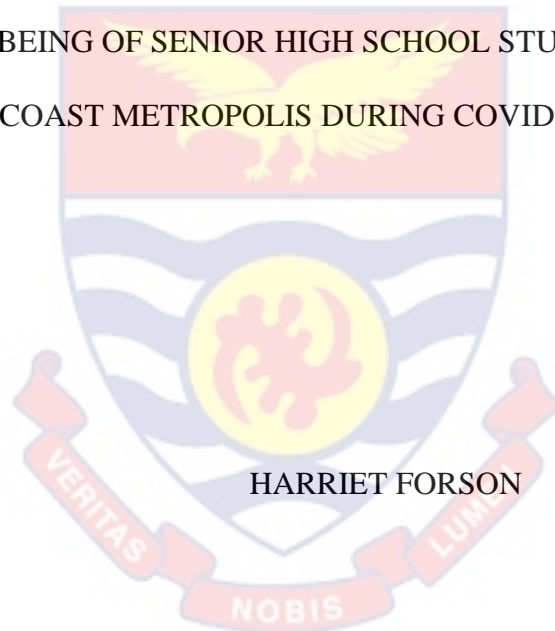UNIVERSITY OF CAPE COAST

INVESTIGATING THE STATE OF PSYCHOLOGICAL AND SOCIAL

WELLBEING OF SENIOR HIGH SCHOOL STUDENTS IN THE CAPE

COAST METROPOLIS DURING COVID-19 PANDEMIC

HARRIET FORSON

2024

UNIVERSITY OF CAPE COAST
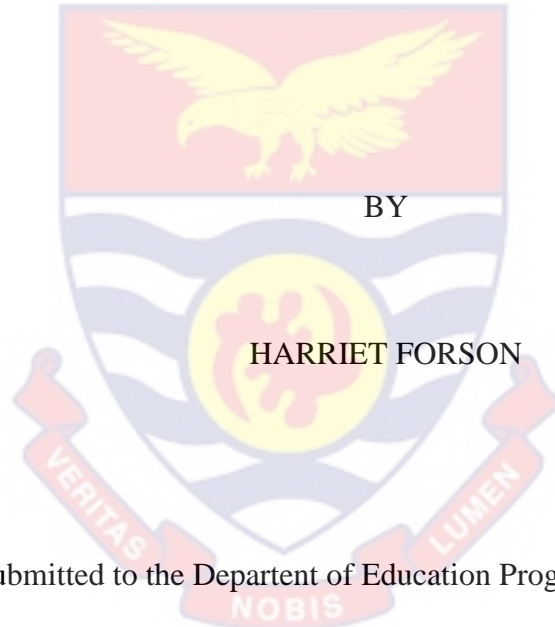
INVESTIGATING THE STATE OF PSYCHOLOGICAL AND SOCIAL

WELLBEING OF SENIOR HIGH SCHOOL STUDENTS IN THE CAPE

COAST METROPOLIS DURING COVID-19 PANDEMIC

BY

HARRIET FORSON

Thesis submitted to the Departent of Education Programmes of the College of

Distance Education, University of Cape Coast, in partial fulfullment of the

requirements for the award of Master of Philosophy degree in Guidance and

Counseling

NOVEMBER 2024

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DECLARATION

Candidate's Declaration

I hereby declare that this thesis is the result of my own original research and that

no part of it has been presented for another degree in this university or elsewhere

Candidate's Signature…………………………   Date…………………………

Name…………………………………………………………………………………..

Supervisor's Declaration

I hereby declare that the preparation and presentation of the thesis were supervised

in accordance with the guidelines on supervision of thesis laid down by the

University of Cape Coast.

Supervisor's Signature………………………..   Date…………………………

Name…………………………………………………………….....................

ABSTRACT

The aim of the research was to examine the social and psychological health of Cape Coast City Senior High School (SHS) students during the COVID-19 epidemic. The self-efficacy theory was used to determine and comprehend the elements that contributed to the students' changing behavior. Information about the state of the phenomenon was gathered using a descriptive survey approach. Form 2 and 3 pupils from Academy of Christ the King SHS, Mfantispem, Wesley Girls, Efutu, and University Practice SHS made up the target population. Out of the 8,876 students in the Cape Coast Metropolis, 378 SHS students were selected as a sample. According to the study, when the responders learned about the COVID-19 epidemic, they did not have nightmares. Nonetheless, over 50% of those surveyed said that they experienced sadness when acquaintances or family members contracted COVID-19. The results of the investigation showed that respondents' psychological health was unaffected since they had heard about the COVID-19 epidemic before it started in Ghana. It is consequently advised that school counselors set up programs to deal with these difficulties, as adolescents were depressed over their families' COVID-19 infections.

KEY WORDS

Coronavirus Disease (COVID- 19)

Education

 Psychological Wellbeing

Senior High School (SHS)

Social Wellbeing

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.

DEDICATION

To my husband, Nana Kwame Hammond and Children.

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CHAPTER ONE

INTRODUCTION

Historically, COVID-19 has been the only illness to have afflicted nearly every region of the world throughout its time, resulting in thousands of fatalities. Following certain harsh measures used by the government to limit its spread throughout the nation, many institutions around the world, including Ghanaian schools at all levels, experienced operational disruptions.

The researcher felt it was necessary to address this issue, which has not yet gotten much academic attention, by looking at the psychological and social health of Senior High School (SHS) students, especially in the Cape Coast Metropolis. The findings would be expected to go a long way to enlighten all stakeholders to be well informed, and also mindful of the disease, and its accompanied stigmatization it could directly or indirectly have on especially students in general in various schools.

Background to the Study

Infectious illnesses that are dangerous to people's health and lives have increased over time. Examples include the Middle East Respiratory Syndrome (MERS), Severe Acute Respiratory Syndrome (SARS), and the H1N1 flu virus (swine flu) (Scobie & Whitehead, 2020). They add that prior infectious diseases have had potentially comparable direct and indirect effects on human health, society, and the economy, but not on the same magnitude as the corona virus (at least since the Spanish flu). The globe is currently dealing with a new viral outbreak called SARS-coV-2, which causes Corona viral Disease (COVID-19).

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A recently recognized virus is the cause of the infectious sickness known as Corona Virus sickness (COVID-19) (Aksoy & Koçak, 2020). On December 12, 2019 (Aksoy & Koçak, 2020), the COVID-19 virus was first discovered in Wuhan, China (Wang, Tangand Wei, 2020), and it has since spread around the world. Mild to moderate respiratory infections are the most common symptoms of viral infection (Aksoy & Koçak, 2020). Among the clinical manifestations of COVID-19 include asymptomatic states, multiple organ failure, and acute respiratory distress syndrome (Zhu et al., 2020). Typical human-to-human transmission routes include contact transmission, direct transmission, and airborne transmission by contact with the mucous membranes of the mouth, nose, and eyes as well as coughing, sneezing, and droplet inhalation (Umakanthan et al., 2020). Li and Wang (2020) claim that COVID-19 created serious difficulties in halting the infection's transmission and preserving the security of the world's health. Several anti-epidemic strategies, including as face masks, physical separation, quarantine, and lockdown limitations, were put in place in several nations due to the pandemic's fast spread in order to limit transmission and prevent contact with other people. Al Thobaity and Alshammari (2020) estimate that COVID-19 has affected over a million people globally. The increase in COVID-19 instances worldwide has had an impact on people's life and health, claim Al Thobaity and Alshammari (2020). Ghana, like many other African nations, has suffered greatly from the COVID-19 pandemic in terms of both human and economic growth.

The COVID-19 epidemic has caused a catastrophic economic and humanitarian crisis (Karpati, Cebotari, & Neubourg, 2021). It was evident that the social, political, economic, and health domains were all significantly impacted by COVID-19. On March 18, 2020, the United Nations Educational, Scientific, and Cultural Organization (UNESCO) predicted that 107 states throughout the world had shuttered their schools because of the COVID-19 pandemic. They predict that 862 million children and adolescents, or more than half of all students globally, would be impacted. According to Viner, Russell, Croker, Packer, Ward, Stansfield, and Booy (2020), 29 states quickly closed all of their institutions, colleges, and schools countrywide till further notice due to this catastrophic scenario.

One of the justifications for closing schools was to reduce social interaction between children in order to assist prevent transmission. This was consistent with the pandemic's underlying assumptions and supporting data (Huang et al, 2020; Viner et al., 2020). Many people's everyday lives across the country have been profoundly affected by social distance, a phenomena caused by the COVID-19 pandemic (Lee, 2020; Zhang et al., 2020). Additionally, as of April 8, 2020, several nations have delayed instructional activities at educational institutions worldwide due to COVID-19, according to UNESCO (Viner et al, 2020; Lee, 2020; Boursicot, Fuller, Joynes, Cooper, & Roberts, 2020). 90% of the pupils worldwide, or around 15 million, were not in school (Viner et al, 2020).

In the case of Ghana, the government took several actions in line with what most nations had done to control the blowout of the disease. Among such procedures were the closure of the Ghanaian borders, lockdown which saw

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restriction on the movement of people and businesses except organizations providing essential services, and suspension of face-to-face activities in educational institutions. These measures though commendable, had severe consequences on citizens.

The closure of schools during the lockdown period interrupted conventional schooling and exposed many insufficiencies and inequities within Ghana's educational system (Karpati, Elezaj, Cebotari & de Neubourg, 2021). Students from affluent homes attending schools with quality training materials were able to learn through alternate means whiles students from less endowed homes remained at home without any form of formal education (Ripp, Peccoralo, & Charney, 2020). Once more, teachers were significantly impacted by school closures, particularly those employed in the private sector, who had their pay and benefits discontinued (Jung et al., 2015). COVID-19 has had a significant influence on the educational system, particularly in Ghana; instructors, parents, and students have all been impacted in one way or another (Karpati et al., 2021).

Upoalkpajor and Upoalkpajor (2020) claim that COVID-19 affected students' social and psychological health in addition to their academic performance. According to psychological theory, people's stressful situations are frequently linked to suicide acts (Kawohl and Nordt, 2020). This has been verified by Baloch, Sundarasen, Chinna, Nurunnabi, Kamaludin, Khoshaim, and AlSukayt (2021) in their investigation of how COVID-19 affects students' mental health. 41% of participants had low to moderate, marked to severe, and most extreme anxiety levels, according to the study's findings. The survey found that the top worries were

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unclear exam dates, worry about their academic performance and finishing the current semester, and the following semester's pandemic-related status. 61% of the sample of students in the study by Bourion-Bédès, Tarquinio, Batt, Tarquinio, Lebreuilly, Sorsana, & Baumann (2021) on the effect of COVID-19 on students' mental health reported experiencing anxiety during the lockdown.

The study found that having COVID-19-infected family members, domestic disputes, trouble separating from others, noisy environments, no direct access to the outside world, postponed final exams, less study time, and amplified tobacco use were the primary risk elements for anxiety in females (Bédès et al., 2021). Jiang (2020) found that university students' mental health was worse than usual during the pandemic, as seen by their obsessive-compulsive disorder, interpersonal sensitivity, anxiety, phobic anxiety, paranoid ideation, and overall severity index.

Khan, Sultana, Hossain, Hasan, Ahmed, and Sikder (2020) investigated the effects of COVID-19 on house-quarantine activities, self-reported health symptoms, and social welfare. 28.5% of respondents reported feeling stressed, 33.3% reported feeling anxious, and 46.92% reported having mild to severe depression, according to the survey. Significant correlations were found between stress, anxiety, depression, and post-traumatic symptoms and the perception of physical symptoms, such as those of COVID-19, fear of infection, financial instability, limited food supply, lack of physical exercise, and little to no social connection. According to Khan, Sultana, Hossain, Hasan, Ahmed, and Sikder (2020), there was a high correlation between psychological consequences such as

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event-specific anxiety, depression, and stress and excessive exposure to COVID-19 news on social media and in the media.

Statement of the Problem

Both the global economy and public health have suffered greatly as a result of the pandemic (Shrestha et al., 2020). Furthermore, people's physical, social, and mental health have all been impacted by the COVID-19 pandemic (Barbisch et al., 2015). The entire community has been negatively impacted by the COVID-19 epidemic, and young people are not exempt from the changes this unique circumstance has brought about. In addition to being lethal, the COVID-19 pandemic has serious psychological hazards, such as excruciating psychological strain, worry, sadness, and terror, as well as the possibility of suicide attempts and general suffering (Bender, 2020). In addition to Wuhan, China, where the virus is thought to have originated, COVID-19 had impacted universities in 188 other countries as of April 6, 2020 (Toquero, 2020).

Human mental health has previously been shown to be negatively impacted by past epidemics including SARS, the 2009 Avian Influenza (H1N1), and the 2018 Ebola pandemic (Cao et al., 2020; Jalloh et al., 2018). Based on these earlier findings, researchers carried out a number of studies to look at how the COVID-19 pandemic affected the mental health of particular populations or the general public, such as young adults, women, children, and health workers (Rossi, 2020). The impact of COVID-19 on undergraduate students' stress and anxiety levels has been the subject of several other studies. 66.1% of US first-fourth year medical students reported having low, moderate, or severe anxiety, according to a study by Guo et

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al. (2021). Furthermore, the proportion of stress from COVID-19 was greater, and stress and anxiety scores were considerably higher among individuals who previously had mental health problems. A different survey found that students were more worried about their academic performance (159/195, 82%), had trouble focusing (173/195, 89%), had disturbed sleep patterns (168/195, 86%), and were anxious about their health and loved ones (177/195, 91% negative impact from the pandemic) (Son et al., 2020). Among other psychological issues, students also reported feeling alone, disappointed, and in danger of suicide (Zhai & Du, 2020).

As per the report of the Ghana Health Service, the country reported its first COVID-19 case on March 12, 2020, and as of the end of June, there were 96,317 COVID-19 cases overall (Ghana Health Service, 2021). The spread of the COVID-19 in Ghana prompted several measures from the government. In a bid to curtail this outbreak, the government announced several restrictions which affected several businesses and lives. For example, on March 15, 2020, Ghanaian President Nana Akufo-Addo issued an order to close all of the country's educational institutions. Over 9.2 million Ghanaian primary school students (kindergarten, primary, and junior high schools) were impacted by this activity (Owusu-Fordjour, Koomson & Hanson, 2020). During this period, schools were closed down, and children were advised to study online (Nantwi & Boateng, 2020).

The devastating impacts of the COVID-19 on education particularly the second cycle education in Ghana was overwhelming (Karpati et al., 2021). The frail nature of the Ghanaian second cycle education system was evident during the peak periods of the COVID-19 and currently, institutions at this stage are yet to find their

feet (Nantwi & Boateng, 2020). In examining the impact of the COVID-19 on learning, Owusu-Fordjour et. al (2020), through an 11 item Likert-type scale questionnaire, solicited for data from 214 respondents who were students and other stakeholders from the second cycle and tertiary institutions of Ghana. The findings from their study indicated that though digital learning was introduced during the lockdown periods, many students were unable to access these platforms, and this made the online system of learning very ineffective.

Again, Owusu-Fordjour et al. (2020) revealed that, most parents were incapable of supervising and assisting their wards at home due to their inadequate knowledge about these digital platforms. Technical challenges, limited access to the internet among other challenges were noted by the researchers. Many research have emphasized the effect of COVID-19 on education in Ghana, according to the literature (Karpati et al., 2021; Owusu-Fordjour et al., 2020). According to Cielo, Ulberg, and Di Giacomo's (2021) study on the psychological impact of the outbreak on youth mental health outcomes, the COVID-19 pandemic and lockdown measures have affected young people by causing a range of mental symptoms, including anxiety, stress, depression, event-specific distress, a decline in psychological wellbeing, and changes in sleeping patterns.

Alghamdi (2021) provided insight into social wellness through a research on how the COVID-19 epidemic impacted the social and academic facets of Saudi university students' life. A 24-hour curfew changed students' life, particularly at home where they spent the whole day, according to the study mentioned above. The study's conclusions show that remaining at home allowed students to refocus their

goals in a constructive way, that it was a good time for them to concentrate on their spirituality and achieve peace of mind, and that spending time with their families was beneficial. Nonetheless, it was determined that loneliness and being separated from neighbors were detrimental effects, indicating that students' emotional life were disrupted during curfew. As a precautionary and preventive measure to contain COVID-19, closing all locations for everyday social activities had an effect on students' lives in terms of their physical inactivity and the sense of space being limited, but not as much as the opportunity to learn how to take care of their bodies. Students' psychological wellness was clearly impacted by the prohibition of all social events, including morning assemblies, athletic events, entertainment, and ward visits in schools (Weir, 2020).

I plan to investigate these indicators midst SHS students in the Cape Coast Metropolis following the pandemic-induced lockdown and the restrictions following the reopening of schools, taking into account the evidence that suggests the experiences of students during the pandemic may change their mental health and social wellbeing. I set out to investigate the psychological and social health of SHS students in the Cape Coast Metropolis during the COVID-19 epidemic in light of this.

Purpose of the Study

Assessing the psychological and social health of senior high school students in the Cape Coast Metropolis during the COVID-19 epidemic was the aim of the study.

Objectives of the Study

In particular, the goals of the research were:

1. To look into the psychological health of Cape Coast Metropolis SHS students during the COVID-19 epidemic.

2. To look at the social wellness of Cape Coast Metropolis SHS students during the COVID-19 epidemic.

3. To determine how to help SHS students in the Cape Coast Metropolis with their psychological health during the COVID-19 epidemic.

4. To determine how to help SHS students in the Cape Coast Metropolis with their social wellness during the COVID-19 epidemic.

Research Questions

The following research questions were created to guide the investigation.:

1. How are the mental health conditions of Cape Coast Metropolis SHS students during the COVID-19 pandemic?

2. What is the social welfare status of Cape Coast Metropolis SHS pupils during the COVID-19 pandemic?

3. How might the psychological health of SHS students in the Cape Coast Metropolis be improved during the COVID-19 pandemic?

4. During the COVID-19 epidemic, how might the social wellness of SHS students in the Cape Coast Metropolis be improved?

Significance of the Study

During the COVID-19 pandemic, the research sought to ascertain the psychological and social well-being of senior high school students in the Cape Coast Metropolis.It is envisage that the study would be of benefit to all stakeholders with respect to eduction; Ghana Eduction Service(GES), parents, students and Guidance and Counselling Co-ordinators. GES as policy maker and implementer in the educational system,would get fair knowledge of the pandemic and other related outbreaks and would rollout measures that could best minimize or prevent psychological and social outcomes of future pandemics on students. Parentes, students and the society at large would be enlightened on pandemics and disease outbreaks, their impact and measures to be adopted to control it. Counsellors on the other hand as agents of remediation in the school setting, with this study would gain insight into the nature of pandemics, the psychological and social tow it could have on students and the counseling measeres to adopt to help reduce the impact on students.

Furthermore, because the study would be available in the library, it may serve as a reference to further understanding. Therefore, researchers might use the results as a reference to do more study on the subject. Lastly, to make sure that the information reaches all parties involved in education in the city and the nation as a whole, the study's findings will be presented at conferences and seminars and published in publications.

Delimitations

Though other facets of human life may also be examined to gauge the extent of the COVID-19 pandemic's negative effects, the study solely examined the psychological and social well-being of SHS students in Cape Coast Metropolis. The researcher is interested in SHS pupils in Cape Coast Metropolis, and there is a lot of work that hasn't been done in Ghana in this area. Students in forms two and three were included in the research, which had a geographic focus limited to all SHS in the Cape Coast Metropolis. The selection of the study's participants was based on the fact that the first-year students had not yet reported. As such, there were two categories of students in the study's available population.

Limitations

Though much effort was put in place to reduce extraneous variables, some limitations were observed. The use of quantitative research instrument did not permit the respondents to express themselves much as may be expected by them and therefore some important facts might have not been brought up. Due to its descriptive nature, the study was only able to provide a brief overview of the COVID-19 pandemic and was unable to determine the origins and consequences of its results. Once more, the study's conclusions were drawn from second and third-year students at every SHS in the municipality; as a result, there is little room for generalization. Furthermore, the analysis only included public SHS in the municipality, raising concerns about generalizability.

Definition of Terms

Corona Virus Disease (COVID-19): is an infectious sickness brought on by SARS-coV-2, a recently identified virus (Aksoy & Koçak, 2020).

Education: teaching and acquiring fundamental knowledge, enhancing critical thinking and judgment abilities, and overall preparing oneself or others for maturity intellectually. The study therefore dwells much on formal education where there exist formal structures that provide knowledge and skills to individuals or students.

Psychological wellbeing: self-reliance, mastery of the environment, wholesome interpersonal interactions, positive self-acceptance, personal development, and a sense of meaning and purpose in life. The variables considered are stress, anxiety, depression and distress.

Senior High School (SHS): a post-junior high school institution that typically offers grades 10 through 12. in Ghana all second cycle institutions including vocational and technical schools.

Social wellbeing: The act of interacting postively with others in ones environment. This was looked at in relation to the ban on Sporting Activities, Morning Assemble, Entertainment and Visiting of students in boarding houses.

Organization of the Study

There are five chapters in the research. The study's background, issue statement, purpose, and research questions are all covered in the first chapter as an introduction. There is additional discussion of the study's importance, constraints, and operational definitions of terminology. The literature review is the main topic of Chapter 2. The three main parts of the review are the theoretical foundation,

conceptual review, and empirical review. Chapter 3 provides a summary of the research techniques employed in the study. Demographics, study area, sample and sampling process, research design, data collection methods, data processing, data analysis, and data collection tools are all included in this.

Chapter 4 contains the data analysis, findings, and justifications for the conclusions. The summary, conclusions, suggestions, and consequences of the findings are presented to academic advisers and counselors at the various schools in the fifth and final chapter. The chapter further presents suggestions further studies.

CHAPTER TWO

LITERATURE REVIEW

Introduction

The purpose of the study was to get additional information regarding the social and psychological health of Cape Coast Metropolis SHS students during the COVID-19 epidemic. The theoretical, conceptual, and empirical reviews served as the framework for this chapter's summary, which served as a guide for the investigation the mental and social health of students during the COVID-19 epidemic are reviewed in this chapter, along with strategies for enhancing both levels of wellbeing.

Theoretical Framework

This section provides the theoretical bases for this study. Bandura's (1997) self-efficacy theory, which holds that people's beliefs in their capacity to carry out activities and accomplish goals, served as the foundation for this investigation. Every aspect of human activity is impacted by self-efficacy. Through assessing one's views about one's ability to alter circumstances, self-efficacy has a significant impact on one's actual ability to handle obstacles effectively as well as the decisions one is most likely to make. According to Seifert and Kelvin (2011), these impacts are more noticeable and persuasive when it comes to investing behaviors in fields like agriculture, health, and education.

Strong self-efficacy, according to Stajkovic and Sergent (2019), encourages human achievement and individual well-being. They contend that a person with high self-efficacy sees obstacles as opportunities to learn and grow rather than as

dangers to be avoided. These individuals are more prone to blame failure on insufficient effort and are able to bounce back from setbacks more quickly. Because they think they can manage them, they approach dangerous situations. These factors have been associated with reduced stress and a decreased susceptibility to depression. Bandura asserts that self-efficacy is a key factor in influencing how people approach problems, persevere in the face of setbacks, and adjust to shifting conditions.

Self-efficacy theory offers a valuable context for understanding the factors that impact students' ability to manage stress, build resilience, and maintain wellbeing during challenging situations. Self-efficacy theory states that people's motivation, conduct, and eventual achievement are greatly influenced by their views about their capacity to carry out activities and accomplish goals.

The concept of self-efficacy is concerned with how well a person believes they can do a job under particular circumstances. "People's judgments of their capabilities to organize and execute courses of action required to attain designated types of performances" is how Antonio Bandura characterized the construct (Bandura 1986: 391). It is important to realize that the idea is not based on one's actual performance or abilities, but rather on assumptions about one's perceived ability or incapacity to do a certain activity (Mills, Pajares & Herron 2007). The emergence of social cognitive theories, which hold that people are active agents in charge of their own decisions and actions, sparked an early interest in self-efficacy (Wyatt 2018a). These advancements were significantly advanced by Bandura (1977), who demonstrated how self-efficacy beliefs may affect the activities we

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choose to perform, the amount of effort we put into them, and our persistence in completing them particularly in the face of obstacles.

Four distinct sources were discovered by Bandura (1977, 1997) to explain the emergence of an individual's self-efficacy beliefs: verbal persuasion, physiological and emotional states, mastery experiences, and vicarious experiences. A person's "vicarious experiences" come from witnessing or learning about the achievements of others, whereas "mastery experiences" are a result of remembering and reflecting on their own prior successes in comparable activities. Whereas "physiological and affective states" deal with how an individual interprets information obtained via their own senses, "verbal persuasion" refers to the opinions or response offered by others. Understanding these many sources will help us better understand how self-efficacy beliefs are created and, more prominently, how they can be altered.

It has been demonstrated that self-efficacy beliefs affect learning, academic motivation, and accomplishment (Schunk 1995; Pajares 1996; Schunk & Pajares 2002). Given this, effectiveness evaluations that just slightly exceed one's actual skills may be the most beneficial., "because this slight overestimation can actually increase effort and persistence during difficult times" (Artino 2012: 77). However, the focus is on being "modest," as excessive expectations or improper behavior might result from overestimating one's talents.

Since several studies have shown that the COVID-19 pandemic has affected young people's mental health and wellbeing, many parties have voiced concerns about people's welfare throughout the outbreak (Nurunnabi, Almusharraf, &

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Aldeghaither, 2021; O'Connor et al., 2021). The effect of the COVID-19 pandemic on people's mental health is a major worry for the World Health Organization (WHO) (World Health Organization, 2020). According to other studies conducted in Jordan and the US, students' levels of stress, anxiety, and depression rose as a result of the COVID-19 pandemic (Basheti, Mhaidat, & Mhaidat, 2021; Hamaideh, Al-Modallal, Tanash, & Hamdan-Mansour, 2021; Son, Hegde, Smith, Wang, & Sasangohar, 2020).

A decline in wellbeing is linked to an increase in stress, anxiety, and depressive symptoms (Schönfeld, Brailovskaia, Zhang, & Margraf, 2019). As stated by Deci and Ryan (2001), wellbeing is the best possible psychological functioning and experience. From a hedonistic perspective, wellness is defined as the highest level of enjoyment; however, from a eudaimonic perspective, wellbeing encompasses psychological health and life satisfaction (Ryan & Deci, 2001). By partaking in enjoyable activities and fostering wholesome social connections, one can feel in control of one's life and make progress toward objectives (Diener, Sapyta, & Suh, 1998).

The ability of kids to perform successfully at home, school, and in the community is a measure of their wellbeing (Frydenberg, 2018). Both good and negative emotions are significant experiences for wellness (Diener et al., 2009). While negative emotions are helpful for quick adaption to potentially fatal situations, positive emotions can improve one's ability to think and act in temporary situations (Fredrickson, 2001). The absence of unpleasant emotions was found to be less related to life satisfaction across nations than the experience of positive

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emotions (Kuppens, Realo, & Diener, 2008). Techniques for controlling both happy and negative emotions can have an impact on an individual's wellness (Gross & John, 2003).

Self-efficacy is the characteristic with which wellbeing may be associated. Self-efficacy is the conviction that one can handle different circumstances or finish a job (Bandura, 1978; Pajares, 1996; Tsang, Hui, & Law, 2012). According to Bandura (1978), perceived self-efficacy influences the surroundings and activities chosen, which results in success as the desired outcome. According to Bavojdan, Towhidi, and Rahmati (2011), self-efficacy beliefs allow people to perceive potentially dangerous circumstances as manageable tasks that might make them feel less stressed.

Bandura (1978) asserts that self-efficacy has three key components: strength, generality, and magnitude. Individual effectiveness in finishing activities at different levels is referred to as the magnitude dimension. Some people are confident in their ability to do easy activities, while others are confident in their ability to finish challenging jobs. Generality describes how a person's problem-solving skills in one context translate to other situations. While certain experiences may instill a belief in mastery in a specific setting, others may instill a conviction in a broader context. Strength is a person's conviction in his own abilities. Strong beliefs enable people to persevere in the face of contradicting events, but weak beliefs are readily undermined by bad experiences.

The correlation's direction suggests that self-efficacy and wellbeing may be positively correlated. In other words, mental health improves together with an

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improvement in self-efficacy (Bavojdan et al., 2011). Conversely, those who lack self-efficacy or who struggle to handle dangerous situations are more likely to suffer from anxiety (Bandura, 1988) and other mental health issues (Tahmassian & Moghadam, 2011). Low self-efficacy hinders academic performance in the classroom and, over time, can lead to learned helplessness, which compromises psychological wellness (Molis & Mccabe, 2006). Studies have consistently demonstrated a relationship between self-efficacy and psychological wellness, which is characterized as having good mental health or a lower risk of stress, anxiety, and depression (Cattelino et al., 2021; Melato, van Eeden, Rothmann, & Bothma, 2017; Parto & Besharat, 2011).

Conceptual Review

One of the most contagious viruses, COVID-19, frequently causes severe acute respiratory syndrome. In Wuhan, Hubei Province, China, coronavirus 2 (SARS-CoV-2) was first discovered in December 2019. A new worldwide health danger was created when the illness spread to additional nations in the next months (Pardon et al, 2021). It was deemed a pandemic by the World Health Organization (WHO) in March 2020. Multiple organ failure, acute respiratory distress syndrome, and asymptomatic states are some of the clinical signs of COVID-19. Direct transmission, contact transmission, airborne transmission, coughing, sneezing, inhaling droplets, and contact with the mucous membranes of the mouth, nose, and eyes are all ways that the disease can spread from person to person. Put it in full when starting a new phrase. The corona virus sickness raised important challenges regarding how to prevent the spread of the infection and ensure global health

security (WHO, 2020). Some nations responded to the coronavirus's quick spread by enacting a variety of anti-epidemic measures, including as physical separation, face masks, quarantine, and lockdown restrictions, to prevent transmission and prevent contact with other people. Both community health and the global economy have suffered greatly as a result of the pandemic (Cao et al. 2020).

Overall wellness is significantly influenced by mental health. Mental health, is a successful state in which an individual can identify their own potential, cope with daily pressures, work efficiently and profitably, and contribute to society, according to WHO (2020). Among other things, mental health include self-actualization of one's own mental and intellectual capacity, autonomy, self-efficiency of emotion, self-reliance, and personal well-being. Anger, anxiety, panic attacks, despair, loneliness, isolation, personality loss, low self-esteem, suicidal thoughts or actions, and depression are the major symptoms of mental health issues. In adults and elderly individuals, it is typically more apparent.

Keyes (2014, p104) defines social wellbeing as the degree to which "individuals feel they make valued social contributions, view society as meaningful and experience a sense of social belonging, maintain positive attitudes toward others, and believe in the potential for society to evolve positively," utilizing the sociological and social psychology frameworks of De-Juanas (2020) and Durkheim (2021). The COVID-19 pandemic has a significant effect on people's social welfare since it limits the number of social requests that can be met (Fried, 2020).

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Social wellbeing is crucial for preserving society's optimal functioning during times of crisis and is a crucial aspect of mental and physical health (Pancani, Marinucci, Aureli, & Riva, 2020; Zhang and Ma, 2020). According to Keyes (2014), social wellbeing is a public phenomena that highlights how well an individual's social demands and social realities align. According to Keyes (2014), social welfare is determined by five interconnected components:

1. Losing access to consistent and wholesome school meals (school feeding) and social integration (the degree of one's incorporation into the community).

2. Social contribution (that one plays an important role in and contributes significantly to society).

3. Social coherence (the conviction that one is an active part of a cohesive and connected community).

4. Social acceptance (having faith in others and considering individuals to be inherently good) and social actualization (thinking that society has the capacity to advance via its members).

These elements characterize how well people are able to navigate social obstacles and contribute to their communities (Keyes, 2020).

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Conceptual Framework

Based on the theory that drives the study, this is how the researcher conceptualised the study.
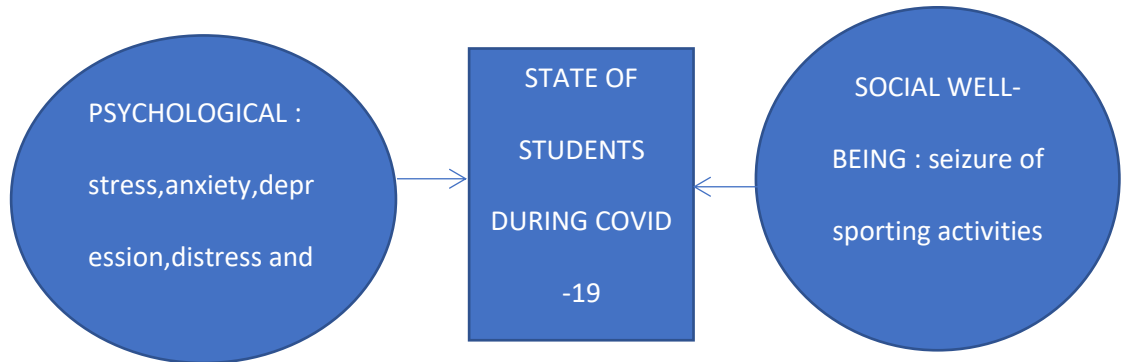
Figure 1: Model on the state of psychological and social wellbeing of SHS students in the Cape Coast Metropolis during COVID-19 pandemic.

Students'state of psychological and social wellbeing were altered during COVID-19 pandemic. Psychologically, the state could be reviewed in terms of stress, anxiety, depression, distress and academic disruption. Regarding the state of social wellbeing of students, it is viewed in terms of the seizure of sporting activities and social gatherings such as morning assembly, entertainment and ban on visiting of students by parents. As a result of the COVID-19, Senior High School students did not attend any sporting activity such as inter school football competition. Also, students did not go for assembly, morning devotion and entertainment which could have socialized the students. The psychological and social health of pupils during the COVID-19 epidemic is depicted in figure 1.

Empirical Review

I discussed the students' psychological and social welfare in the empirical review stage first, and then the latter. In order to explain the psychological and social wellness of students during the COVID-19 epidemic and the coping mechanisms they utilized, I once more referred to the works of other scholars, their study methodologies, and their theories.

The State of Psychological Wellbeing of S.H.S Students during COVID-19 Pandemic

Many significant developments have occurred in recent years that have changed how people live or die (Nyantanga, 2020; Wang et al., 2020). Because of the current COVID-19 epidemic, precautions are becoming a part of daily life (Nelson et al., 2020). Participating in disputes and avoiding reality have become challenging due to social media (Shaw, 2020). Everyone finds it hard to think about anything else because of these constant headlines and media arguments (Hossain et al., 2020). Without a doubt, the current pandemic's effects extend beyond physical health to include psychological and emotional well-being (Duan & Zhu, 2020). Acute stress and depression are common among the general people during this time (While and Nightingale, 2020). High levels of stress and anxiety lead to normal responses to some abnormal circumstances (Roy et al., 2020).

People in quarantine may suffer from psychological anguish, according to recent study (Brooks et al., 2020). In the setting of symptoms of post-traumatic stress disorder, pupils have experienced psychological discomfort due to this state of confusion and instability (Cao et al., 2020). It is quite probable that a college or

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university student will be able to recover both physically and psychologically from the negative effects of the COVID-19 epidemic.

Performance pressure, possible ambiguity, and academic disturbance were the main causes of the increase in psychological stress among university students (Zhai and Du, 2020). Their psychological and mental health is impacted by its pernicious influence every second, manifesting as increased stress, anxiety, depressive symptoms, and event-specific suffering (Bao et al., 2020). Educational arrangements are being developed in order to satisfy the present requirements (Khan et al., 2020).

However, it is getting harder and harder to meet established norms and associated performance expectations under the current pandemic environment. It is now urgently necessary to address how colleges handle students, manage their emotions during emergencies involving their overall wellness, and prevent disasters brought on by emergencies (Cao et al., 2020). The effects of this ongoing worldwide epidemic on the mental health of the student body must be taken into consideration immediately.

Students' opinions on low psychological wellness and mental illness were expressed both during and after quarantine, according to a study by Bao et al. (2020). Numerous students have talked about the tension and worry they experienced, which they attributed mostly to their lack of sociability and academic work delays (Cao et al., 2020). Symptoms of stress or sadness have gotten worse as a result (Anjum et al., 2019). Schools are yet unable to forecast how pandemic pressures would affect students' coping mechanisms and cognitive capacities. To

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put it another way, the epidemic has put students under an unprecedented amount of mental health stress, necessitating immediate action and more study. 75% of people had mental health issues before the age of 25 (Kessler et al., 2007). The incidence of suicide thoughts among college students in Jilin province, China, was 9.2% in 2019, according to reports, and the two biggest risk variables were family relationships and senior status (Wang et al., 2019).

In the first part of 2020, schools throughout Ghana were closed because to the severity of COVID-19, and all students completed online classes while remaining at home. While the majority of basic schools did not resume until September 2020, final-year students in SHS and universities in "low-risk" districts were permitted to attend classes in August 2020 (Ministry of Education, Ghana 2020).

Strict guidelines were also imposed to prevent infection among college students (Ministry of Education, Ghana 2020). For instance, before entering the classroom, pupils had to endure temperature testing and wear masks. Additionally, free admission to the school and delivery services were prohibited. SHS students were vulnerable to mental health issues even before COVID-19; they experienced a great deal of anguish, and many mental diseases peak in early adulthood (de Girolamo et al., 2012). Students at SHS are essential to a nation's progress. As a result, the high frequency of mental disorders has gained international attention due to media coverage of the SHS campus. Young people and SHS students experienced greater mental health issues during the COVID-19 pandemic, such as strain from their families, jobs, and studies. COVID-19 has caused significant

mental and behavioral changes in secondary school pupils, according to several prior research (Alemany-Arrebola et al., 2020; Huckins et al., 2020; Ma et al., 2020; Zhai and Du, 2020).

In China, a cross-sectional survey revealed that 0.9% of people had severe anxiety, 2.7% had moderate anxiety, and 21.3% had mild anxiety (Cao et al., 2020). Khan et al. (2020) and Kecojevic et al. (2020) found that college students in Bangladesh and the US had inadequate rates of anxiety and depression throughout the early phases of COVID-19. Enhancing the mental health of college students is vital, and once classes begin, stringent school regulations shouldn't make matters worse (Giannopoulou et al., 2020; Kalok et al., 2020). There is ongoing discussion on whether or not colleges should impose stringent rules (Beijing News, 2020). Some believe it is illogical to put children's mental health at risk in an attempt to stop the spread of COVID-19. According to others, college students won't experience any detrimental psychological effects from the stringent regulations. Considering that COVID-19 won't be the last pandemic, it is crucial to learn how to prevent serious harm to the mental health of secondary school and college students in it. People's mental health has been impacted by the COVID-19 pandemic in recent years (Nyatanga, 2020; Wang et al., 2020).

Four out of ten subjects in a research by Baloch et al. (2021) on the effect of COVID-19 on mental health at Zung reported having low to moderate, marked to severe, and most extreme degrees of anxiety. Consequently, compared to their male peers, female students had higher levels of anxiety. Concerns about their academic achievement and the end of the current semester, online learning, the

status of the next semester, and uncertainty about exam dates were the main causes of stress.

Similarly, a study on the impact of COVID-19 on mental health by Bourion-Bédès et al. (2021) found that 61% of the sample of students reported feeling nervous during the lockdown due to the COVID-19 epidemic. It was also discovered that the primary risk factors for anxiety were being a woman, having COVID-19-infected family members, domestic disputes, having trouble separating from others, noisy surroundings, not having direct access to the outside world, delaying final exams, having less time for studying, and smoking more tobacco. One protective element was the support of friends and family. Only the pupils' nervousness was the subject of the aforementioned studies.

Whereas, Nyatanga (2020) and Wang et al. (2020) study revealed a high level of anxiety. Bourion-Bédès et al. (2021) showed other variables that led to anxiety which include conflict at home, difficulties isolating, and noisy environment among others. I am interested in the studies above because of the variable (anxiety). However, the current study goes further to look at other variables like depression and stress.

Furthermore, a research on the impact of COVID-19 on mental health by Islam et al. (2020) found that over two-thirds of the students expressed mild to severe anxiety (87.7%) and depression (82.4%). This implies that the worldwide epidemic is causing an unparalleled increase in anxiety and sadness among college students. The biggest stressors causing the elevated rates of anxiety and sadness

were long-term unemployment, financial instability, and worries about their academic achievement.

Twenty.4% of respondents felt minimum to moderate anxiety, 6.6% reported marked to severe anxiety, and 2.8% reported most extreme anxiety, according to Sundarasen et al. (2020). Significant correlations were found between greater anxiety levels and female gender, younger age, pre-university education, management courses, and living alone.Additionally, financial limitations, distance learning, academic achievement uncertainties, and future employment opportunities are the main sources of stress.

The aforementioned research show how COVID-19 has impacted people, particularly kids, by increasing anxiety and despair. However, Jiang (2020) reports that during the pandemic, university students' mental health status was noticeably worse than usual, as seen by elevated levels of Obsessive-compulsive disorder, paranoid ideation, interpersonal sensitivity, somatization, phobic anxiety, and overall severity index.

In their 2020 study, Khan et al. examined how COVID-19 affected mental health and wellness and discovered that psychological discomfort was interpreted as self-reported physical symptoms including home quarantine activities and social stresses associated with the virus. Overall, tension was reported by 28.5% of respondents, anxiety by 33.3%, and mild to severe depression by 46.92%. According to IES, 69.31% of people experienced event-specific discomfort ranging from mild to severe. In particular, older students outperformed younger pupils in terms of psychological effect as measured by IES scores.

Stress, anxiety, depression, and post-traumatic symptoms were significantly correlated with the impression of physical symptoms such COVID-19, fear of infection, financial instability, poor food supply, lack of physical exercise, and little to no social connection. Overexposure to COVID-19 news on social media and in the mainstream media was significantly linked to the psychological effects of event-specific distress, despair, and stress. On the other hand, students who engage in a variety of activities have done better during this time. These activities include working around the house, exercising, and engaging in leisure activities like reading, watching TV, and playing video games both online and off.

In their study on the effects of COVID-19 on mental health, Mekonen et al. (2021) found that among graduating students, stress (22.2%), anxiety (39.6%), and depression (40.2%) were prevalent. The study found that having a contact history, living in an urban location, leading a sedentary lifestyle, and being unable to take COVID-19 preventative measures all raised the risk of stress. Anxiety was more likely to develop in those who lived in cities, used drugs, led sedentary lives, or were afraid of infecting family members. Students were more likely to have depression if they were from an urban location, studied non-health departments, had family members with verified instances, and did not exercise.

Wan Mohd Yunus et al. (2020) came to similar results when they examined the impact of COVID-19 on students' mental health and found that 22%, 34.3%, and 37.3% of college students, respectively, had moderate to extremely severe levels of stress, anxiety, and depression symptoms.

The study effectively demonstrated that the degree of stress, anxiety, and depression varied considerably by age, with younger pupils exhibiting higher levels of these symptoms than older students.

Baiano et al. (2020) found that the impact of COVID-19 on an individual's mental health, namely their pre-COVID-19 propensity to worry, affected their anxious reactions to the quarantine. Anxiety was higher among high worriers, and they were more concerned about the mental correlates of anxiety symptoms, which are believed to be signs of cognitive decontrol. During lockdown, high worriers showed a markedly higher level of anxiety sensitivity and worry of mental health than low worriers. Mental Health Impact of COVID-19 (Cao et al., 2020) About 24.9% of respondents reported feeling anxious as a result of the COVID-19 epidemic. Living with parents, having social support, and having a stable family income were all protective factors against anxiety. Anxiety symptoms were strongly correlated with having COVID-19-infected relatives, financial strains, scholastic delays, and impacts on day-to-day living.

State of Social Wellbeing of Students

Social welfare depends on the situation in which people are located and can only occur when the fundamental psychological needs of autonomy, competence, and relatedness are satisfied, according to self-determination theory (Ryan 2009; Ryan & Deci, 2000). Accordingly, social wellbeing is an inherent ability that evolves or shifts in response to environmental pressures and societal/cultural ideals rather than a fixed characteristic (Goodenough & Waite, 2020). Thus, the current study is focused on the social welfare of students who were impacted by COVID-

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19. This is seen in athletic events and social gatherings like entertainment, daily prayer, and morning assembly.

Numerous events, including athletic and commercial ones, have been canceled or postponed since the COVID-19 outbreak began. Both the UEFA Euro 2020 and the Olympic Games 2020 were postponed due to the epidemic (BBC, 2020). Since the epidemic has caused fitness and recreation facilities like gyms and playgrounds to close, many people are unable to use them to work out and develop their muscles in order to reach their fitness objectives (Kaur et al., 2020).

Sports playground closures were implemented in an effort to curb the pandemic's spread (Oritz-Ospina & Roser 2020). Accordingly, studies show that participation in sports improves psychological and physical abilities, such as stress reduction and physical activity (Reardon et al., 2019). However, training and competition disruptions may cause people to fear losing friends, career opportunities, sponsorships, and other financial support (Sanderson & Brown, 2020). Despite this, students' involvement in sports appears to be less impacted by upsetting psychological systems since they can communicate, engage with their classmates, and share responsibility (Reardon et al., 2019).

Healthy people often attain developmental milestones at the right ages as they mature, particularly throughout the school-going years (Sawyer et al., 2018). As a result, a person must lead a healthy lifestyle on a daily basis, which includes participating in sports. This is because playing sports improves the brain's oxygen delivery and circulation, boosts cognitive thinking ability, creativity, memory,

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reasoning, and language abilities, improves motor skills, enhances bone muscular density, and fosters self-esteem and confidence (Brubanec, 2011).

Despite the advantages of sports, students have been more affected psychologically by the cancellation, which was intended to prevent the disease from spreading. This includes sharing their experiences from past competitions, as students are no longer involved in sports (Sanderson & Brown, 2020). In the same way, it has made it more difficult for a lot of individuals to participate in sports and hard work. This has led to them adopting sedentary behaviors including watching TV, playing video games, gambling online, and reading while sitting at home and at class.. This has weakened the immune system, which has led to health issues like hypertension (Akindutire & Olanipekun, 2017).

Since students' development depends heavily on physical exercise, Bailey (2006) states that students' health and welfare are impacted by their participation in the activity. According to the study, adolescents who participate in athletics not only do better on tests but also have lower levels of anxiety and despair. However, according to Kniffin et al. (2015), playing sports at school improves health and physical activity throughout life. Thus, this presumption supports the suggestion that in order to attain fitness, a person should engage in 150 minutes of moderate-intensity physical activity or 75 minutes of vigorous-intensity physical activity each week (Piercy et al., 2018).

Physical activity is vital to human existence, particularly during periods of dread and worry. On the other hand, athletes may experience stress in the form of reduced sleep, loneliness, worry, and dread, as well as a variety of other problems

such post-traumatic disorders (PTSD) (Schinke et al., 2020). Sports-specific physical fitness and endurance have been lost as a result of its closure, which has resulted in obesity and a decline in overall health (Maddison et al., 2009; Babiss & Gangwisch, 2009).

Because of this, academic studies come to the conclusion that student emotional disorders like anxiety, social isolation, and moodiness will occur if the situation persists and students do not participate in enough physical activities and sports (Moutinho et al., 2017; Papa et al., 2020). Finding effective policies and guidelines to deal with the issue of the sports participation prohibition is crucial, regardless. In order to reestablish school athletics, the government and other interested parties must assist.

Morning assembly was a crucial component of the school calendar that was meant to support students' growth, claim Orben, Tomova, and Blakemore (2020). Prayers, updates on current events, motivational speeches, speeches, and the playing of the national anthem are all part of the morning assemblies held by almost all schools. According to Orben et al. (2020), a good school was usually picky about their morning assembly schedule. According to Broadbent (2017), some parents and kids believe that morning assemblies are a complete waste of time. Actually, not many kids are always searching for methods to get out of the morning assembly.

Seligman (2012) asserts that morning assemblies are critical to the growth of pupils. It is crucial to realize that morning assembly is about more than just singing the national anthem or waiting in lengthy lines. In 2018, Rashid and Seligman. Every part of life is greatly impacted by the activities that the students and faculty

do during morning assembly. According to Eisenberg et al. (2013), the benefits of going to school assemblies last a lifetime.

Aguilera-Hermida (2020) believes that one of the best and most efficient methods to make a student's time in school better is to include entertainment into educational programs. Research has shown that entertainment and education in schools are positively correlated (Beijing News, 2020; Chick et al, 2020; López et al, 2020).

Learning is a lifelong process that calls for perseverance, commitment, and drive. Students require motivation through entertainment and if they find learning and entertainment interesting, they would want to explore and be motivated to learn (López et al,2020).

Kwatubana & Makhalemele (2014:45) said that parents' involvement in their children's education, including visits, is beneficial as it raises the students' academic achievement and helps them concentrate better on their studies. Students who have parents who are actively interested in their education are eager to study, arrive at school on time, and perform very well in their academic duties. This is due to their awareness that their parents actively participate in their education by often checking in on them and asking about their academic achievement (Sapungan & Sapungan, 2014:45). According to Morin (2013), ensuring that parents and teachers collaborate as allies is the greatest method to help children succeed academically and in school. Involving parents in their children's education and learning improves their conduct and social adjustment in addition to their academic achievement, attitude, and morale. (Wellbeing of Children, 2010).

Low socioeconomic wellbeing increases the likelihood that students may suffer from chronic psychopathological diseases (Blanco et al. 2017; Seligman 2012). Social isolation, loneliness, low social engagement, and low social welfare have been linked to significant psychological distress in one out of three students, according to research (Blanco et al. 2017; Eisenberg et al. 2013; Seligman 2012). High levels of social comparison, peer pressure, and imbalances between education and life (Bergin & Pakenham, 2015), demanding coursework, time constraints, tight deadlines, strained relationships with teachers and classmates (Basson and Rothmann 2019; Houghton et al. 2012), and major life transitions, like moving away from family (Blanco et al. 2017), are some of the increasing number of study-related stressors that contribute to thisAdditionally, students' social welfare may negatively affect their physical health, life success, interpersonal connections, and life satisfaction when social isolation, fear of infection, and uncertainty take their toll during pandemics (Brooks et al. 2020; Lau et al. 2005).

According to Ebert et al. (2018), these issues result in a substantial impairment in psychological functioning, which has an adverse effect on social cognition, academic performance, throughput, and learning capacity. According to research, students lack the necessary personal or social support at university to protect themselves from the negative impacts of these pressures on their academic performance and social health (Mokgele & Rothmann 2014). While the research clearly identifies the causes and consequences of social welfare, it is unclear whether particular elements would apply during the COVID-19 pandemic and to what degree (Fried, 2020; Mertens et al. 2020).

Due to the COVID-19 pandemic's effects on educational systems throughout the world, schools, colleges, and institutions have been forced to close. As of April 27, 2020, the pandemic-related school closures affected almost 1.725 billion kids (Karpati et al.).uring the 2009 H1N1 Flu pandemic, a number of nations successfully stopped the infection's spread by closing their schools, according to a UNICEF monitoring report. Closing schools during the peak of the outbreak was shown to have effectively reduced the number of afflicted students in Oita, Japan. However, it doesn't seem that closing schools has had a major impact on the total number of impacted students. The implementation of obligatory school closures and other social distancing measures was associated with a 29% to 37% decrease in influenza transmission rates. The 2009 H1N1 Flu pandemic was postponed in the United States by early school closures.

Attending school is the most effective public policy strategy for developing skills. From an economic standpoint, the main advantage of going to school is that it helps a child reach their full potential, even though it may also be fun and build social awareness and skills. This is accomplished by even a small amount of time spent in school, and even a similarly short departure will result in charges for skill development. However, how much will the COVID-19 pause disrupt education? Not exactly, as we live in a different environment; it is impossible to overestimate the possible harm that the COVID-19 school closures might do to young females. Since school closures are positively connected with violence, sexual violence, and adolescent pregnancy—there was a notable spike in adolescent pregnancies during

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the 2014–2016 Ebola outbreak in Liberia—female students are particularly vulnerable.

In the last several years, there have been a number of cases of drop-out due to pregnancy (7,575) among school girls in Ghana and a long period of school closures could exacerbate this problem. The shame, marriage expectations, child care, and financial obligations of parenthood are some of the obstacles that girls who do fall pregnant during school closures must overcome in order to reenter society. UNICEF, 2020.

Improving the State of Psychological Wellbeing of Students in the Midst of COVID-19

Over 1.6 billion pupils' lives and education have been profoundly impacted by the COVID-19 epidemic globally (UNESCO 2021). In an effort to lessen the epidemic, the United States, like many other nations, implemented a policy of closing schools, which began in March 2020. On March 15, 2020, Nana Akufo-Addo, the president of the Republic of Ghana, issued an order to close all Ghanaian educational institutions. Over 9.2 million Ghanaian primary school students (kindergarten, primary, and junior high schools) were impacted by this activity (Owusu-Fordjour, Koomson & Hanson, 2020). Schools were closed during this time, and kids were encouraged to learn online to make up for the lost contact hours (Nantwi & Boateng, 2020).

The COVID-19 pandemic has had a severe impact on schooling, particularly on Ghana's second cycle of education (Karpati et al., 2021). Schools quickly adopted and pursued remote learning through video conferencing

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techniques as a result of the lockout. Among the many difficulties faced by educators, learners, and their families were elevated levels of stress and anxiety, which have resulted in a decline in their mental health. Strict social distancing measures, which were required because of the high mortality rates (more than two million fatalities globally) and the delay in vaccine supplies, have made the problems even worse.

Previous studies have found a connection between declining mental health and pandemics (Hawryluck et al., 2004; McAlonan et al., 2007; Lau et al., 2010; Xiang et al., 2014). Among individuals who have felt more stress and worry as a result of the COVID-19 epidemic are high school students (APA 2020; Tandon 2020; Wang et al., 2020). Liang et al. (2020) report that the COVID-19 pandemic caused a much higher proportion of young individuals to have psychological issues than in prior pandemics.

The frail nature of the Ghanaian second-cycle education system was evident during the peak periods of the COVID 19 and currently, institutions at this stage are yet to find their feet (Nantwi & Boateng, 2020). Owusu-Fordjour, Koomson, and Hanson (2020) used an 11-item Likert-scale questionnaire to collect data from 214 respondents, primarily students from Ghana's second cycle and higher institutions, in order to investigate the effects of COVID-19 on learning. The findings from their study indicated that though digital learning was introduced during the lockdown periods, many students were unable to access these platforms, and this made the online system of learning very ineffective and frustrating.

According to Idowu et al.'s (2020) study on the psychological effects of COVID-19 and coping mechanisms, 55.0% of respondents said that their psychological wellness had not significantly decreased as a result of the lockdown. Online conversations with friends, viewing movies, and concentrating on developing one's online skills were protective factors. In the meantime, dissatisfaction with the online instruction style and drug seeking as a coping mechanism were the main indicators of worse psychological wellbeing.

Students had significant psychological issues during the lockdown, according to Padrón et al.'s (2021) study on the Impact of COVID-19 on mental health and Self-perceived change in mental health results. Female and younger students had higher rates of emotional difficulties than male and older students, respectively. Social contact limitations, deteriorating interpersonal problems, and academic prospects were the key factors associated with psychological suffering. According to coping methods, the impacts of stresses on psychological health were modulated by daily routines (work, leisure, exercise, and sleep) as well as reframing techniques.

Improving the Social Wellbeing of Students in the Midst of COVID-19

Since the COVID-19 pandemic, the danger to physical and mental health has grown due to economic difficulties, social isolation, and mandatory quarantines. To combat the spread of the SARS-CoV-2 virus, which produces COVID-19, nations all over the globe have put in place comprehensive Public Health and Social Measures (PHSM), including shutting schools (UNESCO, 2020), because such stigmatization of mental health is linked to negative outcomes for the

student population. According to UNESCO, broad guidelines and important suggestions can be modified to take into account school operations, such as openings, closings, and reopenings, as well as the steps required to reduce the danger of COVID-19 to staff and pupils. These fundamental ideas and suggestions can be applied to certain school-related environments, such extracurricular activities, in addition to schools. Adolescents are seen to be the group most negatively impacted and disadvantaged when it comes to following these guidelines and practices (UNESSCO, 2020).

Adolescence, which has been recognized as a critical period for the development of social relationships and the necessity of peer interaction, is when teenagers shift from spending the majority of their time with their parents to spending more time with their peers (Meuwese et al., 2017; Steinberg, 2020). Furthermore, it has been determined that school connection and attendance shield kids and young people against a variety of negative physical and mental health consequences (Bond et al., 2007). Since school is where teenagers spend a lot of time with their friends, the shift to online learning in March 2020 has been more difficult and might have a detrimental effect on their resilience and mental health in particular (Bond et al., 2007). Even though the COVID-19 pandemic is causing many people to suffer through an unprecedented time, measures have been made to prevent the virus's spread, including halting schools and enforcing a statewide lockdown. Physical isolation, economic instability, fear of infection, and future concern have all had a major influence on mental health worldwide (Bond et al.,

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2007). Teenagers may have more severe effects from this stress because of important developmental features.

Globally, mental health has been significantly impacted by physical isolation, economic instability, fear of sickness, and stress associated with uncertainty about the future (Brooks et al., 2020; Holmes et al., 2020). Teenagers may be more affected by this stress because they have a higher demand for autonomy and peer connection (Brown & Larson, 2009), both of which are hindered when they are forced to physically separate from their friends and remain at home (Findlay & Arim, 2020). Teenagers are also more likely to have mental health issues at this developmental stage (Lewinsohn, Clarke, Seeley, & Rohde, 1994) and have underdeveloped cognitive processes that make it difficult for them to regulate themselves (Albert, Chein, & Steinberg, 2013).

Furthermore, teenagers' academic progress and access to mental health treatments have been significantly impacted by closing schools (Golberstein, Wen, & Miller, 2020). During the epidemic, several organizations have proposed recommended practices to safeguard mental health. Recommendations include minimizing news intake, engaging in regular physical activity, and preserving social connections through virtual exchanges throughout the crisis.

Wendy et al. (2020) report that Canadian teenagers answered online questionnaires about their experiences with the COVID-19 stress, isolation, and downheartedness, as well as their time spent with friends and family, their use of social media, their academic work, and their physical activity. The findings indicated that teenagers were extremely frightened about the COVID-19 pandemic,

with schools and peer connections being of special worry. Stress from COVID-19 was linked to higher levels of sadness and loneliness, particularly among those who used social media more often. (Wendy et al., 2020) While spending more time digitally communicating with friends during the pandemic was linked to higher levels of depression, regardless of COVID-19 stress, family time and academic work were linked to lower levels of depression for teens with depressive symptom

Keeping an eye on how helpful online interactions are could be crucial. The findings demonstrated encouraging ways to prevent loneliness, as physical exercise, time spent with friends and family, and COVID-19 stress were all linked to reduced loneliness (Wendy et al., 2020).

Chapter Summary

Literature was reviewed along the theoretical, conceptual and empirical to guide the study. The theory that underpinned this research was the Self-Efficacy theory by Albert Bandura,(1977). According to Michie, Johnston, Francis, Hardeman, and Eccles (2008), this theory offers a framework for behavior prediction, behavior mechanism description, and behavior causal factors that should be the focus of intervention. A person's assessment of confidence in their capacity to achieve a particular level of performance, such as lifting a heavier weight or persevering through an additional repetition, is known as self-efficacy (Lopez-Garrido, 2020). Crucially, situation-specific self-efficacy—also known as situation-specific self-confidence—depends on the circumstances (Feltz & Chase, 1998). As a result, a person's degree of self-efficacy may differ depending on the type of strength training or activity they do. Theory of social cognition Bandura

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(2019) offers a framework for comprehending how situational factors and personal experience impact people's perceptions of their own competence and capacity to carry out a behavior in order to achieve desired performance.

In tallying to these tangible effects on students' educational experiences, public health emergencies have broad ramifications for mental health. The COVID-19 pandemic has been associated with detrimental psychological effects, including increased stress and increased feelings of anxiety and depression (Brooks et al., 2020; Salari, A.Hosseinian-Far & B. Khaledi-Paveh, 2020; Taylor et al., 2020).

Based on the theory that drives the study, this is how the researcher conceptualised the study. Students' psychological and social state during this era of COVID-19 pandemic. Psychologically, students state could be in terms of cognitive, behavioural and environmental factors on their academic activities. Psychologically, it appears that students are in the state of stress, anxiety, depression, distress and academic disruption. Again, regarding the social wellbeing of students, it also appears that students have been affected ngatively following the seizure of sporting activities and social gathering such as morning assembly, morning devotion and entertainment. As a result of the COVID-19, Senior High School students did not embark on any sporting activity such as inter-school football competition. Also, students did not go for assembly, morning devotion and entertainment all of which meant for socialization. The figure 1 shows how COVID-19 altered both the states of psychological and social wellbeing of students. According to the empirical review, there have been a lot of significant modifications that have changed living or dying (Nyantanga, 2020; Wang et al.,

2020). People are starting to take precautions because of the current COVID-19 epidemic (Nelson et al., 2020). It is now challenging to avoid reality and engage in discussions due to social media (Shaw, 2020). It is hard for everyone to think about anything else because of these constant highlights and media discussions (Hossain et al., 2020).

It was determined, however, that the COVID-19 pandemic has a significant impact on people's social wellbeing since it limits the extent to which people's social needs may be met (Fried, 2020). This is in contrast to the students' social welfare condition. During emergencies, social wellbeing is vital to preserving society's optimal functioning (Zhang and Ma, 2020) and is a crucial aspect of mental and physical health (Pancani, Marinucci, Aureli, & Riva, 2020). According to Keyes (2014), social wellbeing is a public phenomena that highlights how well an individual's social demands and social realities align. Social wellbeing, according to Keyes (2014, p. 104), is the degree to which "individuals feel they make valued social contributions, view society as meaningful and intelligible, experience a sense of social belonging, maintain positive attitudes toward others, and believe in the potential for society to evolve positively." This perspective is based on the social psychological and sociological frameworks of Durkheim (2021) and De-Juanas (2020).

Enhancing the social welfare of SHS students during the COVID-19 epidemic was also researched. Physical and mental health risks have escalated since the COVID-19 outbreak because to the pandemic, mandated quarantine, social isolation, and economic challenges. The SARS-CoV-2 virus, which causes

COVID-19, has been stopped from spreading by countries all around the world by the implementation of substantial Public Health and Social Measures (PHSM), including shutting schools (UNESCO, 2020), because such stigmatization of mental health is linked to negative outcomes for the student population. According to UNESCO, broad guidelines and important suggestions can be modified to take into account school operations, such as openings, closings, and reopenings, as well as the steps required to reduce the danger of COVID-19 to staff and pupils. These fundamental ideas and suggestions can be applied to certain school-related environments, such extracurricular activities, in addition to schools.

CHAPTER THREE

RESEARCH METHODS

Introduction

The study's objective was to investigate the social and psychological well-being of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic.The methodological approach taken to conduct this inquiry is described in this chapter. The chapter is also arranged into the following subheadings: research design, study area, population, sample and sampling strategy, data collecting instruments, data gathering technique, data processing and analysis, and chapter summary.

Research Design

Research design is the set of methods and procedures used to collect and evaluate measurements of the variables specified in the issue study, according to Cooper and Schindler (2014). Research problems, hypotheses, independent and dependent variables, experimental design, study type (descriptive, correlational, semi-experimental, experimental, review, meta-analytic), and, if applicable, data collecting methods and a statistical analysis plan are all established by the design of a study. A descriptive survey was used as the research design in this study.

The goal of descriptive survey research, according to Ary, Jacobs, and Sorensen (2010), is to collect information about the condition of phenomena. A descriptive survey, according to Seidu (2012), is the examination of an existing condition, dominant opinions, attitudes, ongoing processes, and emerging trends in order to collect information that can be examined and interpreted to create a report

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on the current state of the subject or phenomenon being studied. The descriptive survey technique was judged suitable as it offers a thorough description of the phenomena in their current context and is economical when collecting data from a large sample with a high data turnover rate (Kothari, 2011).

The way things are is determined and reported via descriptive surveys (Gay, Mills & Airasian 2015). Furthermore, according to Gay et al., it aims to identify the character of the situation as it is at the time of the research. According to Frankel and Wallen (2012), the core of survey research is gathering responses from a sizable population to a series of well crafted and delivered questions. Because she wants to know what a wide range of individuals think about the psychological and social health of SHS students in the Cape Coast Metropolis, Central Region of Ghana, during the COVID-19 epidemic, the researcher used a descriptive survey in this study.

Study Area

Located in Ghana's Central Region, the Cape Coast Metropolis was used as the research area. Its boundaries are the Twifo Heman Lower Denkyira District to the north, the Abura-Asebu-Kwamankese District to the east, the Gulf of Guinea to the south, and the Komenda-Edina-Eguafo-Abrem to the west. Politically, it was the first capital of the Gold Coast at the time. With a total population of 189,925, the Metropolis occupies 122 square kilometers. The local dialect of the inhabitants is Fante language but also use English language in some instances as official language. The Metropolis is noted as a seat of education as it can boast of 40 Senior High Schools, both public and private, one Technical University, and University of

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Cape Coast which has currently been ranked as number 1 University in Ghana, number 1 University in West Africa, and number 7 University in Africa according to Times Higher Education World University Rankings (2024). Predominantly, the economic activities the people engage in for their living include: fishing, trading, and white color jobs.

Population

A population is well-defined as "a group of individuals or people that have one or more characteristics in common and are of interest to the researcher" (Best and Kahn, 2006, p.13). The study's accessible population consisted of Form 2 and 3 students from the University Practice SHS, Mfantispem SHS, Wesley Girls High School, Efutu, and Academy of Christ the King SHS. The study's targeted audience was all students in the Cape Coast Metropolis (see Table 1).

Table 1- Population Size of SHS Selected

School	Form Two (2)	Form three (3)	Total Number
University Practice SHS	798	1005	1,803
Mfantispim SHS	1083	1056	2,139
Wesley Girls SHS	952	696	1,648
Efutu SHS	836	739	1575
Academy of Christ the King SHS.	671	1040	1,711
Total	4,340	4,536	8,876

Source: GES, Central Regional Statistics, (2020)

Sampling Procedure

A subset of the population from which the researcher intends to draw conclusions is called a sample (Cohen, Manion & Morisson, 2007). Five SHS in Cape Coast Metropolis were included in the sample chosen for this study, which was determined by taking into account the main goal, the research questions and design. Based on Krejcie and Morgan's (1970) sample size calculation table, the students' sample size was chosen. Krejcie and Morgan suggested that a minimum of 368 respondents be sampled from a population of 9,000. Therefore, a minimum of 368 pupils were sampled from a population of 8,876—nearly 9,000. However, the researcher raised the number to 378 in order to guarantee the study's dependability. This was done in order to address the potential for respondents to decline to answer the questionnaire. Consequently, two responders were added to each school by the researcher. In order to reach the 378 total sample size, 10 responders were added to the minimum 368 students that Krejcie and Morgan advised.

First, the researcher chose five public SHS in the Central Region of Cape Coast Metropolis using a purposive sample technique. Purposive sampling, according to Orji, Madu, and Nwachukwu (2015), is a non-randomized sampling methodology in which the researcher selects a sample size and composition that he deems suitable, pertinent, and sufficient for the study (Ary, Jacobs, & Sorensen 2010). Therefore, the chosen schools were deemed fit for the information needed because they met the various categoreies of schools within the SHS level. These include category A, B and C schools; Wesley Girls and Mfantsipim being for

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(A),University Practice and Academy of Christ the King for (B) and Efutu SHS for (C).

Furthermore, the students were chosen for the study using a proportionate stratified sampling approach. As stated by Ary, Jacobs, and Sorensen (2010), stratified sampling allows you to either pick proportionately to the size of the stratum in the population or take an equal number of people from each stratum. The pupils were already categorized by their different schools, therefore proportionate stratified sampling was utilized. In accordance to the total number of students from the different schools, the researcher chose the sample size of the students.

The total sample for each of the several schools (groups) was determined after the sample size was determined. This was computed to make sure they were proportionate to the sample size and the population in each category. The sample size for the pupils was determined by dividing the sample for each school (group) by the total population of 8,876 and then multiplying the result by the sample size of 378. This was done to make sure the sample size was appropriate for each school's population (group). The researcher determined the needed sample size for the University Practice SHS, for instance, by dividing the total number of students (1,803) by the total population of all the schools (8,876) and then multiplying the result by the sample size of 378. This yielded the appropriate sample size of 77 (see Table 4). In particular, the following computations were performed: for instance;

University Practice SHS is obtained by 1,803÷8,876×378=76.7 or 77

Mfanstipim SHS is obtained by 2,139÷8,876×378=91.0 or 91

Wesley Girls SHS is obtained by 1,648÷8,876×378=70.1 or 70

Effutu SHS is obtained by 1,575÷8,876×378=67.0 or 67

Academy of Christ the King SHS is obtained by 1,711÷8,876×378=72.8 or 73

Further, in calculating the sample size for the classes (forms) in each selected school, a class (form) was divided by the total population of a school and multiplied by the sample size of the school. For instance, in calculating for the class (forms) for UPSHS;

Form two (2) 798÷ 1803 × 77= 34, Form three (3) 1005÷ 1803 × 77=43.

Table 2 : Sample Size of Students in Forms Two and Three

School	Form two (2)	Form three (3)	Total Sample Size
University Practice SHS	34	43	77
Mfantsipim SHS	46	45	91
Wesley Girls SHS	40	30	70
Effutu SHS	36	31	67
Academy of christ the king SHS	29	44	73
Total	185	193	378

Source: Field survey, Forson (2021)

As indicated in Table 2, the sample size was determined using the forms at the selected Cape Coast Metropolis schools (groups). It essentially guarantees that the sample has the same proportions of the population's pupils' essential traits (ensuring COVID-19 procedures). Students were chosen from the forms in the schools (groups) to administer the questionnaire using the basic random sample approach in order to maximize the degree of representativeness. To prevent bias and unintended consequences, simple random sampling involves selecting a sample at random (Ary, Jacobs & Sorensen, 2010). In order to administer the questionnaires to all of the different students (groups) chosen for the study, I was able to obtain an accurate representation of the participants using the random sampling approach, free from any bias.

The Central Regional office of the Ghana Education Service was contacted while choosing pupils for the research from the Cape Coast Metropolis schools. A list of every student enrolled in the chosen schools (University Practice SHS, Mfanstipim SHS, Wesley Girls SHS, Efutu SHS, and Academy of Christ the King SHS) was provided to the researcher by the office of the Regional Director.

In order to randomly choose the responses from the population, I also gave each student in the population a unique identifying number. This process, for example, was used to choose 34 "form two" students from the University Practice SHS as a sample. I started by listing every person in the population. Each student in the population was then given a number by the researcher, which ranged from 00 to 33. After that, each pupil was given an identity number that had the same amount of digits as the others.

Lastly, I pulled out a slip of paper after writing the kids' numbers on individual pieces of paper, putting the pieces in a container, and shaking it. I shook the container once again, pulled out another piece of paper, and so on until thirty-four slips of paper were selected. Additionally, as responders for the data collection, the number of students who selected a sheet of paper in accordance with the necessary sample size for each form. For this study, 378 pupils from the different schools (groups) were chosen.

Data Collection Instruments

A research instrument is a tool used to gather, quantify, and evaluate data pertaining to one's research interests, according to Cohen et al. (2007). Data for this study was gathered using an instrument called an adapted questionnaire (see Appendix A). Data from the pupils at the chosen schools in Cape Coast Metropolis was gathered using the questionnaire.

A questionnaire titled "Examining the State of Psychological and Social Wellbeing of Senior High School Students in The Cape Coast Metropolis During COVID-19", was adapted from the "Public Health Questionnaire"developed by Kroeke,Spitzer and Williams(2022). After requesting an introduction letter from the department, this was utilized to gather data from the pupils at the chosen schools. For this study, I was able to get a wide range of replies from a big number of students by using the questionnaire (Sarantakos, 2005). 36 items were included in the questionnaire, which was divided into five major sections: Sections A, B, C, D, and E. Respondents' demographic information, or their background characteristics, was elicited in Section A. Information on the psychological and

social well-being of senior high school students in the Cape Coast Metropolis during COVID-19 was requested in Sections B and C of the questionnaire. Additionally, during COVID-19, Sections Dand E asked for suggestions on how to enhance the psychological and social health of senior high school students in the Cape Coast Metropolis.

Examining the psychological and social well-being of senior high school students in the Cape Coast Metropolis during COVID-19 was the goal of the research questions. The four-point Likert scale and multiple-choice answers were graded as "Agree" and "Disagree," "Strongly Agree" and "Strongly Disagree."For the purpose of gathering information from respondents (students), the following formats were created: "Strongly Agree" = 4, "Agree" = 3, "Disagree" = 2, and "Strongly Disagree" = 1. The purpose of this was to gauge how much the students agreed or disagreed with the assertions (see to Appendix A).

A total of 36 closed-ended and 2 open-ended questions were included in the poll. Regarding the psychological health of senior high school pupils in the Cape Coast Metropolis, the closed-ended questions provided benchmark responses. The Social Welfare of Cape Coast Metropolis Senior High School Students During COVID-19 High school students in the Cape Coast Metropolis might benefit from efforts to improve their social and psychological health during the COVID-19 epidemic. The open-ended questions for students provided the opportunity for them to provide needed information concerning their own experiences on the ways to improve the state psychological wellbeing of SHS students in the Cape Coast Metropolis and the ways to improve the state social wellbeing of SHS students in

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the Cape Coast Metropolis which the researcher did not capture in the questionnaire. The use of the questionnaire also offered a greater assurance of anonymity about whatever information they provided.

Pre-Testing of Instrument

I pre-tested the questionnaire so that I could assess its usefulness. This made determining the validity and reliability of the questionnaire's items easier. In order to help the respondents complete the items as precisely as possible, it was also necessary to determine if the instructions that came with them were clear enough. By piloting the instrument, the researcher was able to get input on the suitability and completeness of the elements in the instruments used in this investigation.

The questionnaire was pre-tested at the Breman Asikuma Senior High School. This is because the school also experienced COVID-19 just as the selected schools for this study. In this pre-test, the Cronbach's alpha (a) values recorded for Sections were, B= 0.706, C= 0.910, D= 0.753 and E= 0.734. Higher internal consistency between the test items is indicated by alpha values larger than 0.7 (Bland & Altman, 1997). According to Cohen, Manion, and Morrison (2007), the alpha value is regarded as a high and sufficient reliability coefficient, making it a suitable metric for assessing an instrument's dependability for research purposes. This aided me in assessing the questionnaire's items' internal consistency. The outcome demonstrated the instrument's dependability. Additionally, I had to change several of the questionnaire's unclear questions because of the results. This made it possible for the researcher to develop a questionnaire that was more explicit and successful in obtaining the appropriate answers.

Validity and Reliability of Instrument

The validity of an instrument is the extent to which it measures what it is supposed to measure (Feldman, 1997). My supervisor, fellow researchers, and professional opinion from measurement and assessment were used to ensure the validity and reliability of the questionnaire. Additionally, it was necessary to determine if the instructions that came with the items were clear enough to direct the responders to fill them out as precisely as feasible. In this respect, copies of the questionnaire were sent to my supervisor for feedback and revisions once it was developed. This was done to make sure the questionnaire's items were fully and accurately recorded. Some of the questionnaire items were changed as a result of my supervisor's comments and recommendations. Additionally, my supervisor related the questionnaire's questions to the study topics given and reviewed the material to eliminate any ambiguities, incorrect wording, and sequences. The questionnaire was pre-tested in Breman Asikuma Senior High School to determine its usefulness. This is because the school, which is classified as a category (B) school, also experienced COVID-19, much as the schools chosen for this study. The Cronbach's alpha (a) values for the sections in this pre-test were B = 0.706, C = 0.910, D = 0.753, and E = 0.734.   Higher internal consistency between the test items is indicated by alpha values larger than 0.7 (Bland & Altman, 1997).

According to Cohen, Manion, and Morrison (2007), the alpha value was deemed a suitable metric for assessing the instruments' dependability in my study. The researcher was able to obtain input on the appropriateness and completeness of the items in the instruments used for this study by piloting the instrument.

Data Collection Procedures

Pilot and Hungler (2015) define data as information obtained in a course of study. A number of measures were taken to ensure effective collection of study. To make it easier for the researcher to obtain information from the respondents in the chosen institutions for the study, a letter of introduction was asked of the College of Distance Education's School of Graduate Studies Unit (see Appendix D). The headmasters of each of the study's participating schools in the Cape Coast Metropolis received the letter. With their consent, I gathered the respondents at predetermined locations using the sample sizes of the individual schools. After being informed of the study's objectives, the questionnaire was given to the respondents—form twos initially, followed by form threes. After 30 minutes, after the pupils had completed the surveys, they were collected.

Ethical Consideration

Creswell (2008) notes that in order to acquire data for a study, researchers must ask or receive permission from the site's administrators.I talked with the heads of the chosen schools about the study's methodology, including when, how, and from whom data would be gathered. After obtaining access, I proceeded to talk with the research participants about other ethical concerns.

Following permission from the appropriate school authorities, it was essential to get informed consent from the study's target respondents. In order for participants to provide their informed consent, they must be thoroughly educated about the possible risks and benefits of taking part in the study before they can make up their minds, according to Makore-Rukuni (2001). The participants are

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allowed to leave the research at any moment or refuse to take part (Tuckman, 1994). I explained the goal of the research to the participants in this one. The respondents were have the option to participate in the study or not.

Confidentiality was the subject of the following ethical discussion. According to Babbie and Mouton (2001), confidentiality denotes the researcher's ethical duty to protect the respondent's identity and answers. I made sure that the data in this study was used exclusively for research and was not shared with any other users. Anonymity was the next ethical topic covered. The "right to privacy" of the respondents was safeguarded by anonymity. Accordingly, a respondent was deemed anonymous if the information supplied did not allow the researcher or another individual to identify them (Cohen et al., 2007).

The respondents were asked not to write their names or school when the questionnaire was being administered in order to maintain anonymity in this study. Rather than using names, respondents were identified by their alphabets. Instead of displaying individual replies, data were grouped to ensure anonymity.

Data Processing and Analysis

Data analysis is the process of looking through, cleaning, modifying, and modeling data to identify pertinent information, make inferences, and support decision-making (Hammond, 2018). Numerous facts and methodologies are involved in data analysis, which includes a number of methods under various titles in fields including business, science, and social science (Davenport & Harris, 2017).

Respondent data was gathered for this study and subjected to quantitative analysis. Using descriptive statistics, I was able to assess and describe the data to address each of the specific research objectives of the study (Patton, 2002).

The quantitative data was analyzed using descriptive statistics including means, standard deviations, percentages, and frequencies. SPSS Version 21.0, the Statistical Product for Services Solution, was used for these. In order to determine if all of the questions were answered by the respondents (students), the process began with gathering the questionnaire to be compared with the appropriate question numbers. Second, the test items were coded to guarantee accurate student responses for improved analysis and summarization of the impact of COVID-19 on the social and psychological health of SHS students in the Cape Coast Metropolis.

Thirdly, following coding, the data was imported into Statistical Product for Services Solutions (SPSS) version 21 for analysis and computation of the Cronbach alpha reliability coefficient for each research question's components. As shown below, an analysis of the study's four objectives and research questions was conducted.

Frequency, percentage, mean, and standard deviation were used to analyze the first objective and study question, which looked at the psychological health of the pupils.   Using frequency, percentage, mean, and standard deviation, the second study question and objective was to examine the level of social welfare.   The frequency, percentage, mean, and standard deviation were used to analyze the third objective and study question, which looked at strategies to enhance psychological wellness.   Frequency, percentage, mean, and standard deviation were used to

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analyze the fourth objective and research question, which looked at strategies to enhance psychological wellness.

Table 3: Analysis Procedure for Research Questions

Research Questions	Type of Questions	Analytical tool
1. In the views of respondents, what is the state of psychological wellbeing of senior high school students in the cape coast metropolis during COVID-19?	Four-point Likert type scale of questions and open-ended question	Frequency, percentage, mean, and standard deviation
2. In the views of respondents, what is the state of social wellbeing of senior high school students in the Cape Coast metropolis during COVID-19 ?	Four-point Likert type scale of questions	Frequency, percentage, mean, and standard deviation
3. In the mist of COVID-19, what are the ways to improve the state of psychological wellbeing of senior high school students in the Cape Coast Metropolis?	Four-point Likert type scale of questions and open-ended question	Frequency, percentage, mean, and standard deviation
4. In the midst of COVID-19, what are the ways to improve state of social wellbeing of senior high school students in the cape coast metropolis during COVID-19?	Four-point Likert type scale of questions and open-ended question	Frequency, percentage, mean, and standard deviation

Source: Field Date (2020)

Chapter Summary

The research methodology used to make sure the study's conclusions were supported by the evidence it offered was highlighted in this chapter. In order to get quantitative data from students and conduct quantitative analysis, the study used a descriptive survey approach.

The target group for the study was all SHS students in the Cape Coast Metropolis. Accessible students included eight,876 students from Academy of Christ the King SHS, Wesley Girls SHS, Mfantsipim SHS, Efutu, and University Practice SHS in the Cape Coast Metropolis. A sample of 378 students was selected for this study using proportional stratified random sampling and purposeful selection, respectively. Finally, means, standard deviation, and frequency percentage were employed to analyze the collected data.

CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

Its goal was to investigate the mental and social well-being of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic. This chapter presents the results and analysis of the study. Findings from the study are presented in two sections. The first portion contains the demographic data, while the second section presents the major data findings in accordance with the study's goals.

Demographic Characteristics

Students' gender, age range, housing situation, types of students, and COVID-19 knowledge are all included in their demographics. The questionnaire's items one through five were created to gather data on demographic traits. Table 4 displays the answers to these questions as well as the findings. Frequencies and percentages were used to analyze the replies.

Table 4: Distribution of Respodents' Background

N=378

Characteristic	N	%
Gender		
Male	187	49.5
Female	191	50.5
Age range		
Below 13	2	.5
13 to 15	21	5.6
Above 15	355	93.9
Accommodation Status		
Boarding	258	68.3
Day	120	31.7
Forms of students		
Form two	181	47.9
Form three	197	52.1
Students' knowledge of COVID-19		
Yes	374	98.9
No	4	1.1
Causes of COVID-19		
Bacterial	9	2.4
Fungi	1	.3
Virus	368	97.3

Source: Fieldwork, (2022)

Table 4 shows the gender, age range, accommodation status, form (class) of students and their knowledge on COVID-19 regarding the causes. It can be seen that about the students gender, female respondents were 191 (50.5%) whilst 187 (49.5%) of the respondents were males. Concerning the respondents' age range, 355 (93.9%) of the respondents indicated that they were above 15 years, 21 (5.6%) were within 13 and 15 years whilst, 2 (.5%) were below 13 years. In terms of accommodation status, 258 (68.3%) of the respondent indicated that they were borders while 120 (31.7%) were day. Further, it can be seen that 197 (52.1%) of the respondents were in form three whilst, 181 (47.9%) were in form two. Also, 374 (98.9%) of the respondents indicated that they have knowledge about COVID-19, however, 4 (1.1%) revealed that they did not have knowledge about COVID-19. In effect, 368 (97.3%) of the respondents indicated that COVID-19 was caused by virus. Again, 9 (2.4%) also revealed that it was caused by bacterial whilst 1 (.3%) showed that it was caused by fungi.

The contextual information of the respondents are necessary for the study, in that, these information revealed to the researcher whether they are within the range and are knowledgeable in responding to the issues on COVID-19. For instance, in terms of age range, majority of the respondents were above 15 years. Also, regarding accommodation status, majority of the respondents were in the boarding house. Concerning students knowledge on COVID-19, majority of the respondents indicated that they had knowledge on the disease, and so indicated that COVID-19 was caused by a virus. These information inferred that students were in

the position to reveal the state of their psychological and social wellbeing during the COVID-19 pandemic.

Analysis of Research Questions

This section of the chapter focuses on the examination of the study's developed research questions. The organization and discussion of these key findings follow the particular research topics that were put forth.

Research Question One: What is the State of Psychological Wellbeing of SHS Students in the Cape Coast Metropolis During the COVID-19 Pandemic?

Responses about the psychological health of SHS students in the Cape Coast Metropolis during the COVID-19 epidemic were obtained from items 7 through 17 of the survey. For easier presentation and simple understanding of the analysed results and also for any lay person with little knowledge in statistics to understand the analysis,the researcher merged strongly agree and agree as 'agree' and strongly disagree and disagree as 'disagree' representing 'A' and 'D' respectively. In employing the mean(M) and standard deviation(SDV) for the analysis, a decision rule where SDA $=3.5\leq M \leq4.0$, A $=2.5\leq M \leq3.4$, D $= 1.5\leq M \leq2.4$, SD $=1.0\leq M \leq1.4$ were merged to read as $2.5\leq M \leq 4.0$ to indicate that the mean is perceived as agreed (A) while, $1.0\leq M \leq 2.4$ also indicate that mean is perceived as disagree (D) for the state of psychological wellbeing of students. The results are presented in Table 5.

Table 5: The State of Psychological Wellbeing of SHS Students in the Cape Coast Metropolis During the COVID-19 Pandemic N=378

Statement	A	D	M	SDV	Decision
I could not learn when I heard of the first reported COVID-19 case in the Cape Coast Metropolis.	154 (40.7)	224 (59.3)	2.33	1.04	Disagree
I was scared when I heard that a relative or friend ws infected by COVID-19	280 (74.0)	98 (25.9)	3.02	1.02	Agree
I was satisfied with checking of temperature regularly	314 (83.1)	64 (16.9)	3.16	.87	Agree
I was satisfied with wearing of nose mask continuously	228 (60.3)	150 (39.7)	2.73	1.06	Agree
I was satisfied with washing of hands regularly	321 (84.9)	57 (15.1)	3.22	.823	Agree
I could not sleep well during the peak of the COVID-19	118 (31.3)	260 (68.7)	2.05	1.00	Disagree
I was scared of the quarantine of a mate during the peak of COVID-19	232 (64.4)	146 (38.1)	2.8	.99	Agree

I was sad when my relative or friend was infected with COVID-19	268 (70.9)	110 (29.1)	3.0	1.04	Agree
I was worried about self-quarantine after class	252 (66.7)	126 (33.3)	2.84	.95	Agree
I felt bored when school authority instructed students to ensure social distancing in the classroom	256 (67.7)	122 (32.3)	3.0	1.04	Agree
I used to have nightmares when I hear news about COVID-19	72 (19.1)	306 (80.9)	1.76	1.11	Disagree

Source: Fieldwork, (2022)

The frequency distribution, percentage, mean, and standard deviation of students' psychological wellness are displayed in Table 5. A higher mean indicates that the majority of students agreed with the particular statement based on the questionnaire's assessment. From Table 5, 306 (80.9%) respondents disagreed that they use to have nightmares when they heard news about the COVID-19. This infers that majority of the students disagreed that the news about COVID-19 made them have nightmares. This can be seen in the statement that 'I used to have nightmares when I hear news about COVID-19' recorded the lowest mean (N=378, M=1.76, SDV=1.11).

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Also, 269 (70.9%) of the respondents agreed that they were sad when their relative or friend was infected with COVID-19. The statement "I was sad when my relative or friend was infected with COVID-19" revealed the highest mean (N=378, M=3.00, SDV=1.04), which is directly consistent with the study by Bourion-Bédès et al. (2021) on the effect of COVID-19 on students' mental health, which found that 61% of the sample experienced anxiety during the lockdown period. The study provides explanations for the worry, like having COVID-19-infected relatives, domestic disputes, having trouble separating from others, busy surroundings, etc.(uncertain).   Additionally, a majority of the pupils could still learn about the first documented instance of COVID-19 in the Cape Coast Metropolis, as 269 (70.9%) of the respondents disputed that they were unable to learn. It can then be seen from the statement that "I could not learn when I heard of the first reported case of COVID-19 in the Cape Coast Metropolis" recorded a low mean (N=378, M=2.33, SDV=1.04) this is in direct contrast with Liang et al. (2020) who reported that a much higher fraction of youth with psychological issues during the COVID-19 pandemic when compared to prior pandemics.

Again, 321 (84.9%) of the respondents and 314 (83.1%) respectively, agreed that they were satisfied with washing of hand and checking of temperature regularly. This meant that the respondents were satisfied with the COVID-19 protocols. For instance, the statement that " I was satisfied with the washing of hand regularly" recorded a highest mean (N=378, M=3.22, SDV=.823).

When asked if they experienced nightmares during the COVID-19 pandemic, SHS students in the Cape Coast Metropolis did not, according to the

report. However, more than half of the respondents expressed that they became sad when their relative or friend was infected by COVID-19. Notwithstanding, about COVID-19, a little more than half of the respondents disagreed to the fact that they could not learn when they heard of the first reported case in the Cape Coast Metropolis. It can therefore be inferred that quite a number of the respondents were affected psychologically by COVID-19 in terms of their academic. Since indirectly, a little less than half of the respondents agreed that they could not learn when they heard of the first reported case. The results of this study provide credence to Cao et al.'s (2020) assertion that it is highly probable that a college or university student would be able to recover physically and psychologically from the negative effects of the COVID-19 epidemic. Furthermore, it was mentioned that academic disruption, performance pressure, and possible ambiguity were the main causes of the rise in psychological stress among university students (Zhai & Du, 2020).

Research Question Two: What is the Sate of Social Wellbeing of SHS Students in the Cape Coast Metropolis During the COVID-19 Pandemic?

This study sought to ascertain the social welfare of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic. Items 18 through 24 on the survey were answered by the students. The data gathered from the respondents was analyzed using the mean (M) and standard deviation (SDV). For easier display and understanding of the studied data, I classified strongly disagree and disagree as "disagree," representing "A," and strongly agree and agree as "agree," representing "A" and "D," respectively. When it comes to the influence of COVID-19 on students' social welfare, the study employs the mean and standard deviation as a

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criterion. If the mean is 2.5≤M ≤ 4.0, it is considered to be agreed with, and if it is

1.0≤ M ≤ 2.4, it is considered to be disagreed with. The results are shown in Table

6.

Table 6: The State of Social Wellbeing of SHS Students in the Cape Coast
Metropolis During the COVID-19 Pandemic N=378

Statement	A	D	M	SDV	Decision
I was not happy when inter-school sporting activities were suspended due to COVID-19 because it denied me from socializing	314 (83.3)	63 (16.7)	3.37	1.11	Agree
I was afraid to interact with mates at the pick of the COVID-19 pandemic, due to infection	252 (66.7)	126 (33.3)	2.86	.97	Agree
I missed the daily information I used to get from morning assembly due to COVID-19	261 (69.1)	117 (30.9)	2.94	.92	Agree
I missed the school's entertainment program due to the COVID-19 pandemic	334 (88.4)	44 (11.6)	3.37	.84	Agree
I missed church services during the pick of COVID-19	319 (84.4)	59 (15.6)	3.33	.91	Agree
I missed "visiting of my parents in school" during the peak of COVID-19	322 (85.2)	56 (14.8)	3.41	.89	Agree
It was difficult for me getting close to my mate at the peak of COVID-19	261 (69.1)	117 (30.9)	2.99	.99	Agree

Source: Fieldwork, Forson (2022)

Table 6 shows students' responses on the state of social wellbeing of SHS

students in the Cape Coast Metropolis during the COVID-19 pandemic. It can be

seen statistically from Table 6 that, 322 (85.2%) of the students agreed that, they

missed parents' visits during the peak of COVID-19. It is shown that the statement " I missed visiting of my parents in school during the peak of COVID-19" recorded the highest mean (M=3.41, SDV=.89). This indicates that most of the students missed their parents visit during the peak of COVID-19.

Also, 334 (88.4%) of the students agreed that, they missed the school's entertainment program during the COVID-19 pandemic. This can be seen from Table 6 that the statement , "I missed the school's entertainment program due to the COVID-19 pandemic" recorded the highest mean (M=3.37, SDV=.84). Likewise, 314 (83.3%) of the students expressed their agreement to the fact that they were not happy when sporting activities were suspended due to COVID-19 because it denied them from socializing. It is shown that the statement that "I was not happy when sporting activities were suspended due to COVID-19, because it denied me from socializing" recorded the highest mean (N=378, M=3.37, SDV=1.11).

A study on the social welfare of SHS students in the Cape Coast Metropolis found that most of the children missed extracurricular activities, parent visits, and sporting events since they were all suspended during the COVID-19 pandemic. They went on to say that they were unable to socialize since these activities were suspended. It follows that during the height of the COVID-19 pandemic, pupils experienced significant social disruptions. Because the COVID-19 epidemic limits the extent to which people's social needs may be met, the findings of this study support the idea that it has a substantial impact on people's social wellbeing (Fried,

2020). Social wellbeing is an important component of mental and physical health during times of crisis (Pancani, Marinucci, Aureli, & Riva, 2020).

This supports the study by Kwatubana & Makhalemele (2014:45), which claimed that parents' involvement in their children's education, including visits, is beneficial because it helps the children perform better academically and increases their attention to their studies.

Once more, Sapungan and Sapungan (2014:45) found that children whose parents are actively involved in their education are eager to study, on time for class, and perform exceptionally well in their academic duties. This is because kids know that their parents are actively interested in their education, keeping a close eye on them and asking about their academic progress. Lastly, Morin (2013) also backed up the claim that ensuring that parents and teachers collaborate as allies is the greatest method to help children succeed academically and in school.

Sports participation has an impact on students' health and well-being, according to Bailey (2006). Students who participate in athletics not only do well on tests but also have lower levels of anxiety and despair, according to the study. Nonetheless, Kniffin et al. (2015) claim that playing sports in school enhances physical activity and health throughout adulthood. According to Piercy et al. (2018), this presumption backs up the idea that in order to become fit, a person must perform 150 minutes of moderate-intensity physical activity or 75 minutes of vigorous-intensity physical activity each week.

Research Question Three: What are the Ways to Improve the State of Psychological Wellbeing of SHS Students in the Cape Coast Metropolis During the COVID-19 Pandemic?

Finding out respondents' thoughts on how to enhance the psychological health of SHS students in the Cape Coast Metropolis during the COVID-19 epidemic was the aim of this research topic. Students' answers to the questionnaire's items 25 through 31 asked about strategies for enhancing the psychological health of SHS students in the Cape Coast Metropolis. Frequencies, percentages, averages, and standard deviations were used to analyze the student data that was collected.

The researcher classified strongly agree and agree as "agree" and strongly disagree and disagree as "disagree," denoting "A" and "D," respectively, for simpler presentation and comprehension of the analyzed data. For the analysis, the mean and standard deviation are used. A decision rule states that if the mean is $2.5 \leq M \leq 4.0$, it is considered to be agreed, and if the mean is $1.0 \leq M \leq 2.4$, it is considered to be disagreed with about the psychological well-being of SHS students. Table 7 presents the findings.

Table 7: Ways to Improve the State of Psychological Wellbeing of SHS Students in the Cape Coast Metropolis during COVID-19

Statement	A	D	M	SDV	Decision
Guidance programes on public health could be organised to bring students out of the traumatic experiences.	339 (89.7)	39 (9.3)	3.25	.75	Agree
I should not let my feelings interfere too much with my daily activities.	343 (90.7)	35 (9.3)	3.23	.66	Agree
I will talk to an expert in the school to have more information on COVID-19 pandemic	318 (84.1)	60 (15.9)	3.15	.77	Agree
I will talk to the school counsellor about my feelings on COVID-19 pandemic.	256 (67.7)	122 (33.3)	2.81	.92	Agree
I can have quality sleep by reading	272 (71.9)	106 (28.1)	2.96	.94	Agree
I will chat with friends whenever I feel depressed.	289 (76.5)	89 (23.5)	3.03	.91	Agree
I will read novels to release boredom	320 (84.7)	58 (15.3)	3.22	.82	Agree

Source: Fieldwork, (2022)

Table 8 shows the ways to improve the stateof psychological wellbeing of SHS students in the Cape Coast Metropolis during the peak of COVID-19. It can be seen statistically from Table 8 that, 343 (90.7%) of the students agreed that to

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improve their psychological wellbeing, they should not let their feeling interfere too much with their daily activities. It is shown that the statement " I should not let my feelings interfere too much in my daily activities" recorded highest mean (M=3.23, SD=.66) indicating students' agreement with one way to improve the psychological wellbeing of students. Again, 339 (89.7%) of the respondents agreed that a guidance program on public health could be organised to bring students out of traumatic experiences. This shows that the statement "guidance program on public health could be organised to bring students out of traumatic experiences" also recorded highest mean (M=3.23, SD=.75) indicating students agreement as another way to improve the state of psychological wellbeing of SHS students in the Cape Coast Metropolis during the peak of the COVID-19. Furthermore, the majority of the students agreed that talking to experts in the school to have more information about COVID-19 can improve the psychological wellbeing of SHS students in the Cape Coast Metropolis. It is shown that the statement "I will talk to experts in the school to have more information on COVID-19 pandemic" indicates students' agreement as a way to improve the psychological wellbeing of SHS students (M=3.15, SDV=.77)

Concerning the ways to improve the psychological wellbeing of SHS students in the Cape Coast Metropolis, all the respondents agreed to the ways to improve the psychological wellbeing of students during the peak of the COVID-19. Most importantly, majority of the students agreed that they should not let their feelings interfere too much with their daily activities. Again, the student agreed that they were faced with a lot of traumatic experiences, hence, a guidance program on

public health could be organised to bring students out of traumatic experiences. Also, majority of the students agreed that talking to experts in the school to have more information about COVID-19 could still improve the psychological wellbeing of SHS students in the Cape Coast Metropolis. The results of this study corroborate the findings of Padrón et al.'s (2021) investigation on the effects of COVID-19 on mental health and According to self-perceived changes in mental health, students had significant psychological issues during the lockdown, with younger and female students reporting greater rates of emotional difficulties than older and male students, respectively. The primary causes of psychological suffering were limitations in social interactions, deteriorating interpersonal conflicts, and academic prospects. Regarding coping mechanisms, they suggested that daily routines (work, play, exercise, and sleep) and reframing techniques both mitigated the negative impacts of stresses on mental health.

Research Question Four: What are the Ways to Improve the State of Social Wellbeing of SHS Students in the Cape Coast Metropolis During COVID -19?

The purpose of this study subject was to find out what respondents felt about ways to improve the social welfare of SHS students in the Cape Coast Metropolis. In their responses to items 32–36 of the questionnaire, students discussed ways to improve the social welfare of SHS students in the Cape Coast Metropolis. The student data was analyzed using frequencies and percentages in addition to means and standard deviations. I marked strongly disagree and disagree as "disagree" and strongly agree and agree as "agree," signifying "A" and "D," respectively, to make the analysis's conclusions simpler to understand and communicate. The mean and

standard deviation are used as a decision rule in the study; a mean score of 2.5≤M ≤ 4.0 indicates agreement with the perceived impact of COVID-19 on students' psychological wellness, while a score of 1.0≤ M ≤ 2.4 indicates disagreement. The results are presented in Table 8.

Table 8: Ways to Improve the State of Social Wellbeing of SHS Students in the Cape Coast Metropolis During COVID-19 N=378

Statement	A	D	M	SDV	Decision
Suspension of sporting and entertainment activities should be reviewed to help students have fun	350 (92.6)	28 (7.4)	3.61	.75	Agree
Information on COVID-19 should be pasted in classrooms and notice boards around the school.	351 (92.8)	27 (7.2)	3.51	.73	Agree
Management of the school should review the contact hours in the school	319 (84.4)	59 (15.6)	3.23	.82	Agree
Food prepared for students should be nutritious enough to cater for their health needs	363 (96.0)	15 (4.0)	3.81	.56	Agree
Educational tours such as excursions should be organised for students to help release them from anxiety.	346 (91.6)	32 (8.4)	3.61	.74	Agree

Source: Fieldwork, (2022)

The frequency distribution, percentage, mean, standard deviation, and strategies to enhance the social welfare of SHS students in the Cape Coast Metropolis are displayed in Table 8. Table 8 shows that 363 (96.0%) of the students concurred that the food they were served should be nourishing enough to meet their needs. This implies that the students agreed that the prepared food being nutritious enough can cater for their health needs which can improve the social wellbeing of SHS students in the Cape Coast Metropolis. Hence, the statement " food prepared for students should be nutritious enough to cater for their health needs" recorded the highest mean (N=378, M=3.81, SD=.56).

Also, the majority 351 (92.8%) of the respondents agreed that information on COVID-19 should be pasted in the classrooms and the notice board around the school. This means that the majority of the students view pasting the information on COVID-19 in the classrooms and the notice board could serve as one of the ways to improve the social wellbeing of students. Therefore, the statement that information on COVID-19 should be pasted in the classrooms and notice boards recorded the highest mean (N=378, M=3.51, SD=.73).

Furthermore, 350 (92.6%) of the respondents agreed that the suspension of sporting and entertainment activities should be reviewed to help students to have fun. This infers that the most of the students were not happy about the ban on sporting and entertainment activities since they hindered their fun-making. Hence, the statement that the suspension of sporting and entertainment activities be reviewed serves as one of the ways to improve the social wellbeing of students (N=378, M=3.61, SD=.75).

Finally, regarding the ways to improve the social wellbeing of students during the COVID-19, the study revealed that students agreed that the food prepared for them should be nutritious enough to cater for their health needs which can improve the social wellbeing of SHS students in the Cape Coast Metropolis. Also, students agreed that information on COVID-19 should be posted in the classrooms and the notice boards which could serve as another way to improve the social wellbeing of students. Lastly, students agreed that the suspension of sporting and entertainment activities be reviewed which could also serve as another way to improve the social wellbeing of students in the Cape Coast Metropolis.

Wendy and colleagues (2020) report that Canadian teenagers filled out online questionnaires and answered questions about stress related to the COVID-19 pandemic, loneliness and depression, time spent with family and friends virtually, academic work, social media use, and physical activity. According to the findings, teenagers are extremely frightened about the COVID-19 pandemic, with schoolwork and peer interactions being of special concern. Stress from COVID-19 was linked to higher levels of sadness and loneliness, particularly in teenagers who use social media more often. For teenagers with depressive symptoms, family time and academic work were associated with lower levels of depression, but spending more time digitally communicating with friends during the pandemic was associated with higher levels of depression, independent of COVID-19 stress (Wendy et al., 2020).

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Introduction

This chapter presents the study's summary, with findings and suggestions gained from it. Additionally, recommendations for additional research as well as the study's contributions to knowledge have been provided.

There are two sections to the study summary; the first portion covers the research's overview, while the second part focuses on the main conclusions. University Practice SHS, Wesley Girls SHS, Mfantsipim SHS, Efutu SHS, and Academy of Christ the King SHS were the five schools chosen for this study, which examined the psychological and social welfare of SHS students in the Cape Coast Metropolis during the COVID-19 epidemic. To direct the investigation, a survey of the theoretical, conceptual, and empirical literature was conducted. Albert Bandura's theory of self-efficacy served as the foundation for the study in order to pinpoint and comprehend the elements that contributed to the students' improved behavior. Information about the state of the phenomenon was gathered using a descriptive survey approach.

Every senior high school student in the Cape Coast metropolis was part of the targeted group. Out of 8,876 students in form 2 and 3 at the University Practice SHS, Mfantsipem, Wesley Girls, Efutu, and Academy of Christ the King SHS, 378 SHS students in the Cape Coast Metropolis were chosen as the study's sample based on their eligibility. Data was gathered from respondents using a questionnaire that had two open-ended and thirty-six closed-ended questions. Checkmark answers

about the psychological well-being of senior high school students in the Cape Coast Metropolis were supplied by the closed-ended questions. The condition of senior high school students' social wellbeing during COVID-19, the methods to enhance the psychological and social wellbeing of SHS students in the Cape Coast Metropolis, and the state of social wellbeing of SHS students in the Cape Coast Metropolis during COVID-19. Students were given the chance to share information about their personal experiences with open-ended questions about how to improve the psychological and social wellbeing of SHS students in the Cape Coast Metropolis, which the researcher was unable to record in the questionnaire. Additionally, using the questionnaire gave them more security that any information they submitted would remain anonymous. Descriptive statistics such as frequencies, percentages, mean and standard deviation were calculated to analyze the quantitative data for this study. These were done using the Statistical Product for Servces Solution (SPSS Version 21.0).

There are four objectives and four research questions and these were analysed in this study as followed:

1. Objective and research question one which sought to investigate the state of psychological wellbeing of students was analysed using the frequency, percentage, mean and standard deviation.

2. Objective and research question two sought to investigate the state of social wellbeing was analysed using the frequency, percentage, mean and standard deviation.

3. Objective and research question three which investigated ways to improve state of psychological wellbeing was also analysed using the frequency, percentage, mean and standard deviation.

Further, objective and research question four which investigated the ways to improve the state of psychological wellbeing was analysed using the frequency, percentage, mean and standard deviation.

Summary of Key Findings

The following key findings emerged from the study:

Research Question One: what are the state of psychological wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic?

Regarding the psychological health of SHS students in the Cape Coast Metropolis during the COVID-19 epidemic, the study found that 80.9% of those surveyed did not have nightmares upon learning about the virus. However, when acquaintances or family members contracted COVID-19, 70.9% of the respondents said they started to worry. However, when they learned about the first incidence in the Cape Coast Metropolis, 59.3% of the respondents disputed that they were unable to learn.

Research Question Two: what are the state of social wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic?

Regarding the influences of COVID-19 on the state of social wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic, the study revealed that 85.2%, 88.4% and 83.3% of the respondents missed parents' visits, entertainment, and sporting activities respectively, since all these events

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were suspended. They added that the suspension of these activities denied them of socialization.

Research Question Three: what are the ways to improve the state of psychological wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic?

Concerning the ways to improve the state of psychological wellbeing of SHS students in the Cape Coast Metropolis, all the respondents agreed to the ways to improve the psychological wellbeing of students during the peak of COVID-19. Most importantly, 90.7% of the students agreed that they should not let their feelings interfere too much with their daily activities. Again, 89.7% of the students agreed that they were faced with a lot of traumatic experiences, hence, guidance programmes on public health could be organized to relief students out of traumatic experiences. Also, 84.1% of the students agreed that talking to experts in the school to have more information about COVID-19 could still improve the psychological wellbeing of SHS students in the Cape Coast Metropolis.

Research Question Four: what are the ways to improve the state of social wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 pandemic?

Finally, regarding the ways to improve the state of social wellbeing of students during COVID-19, the study revealed that 91.6% of the respondents agreed that educational tours such as excursions should be organised for them to relief them from boredom. Also, 92.8% of the respondents agreed that information on COVID-19 should be posted in the classrooms and the notice boards to serve as

another way to improve the social wellbeing of students. Lastly, 92.6% of the students agreed that the suspension of sporting and entertainment activities be reviewed to change life for better in schools.

Conclusions

From the findings of the study, it could be concluded that psychologically, most students allowed their feelings to interfere with their daily activities since it was their first-time experiencing a pandemic. It is perceived that since majority of respondents had already heard of the COVID-19 before its first case in Ghana, it could not alter their sleep and they did not experience nightmares.

Again, it can be concluded that students lacked emotional attachment since parents were not allowed to visit them. Furthermore, students needed alternative sources of socialising or entertaining themselves. Socially, students needed experts to talk to due to the social protocols. Further, since students were handicapped in getting information about COVID-19, they became more worried. Finaly, the findings of the study revealled that COVID-19 altered the state of social wellbeing of the students since most of the social activities were suspended.

Recommendations

The following recommendations are made based on the findings of the study.

1. School counsellors should organize programmes for the students to deal with emotional and psychological issues,since students were worried about the state of their relatives being infected by COVID-19,

2. Ministry of Education and Management of schools should develop strategies that will ensure active parental involvement in its activities to cater for social needs of students.

3. Also, school authorities should have alternative sources of entertaining students, like video shows to make them socially active.

4. It is recommended to school authorities to organize public health programmes for students to calm down their traumatic experiences.

5. Finaly, school authorities should keep students updated on information on issues and other relevant information in order to cater for their psychological and social wellbeing challenges.

Suggestions for Further Research

The main purpose of this study was to investigate the state of psychological and social wellbeing of SHS students in Cape Coast Metropolis. The researcher could not extend the study to investigate the aftermath effect of COVID-19 on the state of cultural and moral wellbeing of SHS students. For this reason, the researcher recommends that scope of further similar studies be expanded to cover any of the sixteen regional capitals across the country.

Implication of the Study to Counselling

Many were the discoveries from my study and thereby propose the underlisted impliccations for counselling.

1. Counsellors should understand that most students experienced a state of psychological despair and should expect an increase in the demand for counselling.

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2. From the study it was observed that most students not getting much information became worried,this present an avenue for counsellors to organize programmes that will feed students with more information that will stabilize them emotionally.

3. That, environmental factors can affect the psychological and social well being of students.

4. That counsellors should be mindful of comorbidity; that is a state where combine factors such as psychological and social forces leading to academic performanceof students.

5. That counsellors should be mindful of the importance of mental resilience in the life of a student in his/her academic endeavour.

6. Counsellors should understand that good mental health leads to a healthy body.

Contributions of the study to knowledge

1. This study reaveled the state of psychological wellbeing of students during the covid 19 pandemic.

2. Also, the study indicated the state of social wellbeing of students during the covid 19 pandemic.

3. Further, this study revealed the improvement of psychological and social wellbeing of SHS students during the pandemic.

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APPENDICE

APPENDIX A

Questionnaire for Students

This study is being conducted toexamine the state of Psychological and Social Wellbeing of Senior High School (SHS) students in the Cape Coast Metropolis during the COVID-19 pandemic in Ghana. Your assistance is therefore being sought in this study and your frank response to items on the questionnaire will be greatly appreciated. You are assured that your responses will be treated with outmost confidentiality and would be used solely for academic purposes. Thank you.

SECTION A: Demographic Data of Respondent

For items 1 – 6 please tick the boxes [√] that apply to you.

1. Gender   Male [   ]   Female [   ]

2. Age Range below 13   [   ] 13-15 [   ]   above 15years [   ]

3. Status : Boarding [   ]   Day [   ]

4. Form: Two [   ]   Three [   ]

5. Do you have any knowledge about COVID-19   Yes [   ]

   No [   ]

6. If " Yes" indicate what causes COVID-19

   Bacterial [   ]

   Fungi   [   ]

   Virus   [   ]

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These sections (B, C, D and E) are designed to solicit for data information on the influence of COVID-19 on the psychological and social wellbeing of SHS students in Cape Coast Metropolis and ways to improve them. Please read from items 7-36 and carefully tick in the appropriate box [√] SA=Strongly Agree (4), A=Agree (3), D=Disagree (2), SD=Strongly Disagree (1) the extent to which you agree or disagree to the statements.

SECTION B: To solicit information on the state of Psychological Wellbeing of SHS students in the Cape Coast Metropolis during the COVID-19 Pandemic

S/N	Statement	S A	A	D	SD
7	I could not learn when I heard of the first reported COVID-19 case in the Cape Coast Metropolis.				
8	I was scared when I heard that a relative or friend was infected by COVID-19				
9	I was satisfied with checking of temperature regularly				
10	I was satisfied with wearing of nose mask continuously				
11	I was satisfied with washing of hands regularly				
12	I could not sleep well during the peak of the COVID-19.				

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13	I was scared at the quarantine of a mate during the peak of COVID-19.				
14	I was sad when my relative or friend was infected with COVID-19.				
15	I was worried about self-quarantine after class.				
16	I felt bored when school authority instructed students to ensure social distancing in the classroom.				
17	I used to have nightmares when I hear news about COVID-19				

SECTION C: To solicit information on the state of Social Wellbeing of SHS students in the Cape Coast Metropolis During The COVID-19 Pandemic

S/N	Statement	SA	A	D	SD
18	I was not happy when inter-school sporting activities were suspended due to COVID-19, because it denied me the opportunity to socialize.				
19	I was afraid to interact with mates at the peak of COVID-19 pandemic due to infection.				

20	I missed daily information I used to get from morning assemblies due to COVID-19.				
21	I missed the school's entertainment programmes due to COVID-19 pandemic.				
22	I missed church services during the peak COVID-19.				
23	I missed "visiting of my parents in school" during the peak of COVID-19.				
24	It was difficult for me getting close to my friends or mate at the peak of COVID-19.				

SECTION D: To solicit information on the ways to improve the state of psychological Wellbeing of SHS students in the Cape Coast Metropolis.

S/N	STATEMENT	SA	A	D	SD
25	Guidance programmes on public health could be organized to bring students out of the traumatic experiences during COVID-19 pandemic				
26	I should not let my feelings interfere too much with my daily activities.				

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27	I will talk to experts in the school to have more information on COVID-19 pandemic.				
28	I will talk to the school counsellor about my feelings of COVID-19 pandemic.				
29	I can have quality sleep by reading books.				
30	I will chat with friends whenever I feel depressed.				
31	I will read novels to release boredom				

Others (specify)

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SECTION E: To solicit information on the ways to improve the state of social wellbeing of SHS students in the Cape Coast Metropolis.

S/N	STATEMENT	SA	A	D	SD
32	Suspension of sporting and entertainment activities should be reviewed to help students have fun.				
33	Information on COVID-19 should be pasted in classrooms and notice boards around the school.				

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34	Management of the school should review the contact hours in the school				
35	Food prepared for students should be nutritious enough to cater for their health needs.				
36	Educational tours such as excursions should be organized for students to help release them from anxiety.				

Other specify …………………………………………………………………

Thank you for your cooperation