Nurses' Role in School Health Programme

By Miss Amravathy Bachu

The School Health Programme is very essential in the Indian School system. The Public Health Nurse has a great role to play in this programme. She is responsible for the school and home supervision of a very large population of school children of the age group from 6-16 years. Surveys carried out in different parts of the country indicate that sickness and death rates among these are the highest in the world.

History

The School Health Programmes were first initiated in the year 1909. Almost every state had some form of school health programme but these programmes were limited to only a few schools. Environmental sanitation was absent in these schools. This matter was reviewed by the Joint Committee of the Central Boards of Health and Education in 1941 and by the Health Survey and Development Committee in 1946. The Bhore Committee was appointed by the Government of India (known as British India) in October 1943, to make a survey of the existing position with regard to the health conditions and health organization. The Bhore Committee surveys carried out in different parts of the country have indicated a high incidence of sickness and deaths among children. This committee recommended that the School Health Programme should consist of detection and treatment of defects, creation and maintenance of hygienic environment, improvement of nutrition, introduction of physical culture and health education, co-operation between medical officer and school staff in promoting health and general welfare.

In 1953, the need for medical inspection of schools and colleges as well as feeding programmes had been reiterated by the Secondary Education Committee. In the year 1960, the Government of India appointed a committee to improve the present standard of health and nutrition of school children. The Government of India entrusted the Primary Health Centre and other organizations with conducting a comprehensive and realistic school health programme in association with the local education administration. Several recommendations were made by the committee to improve the health of school children, for example provision of immunization facilities, sanitary facilities, provision of mid-day meals and raising of school kitchen gardens.

Good Health Programme

The School Health Programme describes the health responsibilities of the schools. It requires the cooperation and co-ordination of school staff, parents, members of departments of health, private practitioners and representatives of community health agencies. For proper utilization, the School Health Programme is divided into three inter-related parts viz.,

(i) Health Education
(ii) Healthful School Environment
(iii) School Health Services.

Health Education

Health Education facilitates favourable learning experiences of children, to understand attitudes and conduct relating to their own health and of their community. This should be planned and conducted periodically by teachers, nurses, health educators and physicians.

The health education should focus on anatomy and physiology, sex education, personal and environmental hygiene, and the factors which affect the health. Malnutrition is common among children, and it is always associated with poverty and the parent's lack of knowledge about balanced diet. Nutrition is one of the major factors in growth and development and plays a great role in strengthening the W.H.O. definition of health i.e., "Health is a state of complete physical, mental and social well-being, not merely the absence of disease or infirmity."

There are very limited facilities available to test the average weight of children. Some children are genetically either big or small in build. The following formula is feasible and practical especially in rural areas where health facilities are limited or completely absent:

1. Determination of average weight of children 3-8 years of age. Age (in years) x 2 = Weight (Pounds).
2. Determination of average height of children 3-8 years of age. Age (in years) x 2 = Height (in inches). (19-32).

Health education should motivate children to develop good attitudes towards personal hygiene—choosing and eating proper foods, washing of hands, daily bath, and proper use of latrines, etc. Parents, faculty and children should be involved in the health education programme.

Health School Environment

The School environment should be safe and healthy. For example children should be protected

Miss Amravathy Bachu

MAY 1970, VOL. LXI, NO. 5

141
at road crossings, the playground should be free from broken glasses and wet spots after rain, etc. Providing an environment conducive to healthful living is a legal and moral responsibility of the school. School authorities should assume responsibility for supplying safe drinking water, adequate water supply in the school, proper sewage disposal, sufficient toilet facilities, ample soap and towels, proper lighting, good housekeeping facilities, etc.

Provision should be made for a school dining room. It should be quiet and ample in size with adequate seating facilities. Additional toilet and handwashing facilities should be provided.

School Health Services

School Health Services are to be carried out by the physicians, nurses, dentists, and others to appraise, protect, and promote the health of the school children. They should encourage and facilitate learning and provide proper medical examination. These should be planned according to the individual pupil needs. Counselling services should be offered to pupils, parents and others concerned with the appraisal of the child. Disabled pupils should be identified and assisted appropriately in regard to treatment, rehabilitation, etc. Emergency services should be available for injury or sudden illness in the school.

Periodic health examinations should be provided. All the children should have an examination upon admission and then at intervals of at least 3-4 years. Attention should be given to emotional problems and behavioural disorders, as they have a direct effect on the scholastic performance of the child. Early diagnosis and supervision help to prevent delinquency and other emotional illnesses. Satisfactory follow-up should be provided at school or at home by the teacher, nurse, or social worker.

The majority of schools in India have no provisions of a school health nurse or facilities to attend for school emergencies. Gandhi Gram, a training Centre in India, has adapted a few practical steps to fill the place of the school nurse. They are very applicable and easily provided. They have a training programme for one and one-half months to prepare Auxiliary Nurse Midwives to function effectively as school nurses. They are offering another programme for school teachers which is of only one week duration to develop skills in screening, treatment for minor ailments, and health education. They are also adapting a practical and feasible environmental sanitation for example, chlorination of drinking water, involvement of children in maintenance of environmental sanitation and construction of safe privies. They have also launched a successful mid-day meal programme. Tuberculosis is another prevalent communicable disease, and children are more susceptible to this. All children in the school system as well as teachers, clerks and everyone who comes in contact with the children should be adequately examined for tuberculosis.

Health Suite

Each school should be provided with a health suite, where the pupils can get treatment for minor ailments, medical examinations, rest, and conferences involving the parent, teacher, doctor and nurse.

This health suite should have a dressing room where the pupils can get their treatments. Separate toilet facilities should be provided for boys and girls who are on a rest schedule. A place for health service personnel, records and equipment should also be provided. The health suite should be in close proximity to the administrative suite. Provisions should be made for audio vision and dental screening. It should have a maximum amount of natural light.

The Public Health Nurse

School nursing is one of the specialties of Public Health with emphasis on prevention, control and care of illness, as well as total family and community health. The competent school nurse practitioner requires basic preparation in professional nursing and additional educational preparation in school health will enable her to function effectively.

Responsibilities

A. Organization and implementation of the school health programme.

The nurse has a leadership role in planning the essential elements of the school health programme in cooperation with the administrative staff, school personnel, representatives of the medical profession, and appropriate community agencies.

The School nurse:

1. Participates in the development and revision of objectives and the formulation of standards, policies and procedures.
2. Acquaints the administration and other school personnel with health problems and resources in the school, home, and community.
3. Serves as a consultant to the administrator, parents and teachers in regard to the health needs of pupils.
4. Develops and maintains records and reports necessary to carry out activities of the school health programme.
5. Utilizes records, reports and statistical information in planning and evaluating various aspects of the school health programme.
6. Assists the administrator in planning for coordination of the school health programme with the community health programme.
7. Assists in coordinating activities of advisory groups such as parent-teacher organizations or school and community health councils.
8. Assists in planning the annual budget for the school health programme and recommends facilities, equipment and materials necessary to carry out programme activities.

B. The Nurse—An Educator

The school provides the proper environment for effective learning, and education is a powerful motivational factor. A solid core of education for health is provided on an individual basis by counseling. One of her major teaching functions is the provision of related health learnings and experiences. She can assist teachers to develop a health consciousness by inservice education.

(Cont'd on page 173)