



The Role of the School Health Programme in Public Health Practice

BY

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THERE are various reasons why a separate school health programme is essential. In brief, these points can be listed as follows :

- (i) A major segment of the population can be covered at a time.
- (ii) School population is a controlled population and hence the implementation as well as the evaluation of the health programmes, is easy.
- (iii) The child is constantly undergoing physical, mental, emotional and social changes and the need for health guidance is maximum.
- (iv) Preventive measures taken at this stage may be more easy and may have beneficial life-long effects.
- (v) It is a period of stress, strain and contagion.
- (vi) School provides the best forum for the dissemination of knowledge.
- (vii) National interest—a healthy child means healthy nation.

If the modern concept of Public Health is taken in context with the school health programme the programme would aim at promotion, protection and restoration of health of the school-going population. The objective of school health service may be summarised as follows :

- (i) Child must always be kept fit to receive education.
- (ii) Observation as to whether normal, physical and mental growth is progressing normally.
- (iii) To detect any defect or deviation from the normal, to seek cause of, and to achieve correction of all health.
- (iv) To inculcate in the children the practice of good health habits from the childhood.

Health Promotion activities in a school health programme comprise health education, physical education and better nutrition.

Health Protection activities comprise periodic health examination of school children, control of communicable diseases, immunisation and sanitary inspection of the schools.

Health restoration activities comprise treatment of diseases and correction of defects.

Role of School Health Programme in Public Health Practice

The ultimate objectives of all public health practice carried out in the community at large or with special groups like factory workers, pregnant mothers or school children are promotion and maintenance of health, and the prevention of disease and prolongation of life. The objectives coincide with today's definition of public health.

Promotion of Health and School Health Programme

The three component parts of health promotional activities in school health programmes are health education, physical education and better nutrition.

The aim of health education to the school-going population is to instruct the children and youth of the community so that they may conserve and improve their own health ; to inculcate in them the habits and principles of hygienic living from early childhood ; and to influence parents and other adult members of the community, through the health education programme for the children, in adopting better habits and attitudes. Thus the school may become an effective agency for the promotion of the social aspect of health education in the family and the community, as well as in the school. This last point is important in relation to public health education programmes in the community.

Physical education is another very important part of health promotional activity of the school health programme. The physical education aims at the correction of the defects as well as for the best possible physical development and efficiency. Early detection and correction of physical defects will have effect on the health of the individual child, who is a member of the community. Thus the physical education of school children have positive repercussions on the health of community as a whole.

The nutrition programme is another very important part of the school health programme. There are two aspects of this programme. One is direct in the form of providing some type of school lunch ; the other one is indirect in the form of educating them, and through them their parents, in the utilisation of common food-stuffs available to them. Through this programme the general food habits of the community may be changed

along scientific lines for the betterment of nutrition in the community.

Prevention of Diseases and School Health Programme

Health protection activities in a school health service consist of periodic health examinations, control of communicable diseases and sanitary inspection of schools.

The periodic health examination in a school health service programme includes the examination of all the new entrants in the school, periodic examination of old students, as well as the examination of the teachers and the servants. Such examinations help in the early detection of diseases and defects and are very important in the prevention and treatment of diseases and disabilities. The examination of school teachers and the servants also prevents spread of infection in the schools, and from there to the community.

Control of communicable diseases is the most important part of the school health service programme. There are four important components of the communicable diseases control programme. These are: immunisation, detection of cases, care of patients and the control of contacts. There are certain diseases which are considered to be infections of childhood and these can be best tackled through the agency of school health service programmes. Proper immunisation, control of contacts, detection of cases (case finding and proper disposal of cases) will help in checking the spread of infection in the community. For this we can take the example of small-pox, poliomyelitis, tuberculosis and others.

Sanitary inspection of schools is important. Latrines, bath rooms, urinals etc. should be kept in a good

sanitary condition. Safe drinking water must be provided. Good habits formed in children generally have a lasting effect. Therefore the maintenance of a good sanitary environment in the school has an influence on the general community.

Health restoration services in the form of treatment of diseases and correction of defects is part of a school health service programme. Early detection of diseases and prompt treatment of the child in school clinics is of benefit to the child as an individual member of the society, but is in no less way beneficial to the parents and the community. The early detection and correction of defects is also important from the angle of the individual child who is soon to be an adult member of society.

The mental health service is another very important part of school health programme. In the recent years the realisation of mental diseases as a public health problem, is engaging attention. Mental health services organised as an integrated service with the social health service programme, will play a very important role in future public health programmes.

From these considerations it is clearly evident that the school health services is a very important part of the whole programme of public health, the preventive and health promotive activities undertaken during the early stages of life will have a lasting and beneficial effect on adult life. It is a common saying that "the child is the father of the nation". Therefore a healthy child means a healthy nation. If the school health programme is well organised, we will have a healthy nation with minimum of public health problems. Thus the school health programme has an immense role to play in public life.

Letters to the Editor

Madam,

I am overjoyed to read the STOP PRESS in the *Nursing Journal of India*, February issue.

My heartiest congratulations to the TNAI and the Andhra Pradesh Branch. I trust that other governments will take the same view and give recognition to TNAI and the branches.

J.M. BENJAMIN.

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Madam,

Congratulations and very special thanks for an excellent issue this month (January). Reading this *Journal* no one could say "there is nothing in the *Journal*". It is not only full of interesting and informative articles, but the Editor's Diary supplies information to bring us up-to-date; it also tells readers what to

expect, and what they should do to participate in the *Journal*.

You gave us a wonderful poem under "From the General Secretary's Desk"; and words of encouragement, as well as an appeal to all TNAI Members to work harder for our beloved Bharat.

A. CHACKO.

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Madam,

I read the *Journal* with great interest and look forward to its arrival every month. For registered nurses it has much to offer but I regret that there is nothing in it that meets the needs of the auxiliary nurse-midwives or midwives.

In the *Journal* of July, 1962, I read the very interesting article on Radiation Therapy by Dr. K.N. Saxena. It gave a good description

of management and care of the skin and nurses must have found it very helpful, but what auxiliary nurse-midwife or midwife would read, or could understand, it? I could mention many other excellent articles that have appeared in our *Journal*, but if the *Journal* is to benefit TNAI members, then articles should be included to meet all needs.

I have a suggestion to make. Will you write up some interesting articles to help the auxiliary nurse-midwives and midwives in their daily work? Midwifery case studies will be very welcome and will be appreciated.

I shall also try to find useful material for the *Journal*.

PREM LATA GUPTA
Nandgarh.

(With about 40,000 midwives in the Country, perhaps, a few might be encouraged to write up some of their interesting cases?—Editor.)