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# PUBLIC HEALTH

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## Public Health Nursing in Schools

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Public health nursing in schools is concerned with individual, environmental and health education services to the school-age child. School health is an integral part of every well rounded health and education program. The school-age child is one member of a family and community so that basically, all aspects of health programs point toward the development of a safe environment and maintenance of health in the home, school, at work and in the village as a whole. The school health program may be a part of the generalized health scheme or it may be specialized. Approximately 12,000,000 children attend schools in our cities, towns and villages. It is essential, therefore, that every public health nurse and health visitor should review her program and find time to help meet the health needs of these children.

The reader is urged and advised to study the physiological, emotional and social changes that take place during the school-age growth period so that she will have a working knowledge and an understanding of the needs and problems of this age group.

This brief review of the broad subject of school health is designed to stimulate nurses and health visitors to review their programs of work and make necessary revision to include services to the school-age child. The subject is divided into three parts, namely :

1. The need for a school health program.
2. Organization and administration.
3. Functions of the public health nurse in the school health program.

**1. The need for a school health program.** Needs for a health program

are usually determined by making a survey of individual situations. Fundamental facts are essential to demonstrate the need and to build a program of action. Survey facts provided

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justification for expenditures. The survey data should give answers to questions such as : number of schools ; number of children in each school by age, sex and grade ; location and road condition leading to each school ; environmental sanitation to determine water supply and protection ; disposal of human waste ; light ; dust controls ; cleanliness ; play facilities ; and what and how health is incorporated in the curriculum.

The W.H.O expert committee on school health listed the following factors as health needs that are basic to all school-age children :—

(a) *Growth and Development.* Growth and development of the child during these formative years is continuous and constant. The child, parents, grandparents, teachers and health workers alike need fundamental knowledge and appreciation of the physical, mental, emotional and special changes that take place during this period so that wise guidance may be given as indicated.

(b) *Stress, Strain and Contagion.* Communicable diseases control for the children and community may be centered about the

school health program. Most of the communicable diseases in India can be controlled by providing safe water, and by safe disposal of human waste. When the people understand that these two factors, coupled with necessary immunization and eradication of flies, mosquitoes, and lice will save them from sickness they will find ways and means of protecting themselves. The people need to know the truth about these things and they need your technical skills to help use what

they have at hand to the best advantage and to get assistance from other resources.

The degree of stress and strain that the child experiences in his adjustment to groups, to competition, to meeting and getting along with strangers, elders and to disciplinary control, and to other new experiences differs with individual children.

- (c) *Educational Responsibilities and Opportunities.* Health is a major objective of every sound educational and public health program. Health teaching should be woven into every aspect of the everyday classroom teaching.

"When a child is educated in matters of health, he may influence his parents and family in an advantageous manner; and when he becomes an adult and raises a family, it may be

hoped that his family will have better knowledge on which to build good health....."

Health inspection and health examinations are essential to find early signs and symptoms of sickness and defects. The teacher is a key person to find early signs of trouble as she is with the child everyday and is able to see change in the physical, mental and emotional behaviour of the children under her care. Follow-through to get defects corrected is even more important than "finding" the "cases" This is usually given to the P.H.N. as one of her prime responsibilities.

This series of articles was commenced a year ago with the object of stimulating interest in this all important subject. It has been our aim to present scientific facts, to offer practical suggestions to teachers and supervisors for the application of the principles of Public Health, and to encourage all nurses to study and keep up with present day trends. When opening this section we invited comment and suggestions but so far we have not succeeded in rousing any interest. Is it possible that these articles are falling on barren ground?

LAKSHMI DEVI  
Editor.

## 2. Organization and Administration of a Public Health Program in Schools

The administration of the school health program varies in different States and areas from training teachers to do the health work in schools, to the employment of a full-time nurse by the school, to an incorporation of school health into the generalized

public health program. The responsibility for a school health program is a joint responsibility of the school and the public health services. The school master is responsible for all activities within the school system and so he must approve and participate in every aspect of the school health program. Since school health services may be a relatively new idea in some areas or schools, it is suggested that the P.H.N. and H. V. should take the following steps in organizing the program:

- (a) Study the school health conditions in your area and write a report of your findings.
- (b) Analyze your own program and schedule of work with a view of

scheduling a certain portion of your time to the school.

health program may be listed as follows :

- (c) Discuss your report of school health situation and problems with your supervisor and/or health officer. Ask for sanction to begin work in one school or in the schools in one village as a demonstration and to gain experience. (Have your facts about the school and the children and have your proposed plan set down clearly before your conference).

- (d) Discuss the proposal with the head master, after you have administrative sanction, as he may have to discuss the matter with his administrative head before work can begin. If and when sanction has been obtained, you are ready to discuss a program with the head masters and the other teachers. Find out what they feel is the main health problem and what they think can be done about it — it may be nutrition, scabies, pediculosis, acute and chronic eye conditions, cleanliness, or some sanitary problems, or they may have accepted the situation and feel that there is no special problem in the school.

Planning the health program is a joint responsibility of teachers, parents, doctors, nurse or health visitor and sanitarian and members of the village administration. This group may form itself into a health council or health committee that will be responsible for adjusting and formulating policies and for finding ways and means of dealing with problems. The nurse must work closely with the head master and his staff in respect to health work in the schools.

Some general principles of organization and administration of a school

- (a) The Ministry of Education and the Ministry of Health are both responsible for the health of the school child and his environment.
- (b) Public health nursing in school is an integral part of the educational and health service programs in schools and the community.
- (c) The head master is responsible for all activities in the school.
- (d) The P.H.N. becomes a co-operative member of the school staff when she begins to work in the school and, as such, she should attend teacher meetings.
- (e) The head master should provide for an integration of health in the curriculum.
- (f) The nurse or health visitor working in schools should have special preparation through staff education and refresher programs of study.
- (g) In the field of nursing as in other professional field supervision should be provided by a member of the professional group.
- (h) Adequate funds should be available to administer the school health program as an integral part of the total school program.
- (i) Provision for evaluation of the school health program in terms of changed health habits of the children, progress of the children after correction of physical defects, nutrition etc., should be made at regular intervals.
- (j) Cumulative school health records are essential to the program.

A school health goal should be set and everyone should strive individually

and together to reach the goal. Plans should be made to meet the most urgent needs first and then gradually work toward reaching the higher goals that will take a much longer time to attain.

**3. Functions of the public health nurse and health visitors in the school health program.** The public health nurse and health visitor serves as a liaison worker between the school, home, and community. Her function is to interpret, to help plan, and to render individual nursing and first aid services as indicated by the situation, by the existing program and by the facilities and personnel available. She is a member of a team that includes herself, the doctor, the teachers, the parents and the children.

1. *School-home Community relationships.* Of all members of the health team, the nurse has the most intimate knowledge and understanding of the health conditions, attitudes and superstitions, and health habits in the home. Her main job is to interpret the home conditions to the school and the school health program to the family. This two-way process helps influence the development of the child.

By helping the family and the people in the community to meet safety standards of personal health and environmental sanitation, the nurse helps bridge the gap for the child who learns one thing in school and practices another at his home.

2. *School Health Services.* School health services include the following:—

- (a) Periodic health examination of children in specified grades and others as referred by the teacher.
- (b) Screening the children for signs of defects — weights, measurements, visual and hearing and general conditions.
- (c) Control of school environment by advising and helping the authorities to attain safe water, proper latrines and hand wash-

ing facilities, good light and ventilation and recreational facilities.

- (d) Control of communicable disease by providing vaccination for small pox and other immunizations as indicated.
- (e) Interviewing parents, teachers and children and help secure correction of nutrition and physical and emotional health problems.
- (f) Demonstration to teachers how to detect departures from normal growth and development, how to weigh and measure, how to keep health records, how to test hearing and visual ability.
- (g) Demonstration of first aid and emergency measures to at least one teacher in each school.
- (h) Visiting the homes of children reported to be ill and demonstrate nursing care as indicated.
- (i) Helps plan modified school program for children handicapped with cardiac, orthopedic, visual and other health problems.
- (j) The nurse qualified to teach may conduct classes in the principles of healthful living, child care and care of the sick. The Red Cross courses and St. John's Ambulance Programs of study in Home Care of the sick are offered in many of the teacher training colleges and in some high schools. Isolated "talks" by the nurse in schools are questionable as they are seldom correlated with classes except in the instance of preparation for physical examination and inspections. The nurse could or should always inform the children about the examination so that they will know *what* to expect and why the examinations are made.

(k) Health education — The Nurse should acquaint herself with the health teachings in the school text-books and in the classroom. She should help teachers with demonstrations and encourage them to utilize activity assignments and experiments as learning experiences. For example: nutritional deficiencies are among the most important health problems among children of all ages. This is sometimes due to lack of sufficient quantity of foods but it is more often due to lack of quality foods. Quality foods are easily demonstrated by taking two rats, chicks, birds or guinea pigs and feed one on the diet which the children are accustomed to eating and add to the other diet the right amount of the different vegetables and minerals. The experimental animal will show vitamin A deficiency within three weeks and weight differences within a very short time.

Posters, charts and exhibitions should be made by the children to illustrate principles of healthful living.

The foregoing section on administration and functions are built on

sound principle of public health administration and present a formal approach to P.H.N. in schools. Several administrative people who received this paper agree with the principles but they felt that a less formal approach may be more practical. It was suggested that the nurse and health visitor should always visit the village school on her scheduled visit to the village. She should make a casual inspection of the children with the assistance of the teachers to detect signs of acute eye, skin and other communicable disease conditions. She should get the names of sick children and evolve with the teacher, a program of health within the limitations of your own program.

The contribution of the P.H.N. in the school health program is limited by her own interest, preparation and understanding of this important age group and of her relationship to the planning and fulfilment of the total health program.

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State Branch. I gathered that the Punjab members want a branch but I would say to them all: a State Branch means accepting responsibility and every member should contribute to keep it alive once established. It is not just a piece of work for the executive committee; every member has a part to play and they should remember that the success of a branch does not necessarily depend on the elected committee.

I left the Punjab with the impression that here were a people who had put the agonies of the partition behind them and were now working to build anew their ravished land and resources. Nurses and doctors with whom I talked were optimistic and keen to see developed a good health service although red tape, lack of money etc., are hampering rapid progress; but the will to go ahead is there and I wish them fair sailing.

LAKSHMI DEVI.