



The School Health Programme rolled out in the State from July '09 as a unique joint venture of the

The health of a nation means more than just the health of its population. It concerns the planning for the health of its future population. Similarly, health status is not just an assessment of a person at a point in time, but an ongoing and dynamic process. Health of the future generations is primarily moulded by the quality of maternal health and child health. Child health, in turn, is determined by various factors at home, school and on the playground. Of these factors, most of an average child's wakeful life is spent in school and in academic activities, more than any other place. The school activities expose the child to other children, and to public places, such as streets and buses. This makes the child vulnerable to a set of medical issues, ranging from infectious diseases, food poisoning, psycho-social issues and addictive behaviors, all of which are preventable

School health service in India dates back to 1909, when for the first time, medical examination of school children was carried out in Baroda City, Gujarat. After independence, in the five year plans, many state governments have provided school health and feeding programs to the students. But, efforts to improve school health have not been up to our expectations. The reason may be due to the lack of initiative, resource constraints and insufficient facilities.

In Kerala, there was once a district school health team comprising of doctors, nurses, attendants, and so on, under health services department. Gradually the members of this team were redeployed for other duties and the team became almost defunct.

The Redesigned School Health Program in Kerala

The School Health Program is now being redesigned for more benefits for the students, renovated according to the changed times and repackaged in a user friendly manner. This fresh program is undertaken as a joint venture by the Health Services Department, National Rural Health Mission and the Education Department.

The two channels of School Health Programme

1. The A full fledged onsite School Health Clinic at Cotton Hill Girls Higher secondary School which started its activities in 2007. At the moment there is only one such School Health Clinic in Kerala which is manned by a full time Doctor, a Staff Nurse and an Attendant.

2. The Special School Health Programme implemented in selected schools representing all Panchayaths, Municipalities and Corporation which started functioning in 2009. At the foundational level, the primary care givers are the Junior Public Health Nurses (JPHN) who are assigned exclusively for the school health program. They will be the prime provider of preventive, curative, educational, and documentation services. The program started its ground level implementation in schools in October 2009. Currently the programme is being implemented in one selected school per panchayath, 3 schools from municipality and 3 from corporation. One JPHN is in charge of 2500 students

Aim

Helping the nation build a bright and healthy generation, equipping them to make healthy choices and for planning to maintain a healthy population in the future.

The Main Components the State wide School Health Programme

- Clinical services: The JPHNs are expected to attend minor clinical ailments and health issues that the student face while in school. JPHNs will arrange Medical screening camps with help of school health team.
- Preventive services: Health education is the most important component of the school health program, and is the most important function of JPHNs, other than clinical services. Health education involves teaching a wide range of subjects about health, preventable diseases, hygienic practices and normal milestones.
- Counseling: The services of a clinical psychologist/social worker will be made available in the future.
- Documentation: Documentation of health related activities and filling of Health Record

Clinical Services

Attending minor ailments: At present, 2500 students are assigned to one JPHN. Depending on the size of the school, a JPHN may be able to cover one to two schools in a day. She will attend to minor ailments give advice regarding the ailment and also give referral services in case of need. In such cases, with the help of the concerned class teacher, the parent can be informed and guided to get the child the best care. JPHN can follow up the case and record the necessary information.

Medical Camps: Every child assigned to the JPHN will undergo a health examination and screening by JPHN once every year and those who require further medical attention will be identified. These students will be examined by the doctor in charge of the school health program under the government Health Department in a medical camp conducted by the School Health Team. Those students who are found to require specialist care in that camp will be registered and referred to further specialist medical camps (as long as the condition does not require immediate care,) conducted under the school Health program where, the service of a group of specialists are utilized. The specialized medical camp may be constituted with a Pediatrician, Gynecologist, Dentist, Dermatologist, Physician, Surgeon, Orthopedic surgeon, ENT surgeon, Ophthalmologist, and so on.

Preventive Services

Health education is the cornerstone of preventive care. Both communicable and non communicable diseases can be tackled effectively and economically by preventive measures. For example, life style disorders can easily be prevented with proper awareness about the causes of the disease. Disorders such as Hypertension and Diabetes Mellitus tend to run in families, and can be attributed not only to the genetic predisposition; food habits and stress within and out of the family are among other factors. If not completely preventable, these disorders can be modified in a beneficial route. This makes education in healthy food habits all the more important.

Many new diseases like AIDS, SARS and H1N1 are currently in the health scene, and there may be future threats due viral diseases, diseases due to climate change and diseases due to inappropriate chemical use, to name a few that can be effectively be managed. Educating children on how to prevent, alleviate and appropriately respond to such threats reduce the intensity of such problems.

Counseling

Growing children are facing stress at different levels, and they bear the brunt of the family issues and interpersonal problems. Members of the family who themselves are under constant stress, often do not spare time to deal with their children's issues. At schools, they have to face peer pressure and stress related to studies. Above all, the stress of physical growth, especially during the adolescent period requires a sympathetic approach and proper guidance. Counseling may be provided to meet this end.

Documentation

Documentation is an important part of our program. For any future action related to school health program, we need a good record of the past activities since past is a guide for the future. As part of documentation activities, the "School-TC & Health Record" is introduced by the "Arogyakeralam," Department of Health and Government of Kerala. The programme is named '-2 to +2,' as it is meant for children from Pre-Primary (LKG) to the Higher Secondary levels (Plus Two).

Vaccination Programmes

Vaccination programmes may be taken up, depending on the need of the hour in the future.