

INTRODUCTION

1.1 Background of the Study

"School Health Services refer to the health care delivery system that is operational within a school or college". These services aim at promoting and maintaining the health of school children so as to give them a good start in life. In addition, these services seek to enable children benefit optimally from their school learning experience. Globally the number of children reaching school age is estimated to be 1.2 billion children (18% of the world population) and rising. In many homes across the world, children start to attend school from as early as 5-6 months because mothers have to wean early to return to their works place. The purpose of the school health services is to help children at school to achieve the maximum health possible for them to obtain full benefit from their education. School health services deal with health appraisals, control of communicable disease, record keeping and supervision of the health of school children and personnel. It is the aspect that concerns itself with the evaluating the health of an individual. Adjectively health appraisals afford the school authorities the opportunities to detects signs and symptoms of common disease as well as sign of emotional disturbance that could affect the learning activities of the children. Schoolhealth services are both preventive and curative services and it helps in providing information to parents and school personnel on the health status of school children. It also provides advisory and counselling services for the school, community and parents. It includes pre-entry medical screening, routine health examination, school health records, first aid and referral services.

School Health Services is the first and most important component of the School HealthProgram. This SHP program was started from Europe in the end of 18th century in the school of Bavaria by providing free lunch to the student. This program was managed by Benjamin Thompson. After that John peter Frank wrote an article in which he said that "There should be different type of facilities in school because they spend long time at school". School Health Services was provided in Sweden at 1865 AD in public school by appointing doctor as employ as well as in Germany at 1873 AD and in Belgium at 1874 AD (Kolbe, 1986; Allensworth and Kolbe, 1987). The modern concept of school health program was started in 1850 AD. The stages of SHP are

divided into 4 stages as period of Recognition, Period of exploration, Period of synthesis and Period of integration, which has its own importance. In Nepal with an intention of enhancing the educational performance of the student the school feeding program was introduced first time during the Rana regime. During the decades of 1950, students in need were provided free midday meals in the government school of Kathmandu valley. The Sanskrit school has continued free education with accommodation and foods till date for limited number of student. (MOE, 2006)

Now a day health is considered as a critical component of human being. In the context of Nepal there are so many health problems. To overcome the such health problems and to increase the health status of the people of Nepal is the challenging task, which effective remedies can be implementing school health services dynamically in the school. Sundarharainchais a newly formed municipality of Morang district. My research will be related with the school health services of government school of this municipality. On the comparison to other component of SHP' School Health Services ' is the most important elements because it has to play vital role for the development of health status of the school family but this program is only limited in paper in our country as well as in this municipality.

1.2 Statement of the Problem

Nepal is a heterogeneous country in terms of topography, climate and culture. It has a population of 2,64,94,504, where 2% of people are under absolute poverty. (Census 2011) About 41% of Nepal population is below the age of 16. The young people mostly live in remote village area and study in government school. The student of Nepal spends about 200 days in the school in a year. Most time of the day they spend (six to seven hours a day) in school. Their mental and physical health is greatly influenced by their school environment and health services. The school is one of the agencies that could contribute more than any other institution to promote the health of student and school personnel. To develop the health status of the student, there should be school health program as well as school health services can play a vital role. School Health Services is one of the most important component of SHP. It has its own importance. The duty of the school is to provide better school health services in the school, which is limited in paper only. We cannot find specific health teacher in the government school of Nepal. The whole SHP is limited in paper only, so the health

status of children in Nepal are decreasing now a days.

The main aim of school health services is to provide appraisal, preventive and remedial facilities to the school family. So this is directly related with the health of the student. In the context of Nepal school health services is limited in theory and the government is also not able to provide basic health services to the people. So it is very essential to implement school health services effectively. The school health services provided by the government school of Sundarharaincha is very negligible. There is lack of school health services facilities in these areas. So the health problems in the students are increasing day by day. The public school in Nepal as well as in this area is not resourceful. The government has failed to provide with aid, in this context. Schools are struggling to maintain their existence. The focus on student health is difficult to search because, teachers are not well trained and there are not much facilities as their needs, thus this study will be valuable.

1.3 Significance of the Study

The main significance of the study is as follows:

- i) It helps to find the practices of the school health services in government School.
- ii) This study helps to find out the problems of school health services.
- iii) The finding of the study helps for further improvement of school health services.
- iv) The study gives guidelines for the government, NGOs, INGOs and related persons to implement effective school health services.
- v) This study is useful as a guideline for the further research in similar studies.

1.4 Objectives of Study

The main objective of this study is to identify the school health facilities and practices in the government school of Sundarharaincha municipality in Morang district. The specific objectives of this study are as follows:

- i) To find out the facilities and practices of school health services.
- ii) To find out the problems of school health services.

- iii) To find out effective implementing measures of school health services.

1.5 Delimitations of the Study

This research was done with following delimitations.

- i) This research covered only the government school of Sundarharaincha municipality.
- ii) This study was related in school health services in school.
- iii) This study was based upon primary and secondary data.
- iv) This study was only related with facilities and practices of SHS.
- v) Questionnaires was administrated to the Headmaster only.

1.6 Operational Definition of the Key Terms

Adorned :To make something attractive and beautiful.

Appraisal :A Judgement of the value of something.

Indeed :Truly or Actually.

Personnel :Office staff.

Remedial :Treatment that relives or cures a disease.

Supervision :To observe something deeply.

Wean :To cause to quit something to which one is addicted.

Prevalence : The total number of cases of a disease in given population.

Wasting : Any medical condition that causes loss of body mass.

Stunting : Medical condition that effect on growth.

Pediculosis :Infection with head lice.

Dire : Warning of bad consequences

Interpretation: The action of explaining the meaning of something.

Intended : To fix the mind upon something

CHAPTER II

REVIEW OF THE RELATED LITERATURE

This chapter highlights the literature that is available in concerned subject as to my knowledge and relevant study on this topic: review of journals and article, newspapers, annual reports, internets and review of work. The literature review provides the students the knowledge of the status of their field of research. Thus previous studies cannot be ignored as they provide the foundation of the present study. Main objectives of this chapter is to find out the earlier design, method, finding to enlarge the depth and breadth of knowledge on public school health services facilities and practices.

2.1 Review of Theoretical literature

School health services refer to the health care delivery system that is operational within a school or college. School Health Services is the key of wellbeing of the school student as well as society. The status of children can be determined by the health facilities provided to them. So there is mutual relationship between school health service and good achievement. Different organization (NGO, INGO, Governmental) has published various articles, reports, text book, research reports, which are reviewed for the purpose of this study. Some of the review are as follow.

The primary purpose of the school health program is to promote the physical and emotional health of the student and staff by maximizing the educational process. School health services are intended to play an integral part in support of health care provided by parents. Indeed the school nurse serves as the student vital link to medical and other community resources. (American Academy of Pediatrics, 1993)

“School health and nutrition services are services provided through the school system to improve the health and wellbeing of children and in some case whole families and the broader community.” (WHO) The expert committee on school health services around 1950s highlighted a connection between health and education that to learn effectively children need good health. (WHO, 1950) In the late 1950, defination of school health program changed as societies changed, where the first and most effective component of SHP can be school health services. (Allenworth. D Kolbe

L.eds, 1987). WHO forwarded the definition of health promoting school in 1996. It evolved as a strategy of helping school to build and use their entire organizational capacity to improve health among the student, school personnel, families and communities.

The world community, including United Nations and international agencies has appreciated the need of an effective SHP in order to achieve all or some of the Millennium Development Goals (MDGs) by 2015. The EFA goals MDGs cannot be achieved without urgent attention to SHP. The EFA goals of Dakar forum for the year 2015 clearly envisaged the need for effective SHP.

The National Health Education Information and Communication Centre (NHEICC) has developed and provided different training for the betterment of SHP including School Health Services. The mostly health problem people live in rural area and they are under poverty. Data reviewed from different sources indicate that there are several health problems in the student and their family. The government is also not able to find out their health problems and solve their problem. So the effective SHP including school health services only can be the effective measures to control the health problems of our country. The systematic gap is related to the proper facilities provided by government. The status of health of school children in Nepal is not well understood. So health services can create an enabling environment to ensure better learning achievement and improved health of school children. School health program and services can be cost effective and easiest way to improve student health and academic performance not only to the student and school personnel but also to the family, community and nation. Promoting health through school is financially, socially, economically and politically desirable. Investing in school health services has far reaching results and school can serve as an entry point for health promotion. Therefore SHP and its component must be a key point to achieve the twin goal "Education For All" and "Health For All". Health should then be a high focus in the agenda of the education sector at all levels.

The health and nutritional standards of school children in this study were found to be unsatisfactory among different morbidity pediculosis is found more in girls. The present study put more emphasis on the need for initiation of school health program in the school with more on improving personal hygiene, prevention of disease like

parasitic infection/infestation and improvement of their nutritional status. The situation in Nepal is extremely dire with more than 60% of the population are or below poverty level. Malnutrition is widespread and 1 in every 5 children dies before the age of 5. The development of a country depends upon the development of children thus; if we help these children today the nation will get civilized citizen tomorrow. (Journal of College of Medical Sciences-Nepal, 2012, Vol-8, No-2, 12-16)

School-based Health Interventions and Academic Achievement provides important new evidence that links students, health and academic performance. It identifies proven health interventions and practical resources that can positively affect both student health and academic achievement. Health and Education Are Linked. For students in middle and high school, health risks and academic risks affect each other. Students who do poorly in school may have more health risks, which adversely affect their achievement and in turn contribute to health risks. Data from the Healthy Youth Survey in Washington State provide a new way of looking at the relationship between health risk and academic achievement. The report examines 13 key physical and mental health risk factors and analyzes the relationship between these specific health factors and the grades students report getting in school. The more health risks students have, the less likely they will succeed in school or graduate on time. Each health risk that can be removed has the potential to positively influence academic behaviors. Improvement of even a single health factor may help improve academic achievements. Lack of equal chances for success, the result of poverty, discrimination, unequal access to services, and other factors affects a person's health.

These patterns of socioeconomic disparities are often the same for disparities in academic achievement. It may be unrealistic to expect to close the achievement gap for disadvantaged youth without addressing wellness, readiness to learn, and the conditions affecting the health of the community. There are many proven interventions that have a positive impact on students' health and academic achievement. This report examines how delivering supportive health policies, instruction, and services comprehensively may be more effective than offering single health interventions. School leaders are offered six key ingredients for success that are supported by research and are consistent with the Coordinated School Health approach from the Centers for Disease Control and Prevention. (Julia Diley, PHD MES, 2009)

2.2 The Review of Empirical Literature

School Health Services is the component of SHP which aim is to improve the health status of school family and learning experience of the student. There are lack of School Health Services in rural area so the health status of the student is decreasing day by day. School Health Services is an important program for the achievement of national goal of proper health and quality education defined by health and population ministry and ministry of education. The school health and nutrition programs are meant to accurately analyze the health and nutritional status of the student from 5-17 years of age group and give suggestion for their proper hygiene. Since inception, CCD Nepal has been focusing primarily on the school health and nutritional program in different school of timal area. (CCD NEPAL ANNUAL REPORT 2015)

Ministry of health and Population and Ministry of Education, The government of Nepal and Japan international cooperation Agency(JICA) entered into an agreement on technical cooperation for the school health and nutrition project in two district in Nepal (Sindhupalchowk and Syanga district) to improve health and nutrition status of school aged children at primary level based on the National School and Nutrition strategy. The project started from June 2008 and is for 4 years, till May 2012. Which aim was to support National school health nutrition strategy as well as to plan and develop the cost effective school health and nutritional services model which can be replicated by the government to other parts of Nepal. The major activities of the project was physical checkup, De-worming program, first aid services, school check list, child club mobilization, blood and stool test. The health status of the school children was not well, as well as there was far distance between theory and practices of School Health Services and program. The school health facilities are not adorned. The project has played vital role for the development of health status of children in those two districts.

Shrestha et al (2016) conducted project program on the situation of school health and nutrition program in Dolakha and Tanahu. They found that the school in the project group had significantly better access to school health services, health and sanitary facilities and more child club activities. Student in this group were more likely to have better hygiene practices and health outcomes. These result are

encouraging and indicating the potential of school health service and nutritional project to improve student health outcomes even one year after the project completion. Thus the result activities should be scaled up the other parts of the country. Also longitudinal studies should be conducted on school health projects in Nepal to confirm the casualty.

School Health has been regarded as a high priority intervention in developing countries. However it has not been prioritized in Nepal for many years. The objectives of the study are to find out the nutritional status and morbidity pattern in school age children. This cross-sectional study was administered in two schools located in Boldephedeche and Mahure of Kavrepalanchowk. From the selected schools, a total number of 160 students studying from Grade 1 to 5 were enumerated in the study using census survey method. Among 160 students, the most important three problems were pediculosis 42(26.2 %), dental caries 29(18.1%), and waxy ear 27(17.1 %). Thus the school health education should put more emphasis on oral care, nutrition, personal hygiene and others. The health and nutritional standards of school children in this study were found to be unsatisfactory. Among different morbidity pediculosis is found more in girls. The present study put more emphasis on the need for initiation of school health program in the school with more on improving personal hygiene, prevention of disease like parasiticinfection/infestation and improvement of their nutritional status. (Journal of College of Medical Sciences-Nepal, 2012, Vol-8, No-2, 12-16)

Shrestha et al (2003) conducted a research on the health status of school children of Pokhara valley, Nepal. The cross sectional study to assess the health and nutritional status of school children in the age group of 4-15 years was carried out in 6 government primary schools of Pokhara valley by health team of the department of Social & Preventive Medicine (SPM), Manipal College of Medical Science, Pokhara, Nepal. A total of 750 students of both sex, 368 boys and 382 girls were examined. The prevalence of wasting and stunting in these children were low (10.3% & 15.7% respectively) with boys suffering more than girls in both aspects. The 6-10 years old children were affected most. Pediculosis, Dental caries and Worm infestation were three most common diseases suffered by students. The study highlighted the need for continuation of school health services aimed at improvement of their health & nutritional status.

2.3 Implication of the Review for the Study

The literature review helped in my study in following ways. i) To find out the objectives of the study and gap between different research papers.

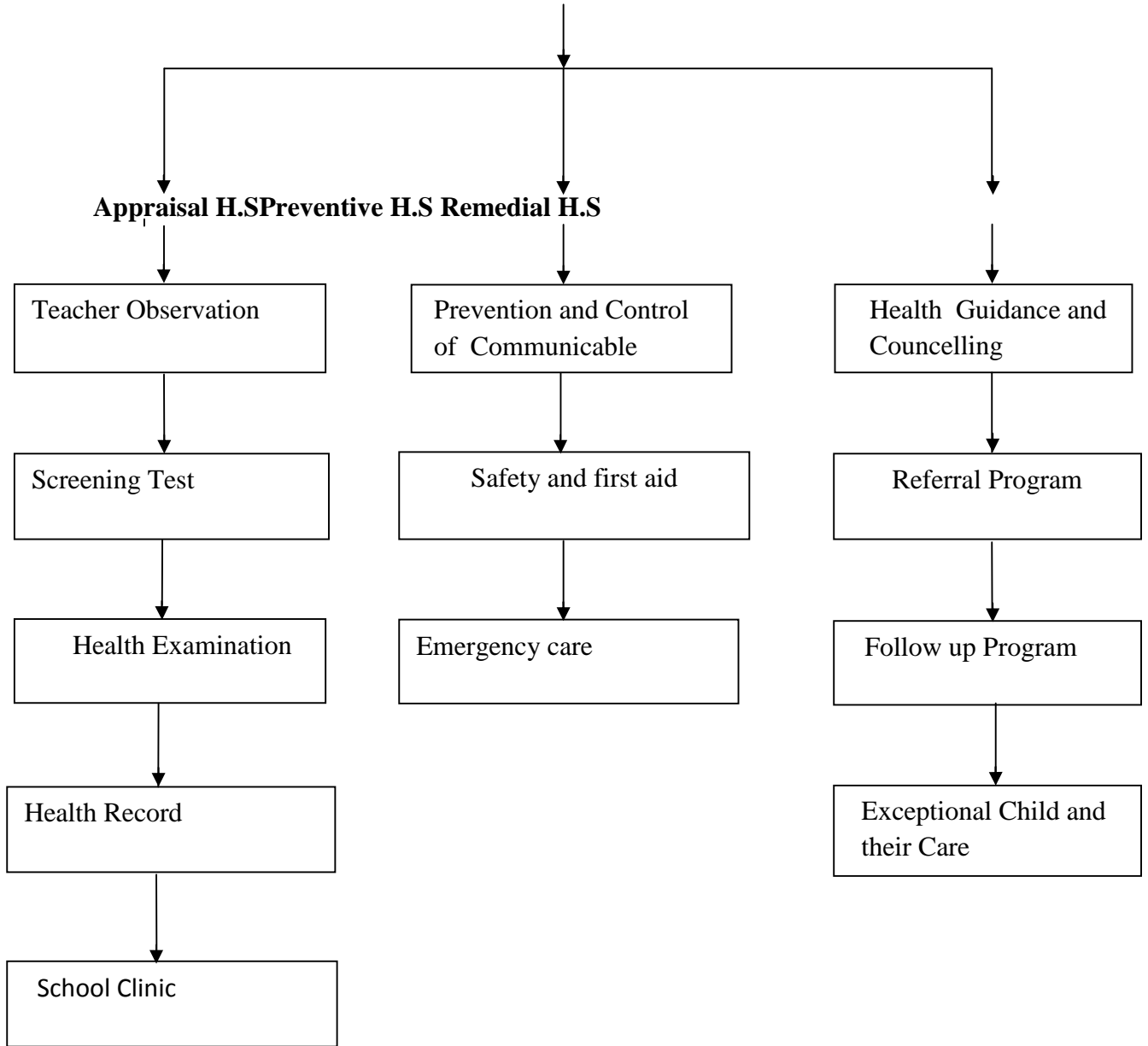
- ii) To select proper research methodology to accomplish the study successfully.
- iii) To compare the old findings for the study with the present one.
- iv) To give reference to the future studies related to the topic.
- v) To determine the topic of the study.

2.4 Conceptual Framework

To improve the practices and situation of the school health services facilities in public schools students, different variables play the key role. These variable are Appraisal, Preventive and Remedial services. These variable are directly affecting the school health services and the other variables.

Conceptual Framework

School Health Services



CHAPTER III

RESEARCH METHODOLOGY

Research Methodology is a systematic way to solve research problem. It facilitates the research work and provides reliability and validity to it. Research methodology employed in these study are as follow.

3.1 Research Design

Research design is the plan, structure and strategy of investigation conceived so as to obtain answer to research question and to obtain objectives of the study. To achieve the objective of the study, descriptive nature and quantitative research design is used.

3.2 Population and Sample Size

The study was conducted in all (43) public schools of Sundarharaincha Municipality, Morang. Automatically all the Headmasters were selected as respondent from each school.

3.3 Sampling Procedure

The sampling procedure was carried out in two stage. At first researcher selected all (43) the public schools of Sundarharaincha Municipality. After that automatically all the Headmaster were selected as respondent.

3.4 Data Collection Tools

Data collection about the school health services practices and facilities of the school was collected from the Questionnaire, which includes Appraisal, Preventive and Remedial aspects. There was separate question for the headmaster about the facilities of school health services and its practices.

3.5 Data Collection Procedure

For the completion of this study necessary data was collected by making work schedule, where at first the school was visited with the request letter of Janata Multiple Campus for official authority. After that guideline and some clarification was given to the selected respondent. The separate interview schedule was done to headmasters.

3.6 Data Analysis and Interpretation Procedure

After collecting the whole information or data through the tool, it was checked and verified to reduce errors and data was categorized in different relevant headings. The output of the data is interpreted statistically with the help of mean and percentage, which is shown in table, figure, chart and present according to the format.

CHAPTER- IV

ANALYSIS AND INTERPRETATION OF RESULT

This chapter deals with analysis and interpretation of collected data from the Government school of Sundarharaicha Municipality Morang. Presentation & analysis of data with charts, figure and table made the study clearly observable. It highlights existing condition of school plant, Appraisal aspect, preventive aspect & Remedial aspect of school Health Services of Government school of Sundarharaicha. The analysis and interpretation are made on the basis of interview, observation & review literature.

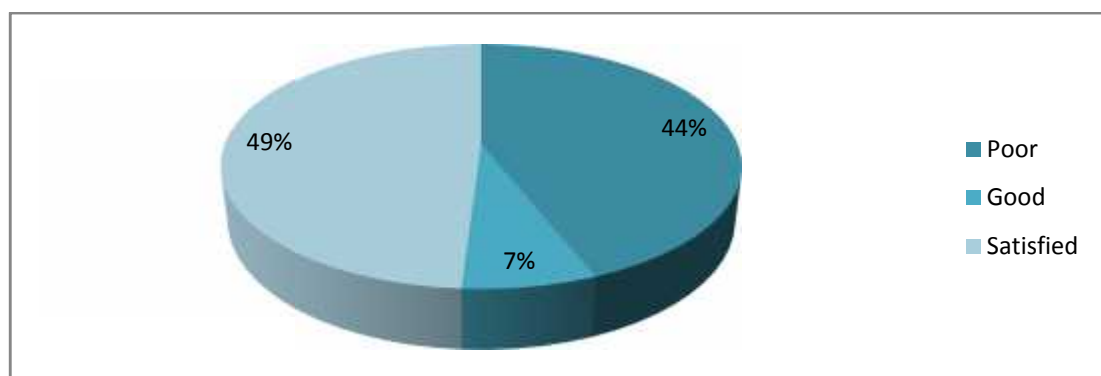
4.1 Existing condition of school plant/site

Existing condition of the school plants plays an important role in school health services. In this segment school structure, ground, students and teachers number, water resources, furniture, waste management etc are described.

4.1.1 Condition of Play Ground

Play Ground is very important in each school to enhance the ability in different areas. Playgrounds play a vital role to conduct ECA, CCA & other activities. The condition of playground among those schools is shown in figure no 1.

Fig no 1. Condition of playground

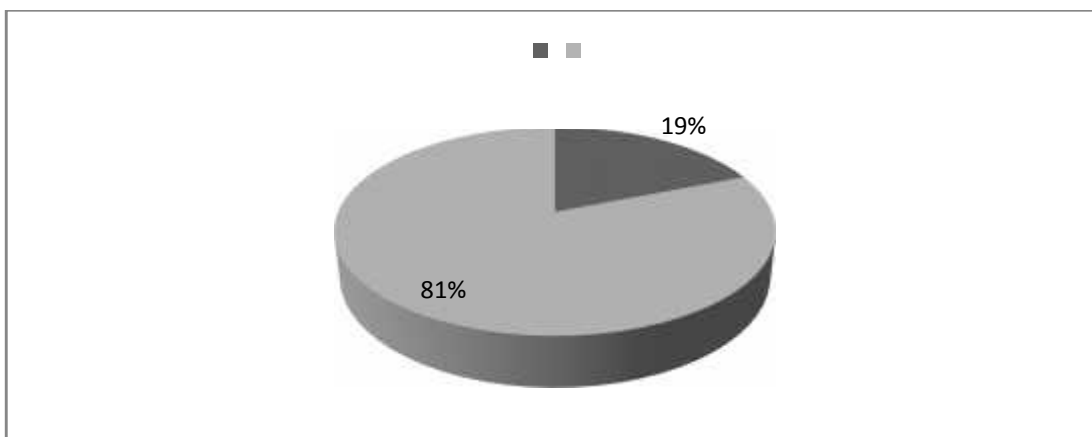


The above figure shows that over 43 schools 49% of schools have satisfactory playgrounds, 44% of schools have poor playground conditions, and only 7% of schools have good playgrounds. It seems that the majority of schools have satisfactory playgrounds, and only a few are in good condition.

4.1.2 Condition of Ventilation & Windows.

Appropriate windows & ventilation is very important for healthy school living. It ensures the good environment in classroom. The condition of window & ventilation shown in fig no 2.

Fig no 2. Condition of window & ventilation

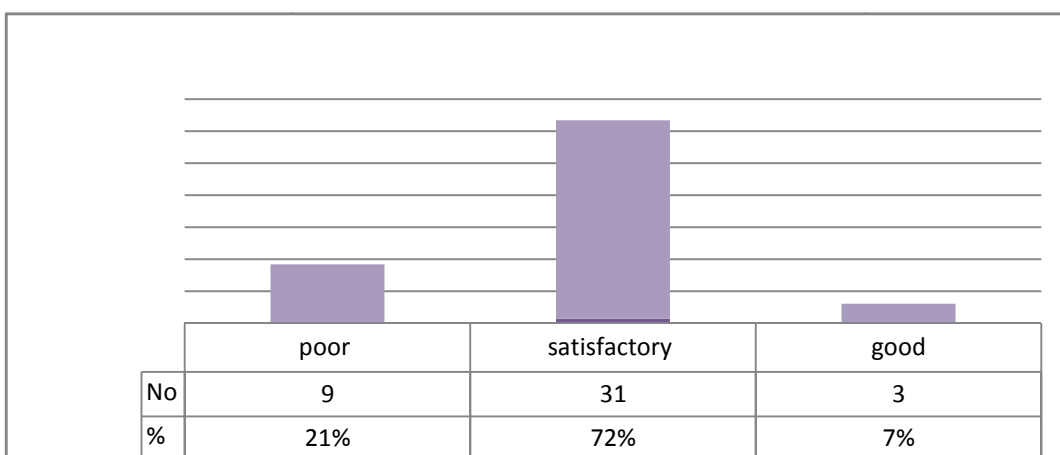


The above figure shows that among 43 schools 19 % schools have appropriate ventilation & window & 81 % don't have appropriate window & ventilation, which indicates that most of the government schools are lacking in healthy rooms .

4.1.3 Sanitation of toilet

Toilet is the best place to manage the human waste (Urine & Excreta). So use of toilet will reduce 90 % of disease. The condition of toilet in these school one given in fig no.3.

Fig no.3. Sanitation of toilet

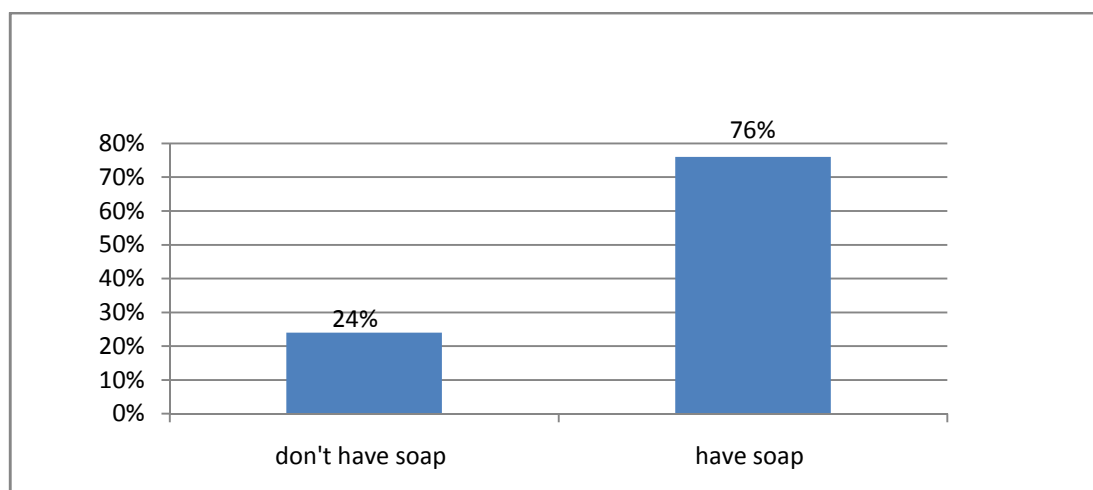


The above fig shows that. Among 43 school 21 % schools toilets are in poor condition. 72% schools toilets sanitation were satisfactory & only 7 % schools toilet condition were good. It seems that majority of schools toilets are in bad condition and the sanitation of toilet is most important to ensure healthy living in school.

4.1.4 Availabilities of Soap in Toilet

Soap is very compulsory things in toilet. It is used to clean the dirt of our hand & body. Uses of soap in toilet helps to reduce very diseases among the students. So there should be provision of soap in every toilet. The condition of soap in toilet among 43 school are listed below in fig no.4.

Fig no.4.Availabilitiesof Soap in Toilet

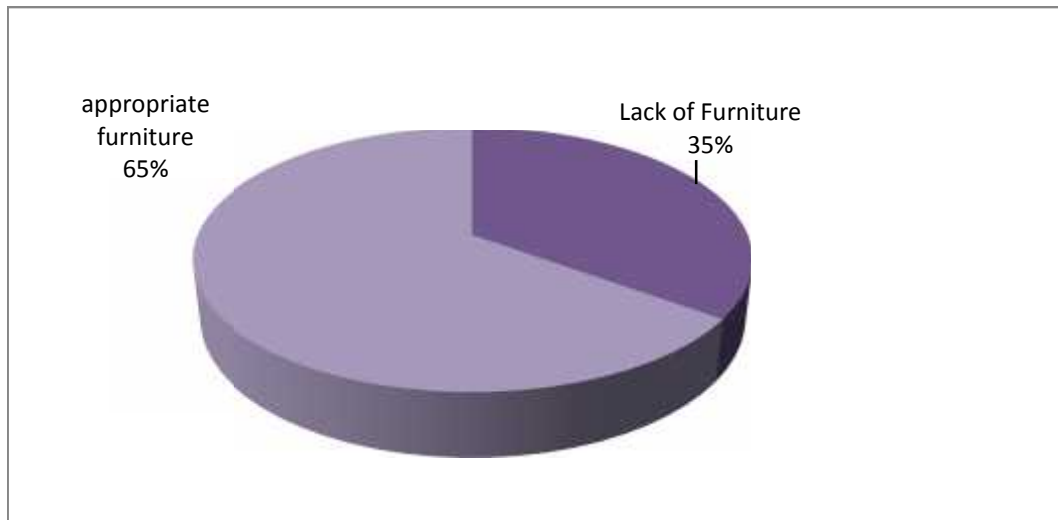


The above figure shows that among 43 schools only 76% school have the provision of soap in toilet & rest 24 % don't have soap in toilet. Soap is very important to clean dirt from our body, hand etc. , so soap must be compulsory in every toilet for personal cleanliness.

4.1.5Condition of Furniture

Furniture are very necessary to maintain healthy living in the school. So there should be appropriate furniture in school. The condition of furniture of school is listed below in fig.no 5.

Fig no 5.Condition of Furniture

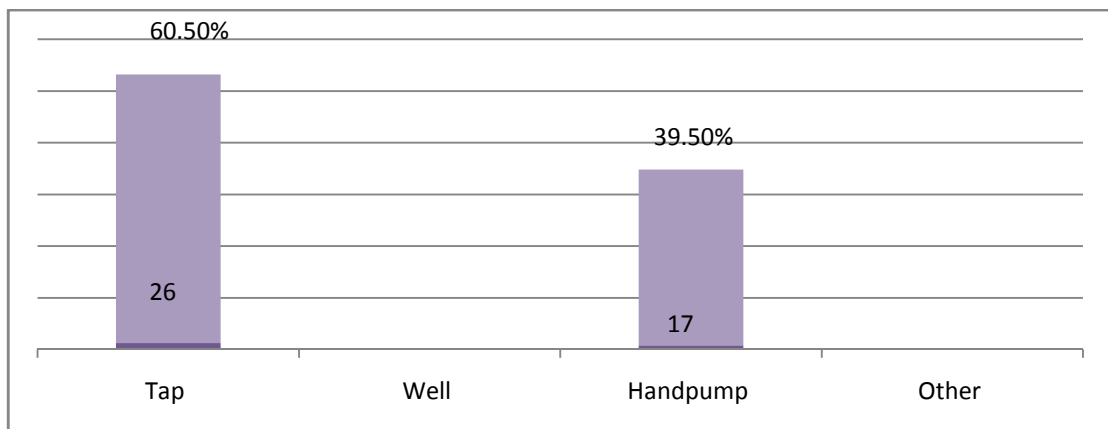


The above figure shows that only 65 % school have appropriate furniture & 35% school don't have appropriate furniture. It indicates that the students of many schools are facing problems in their classroom sitting, which will directly effect on student healthy living environment in school.

4.1.6 Sources of Water & Purification Method.

Water is very important thing for all Creature. Pure water plays a vital a role for healthy living. The sources of water among these school are listed below in fig.no.6

Fig.no.6 Sources of Water & Purification Method.



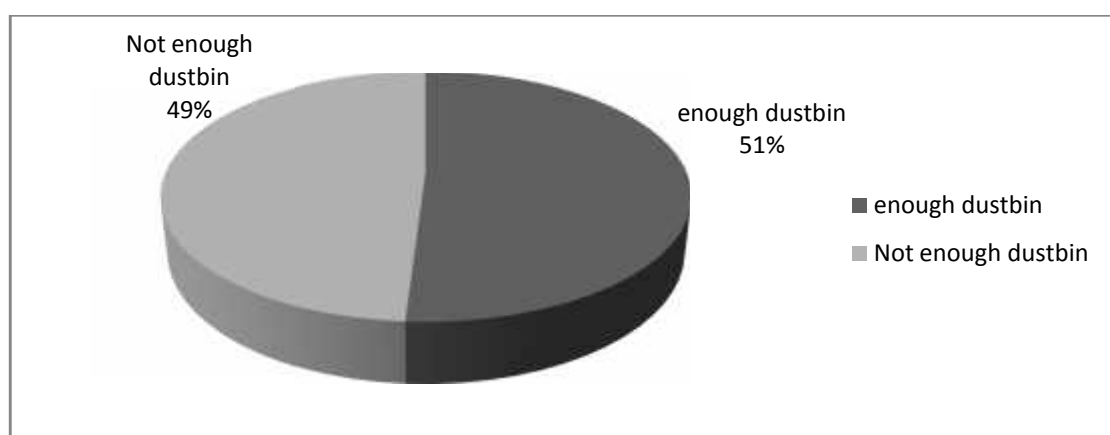
The above figure shows that 26 schools use tap & 17 Schools use hand pump as a source of water. Mostly 60.5% tap is used in among these school but none of the

school purify the water before drinking. Which indicates that there is lack of pure and safe drinking water in mostly schools.

4.1.7 Availabilities of dustbin

Dustbin is the appropriate place for permanent management of waste. Dustbin is very important in every area to make the environment clean & beauty. The availabilities of dustbin among these school are listed below in fig.no.7.

Fig.no.7 Availabilities of dustbin

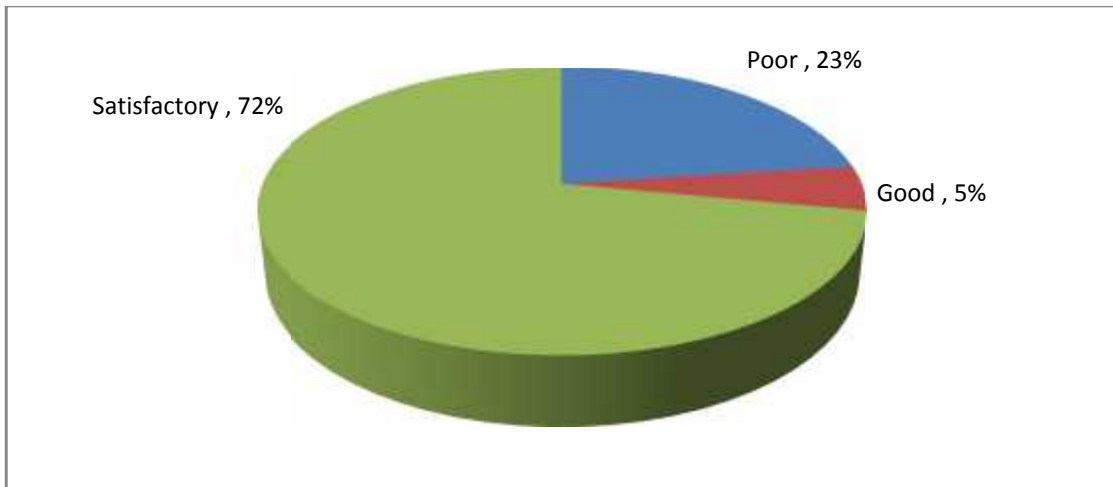


The above figure shows that about 49% percent school don't have enough dustbin & only 51 % have enough dustbin. The wastes produced inside or outside classroom are dispersed everywhere due to the lack of dustbin, which is affecting the health and environment of people.

4.1.8 Sanitation of School.

Sanitation is very important for healthy living. Sanitation & cleanliness helps to reduce disease and maintain beauty in the surrounding. The sanitation condition of school is given below in fig.no. 8.

Fig.no. 8 Sanitation of School

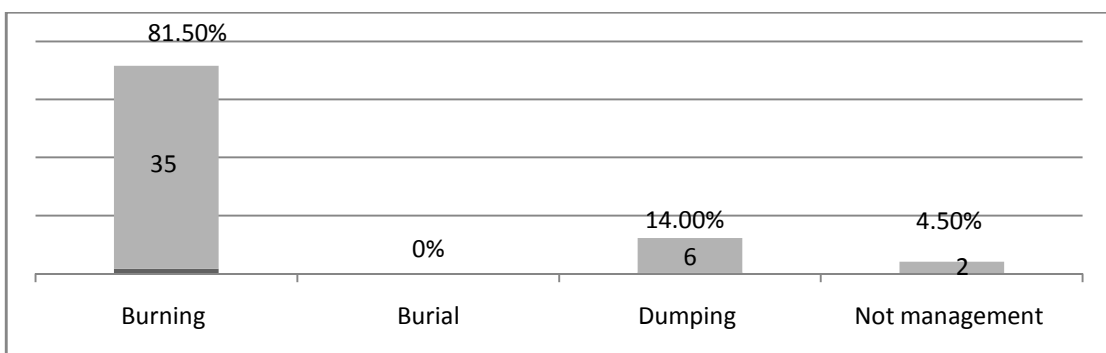


The above figure shows that only 5% schools sanitation is good, 23 % schools is poor and 72 % schools condition is satisfactory. It shows that most of the schools surrounding is dirty, which is destroying the natural beauty as well as health of students.

4.1.9 Method of waste Management.

Waste management is very important task of school. If waste management is done in appropriate way then its create healthy environment is school as well as in surrounding locality. The method of waste management in these school are listed below in fig.no. 9.

Fig.no. 9 Method of waste Management



The above figure shows that most of the school adopt burning method. Among these 81.5 % school use burning method, 14 % school use Dumping and 4.5 % school they

don't manage the waste. Proper waste management method should be adopted by every schools to ensure healthy environment and living.

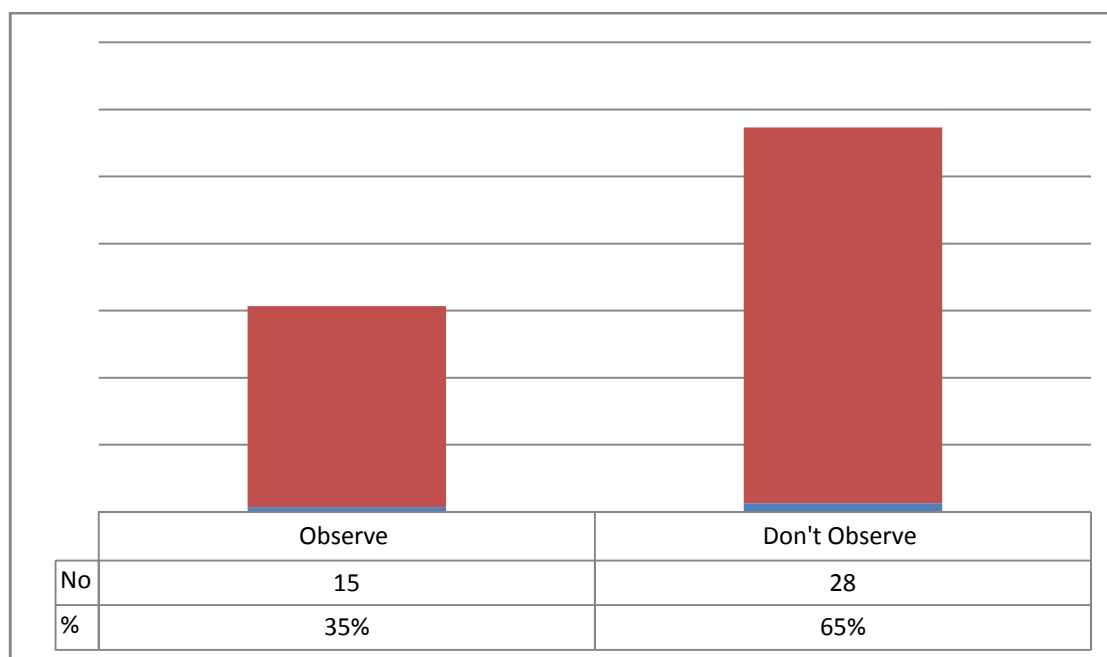
4.2 Appraisal Aspects of S.H.S.

Appraisal aspects is the process of identifying the health condition of the students. Which helps to play a vital role in school health service as well as overall development of the students. In this aspect teacher observation screening test, health examination, heath record, school clinic facilities are described.

4.2.1 Health Observation.

Health observation is very important to identify health problems due to bad health student will be unable to perform their task. So health observation is very important for a S.H.P. The observation condition of these schools are list below in fig.no 10.

Fig.no 10. Health observation



The above figure shows that most 65% of the school don't observe the health condition of the school because of that the school are unknown about the students problems. only 35% schools among 43 observe the General body structure of the students to find the heath problem related to the students and refer them to the hospital or clinic.

4.2.2 Screening Test.

A screening test is performed as a preventive measure to detect a potential health problem or disease in someone. The purpose of screening is early detection, helping to reduce the risk of disease. It is used to identify those who should have additional testing to determine the presence or absence of disease. The facilities of screening test among these school are shown in table no 1.

Table no 1. Screening test

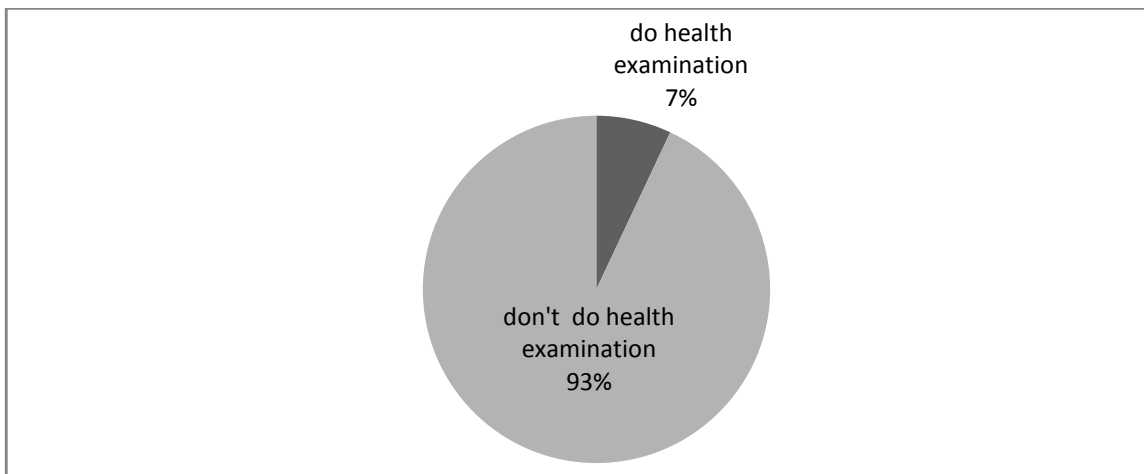
Screening Test	Number of School
Do screening test	6 (14%)
Don't do screening test	37 (86%)

The above table shows that among 43 schools only 6(14%) schools do screening test and 37(86%) don't do screening test. Which indicates that most of the schools they are not aware about student health issue.

4.2.3 Health Examination.

Health examination is very important to diagnosis the health condition of a person. Regular health examination during fix time interval will helps to reduce vital disease and sudden death. It is also one of the part of SHP. The availabilities of Health examination in among 43 school are given in fig.no 11.

Fig.no 11. Health examination

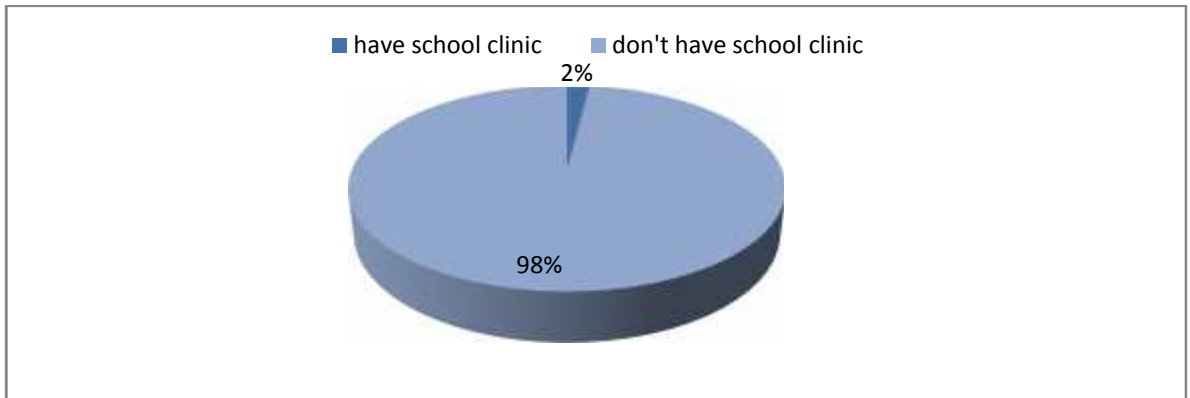


The above figures shows that only 3(7%) school among 43 have facilities of health examination of general disorder and rest of the other school they don't have such facilities.

4.2.4 School Clinic Facilities.

School clinic play a vital role to cure and treat the general diseases found in students and prevent them from further injury. So there must be school clinic facilities in every school. The availabilities of school clinic facilities in among school are given in fig.no 12.

Fig.no. 12. School Clinic Facilities

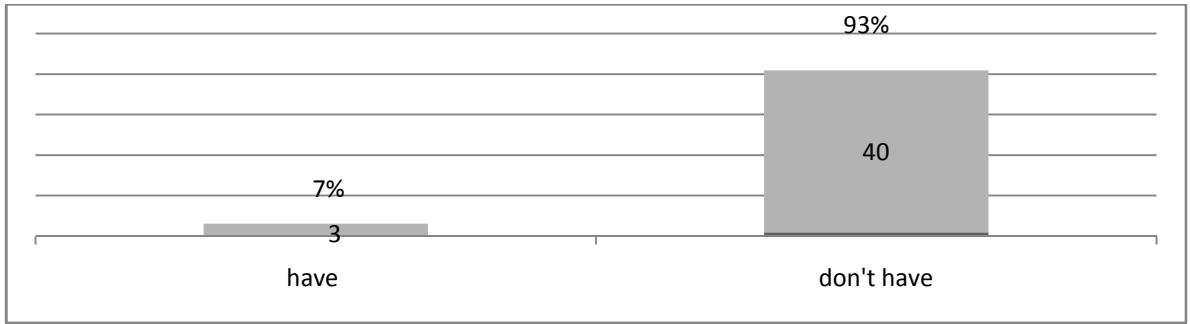


The above figure shows that almost all school don't have school clinic facilities and only one 2% school have the facilities of it with general first aid box and instrument. Which indicates that most of the schools are lacking with these facilities and facing problems regarding students general health problems.

4.2.5. Treatment Room.

SHS required a separate treatment room to treat the student's health issue. There must be a separate room for treatment so the student can feel comfortable. The availabilities of treat room is among school are listed in fig.no 13.

Fig.no.13 Treatment Room

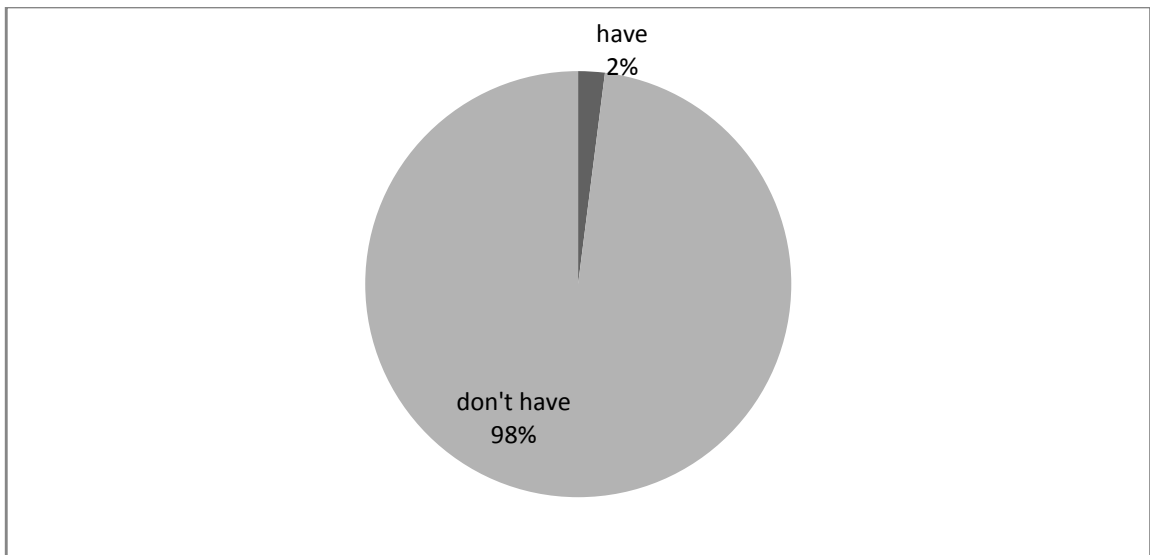


The above figure shows that only 3 (7%) schools have separate treatment and other 40 (93%) schools they don't have separate room for treatment. Lack of separate treatment rooms may create psychological discomfort among students and may create problem in treatment.

4.2.6 Health Specialist.

Health specialist is required to diagnosis and treat the disease found in a person. Availabilities of health specialist in school plays a vital role in SHS. The availabilities of health specialist among these school are given in fig.no. 14.

Fig.no.14 Health Specialist



The above fig shows that among 43 schools only one (2%) school has the facilities of health specialist at school. This indicates that most of the schools are lacking in health personal, which may create problem regarding student health and treatment.

4.2.7. Health Campaign.

Health campaign should be done time to time to facilitate the health of the students. The number of school,which conduct health campaign for their student are given in table.no.2.

Table.no.2. Health Campaign

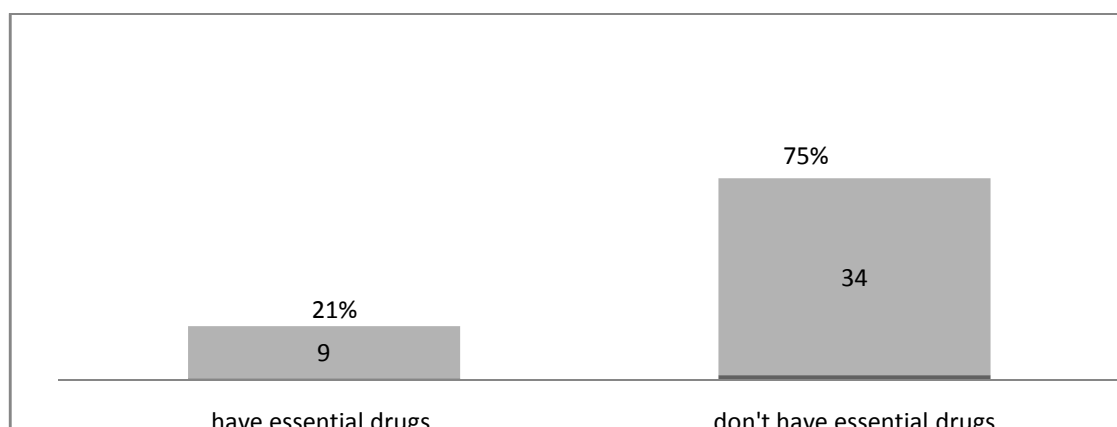
Condition of health campaign	No. of School
Conduct H.C	6 (14%)
Don't Conduct HC	37 (86%)
Total	43 (100%)

The above table shows that only 6 schools had conducted health campaign time to time to facilitate the student's health and 37 hadn't, which indicates that there is lack of health facilities in most of the schools.

4.2.8. Essential Drugs.

Drugs are used to treat a patient. Drugs plays a vital role to save the life of people who are suffering from different disease. There must be essential drugs in school for general health problems, injuries and accidents. The availabilities of drugs in these school are in fig. 15.

Fig.no.15 Essential Drugs



The above fig shows that most of the school don't have essential drugs. Among 43 only 21% schools have essential drugs and rest of 34 (79%) schools don't have essential drugs. The above things indicate that the students are unable to get medicine during their health problems in most of the schools.

4.3 Preventive Aspects of S.H.S.

Preventive aspects is and actions aimed at eliminating or minimizing the impact of disease, disability and risk. Preventive aspect will helps us to be away from different disease and accident which may occur in our daily life. It is an awareness program which aware people about their health issue. It is the best method to save our money as well as life. In this aspect knowledge of preventive measure, safety education, safety measure, follow up infected children, first aid instrument is described.

4.3.1 Knowledge about Preventive Measure of Disease.

Knowledge about preventive measures of disease helps to reduce most of the disease probability so each school should provide preventive measures of major and common disease which are probable. Each and every school provide preventive knowledge to students of this municipality. But implementation of knowledge in behavior is lacking so that most of people are suffering from different communicable and no communicable disease.

4.3.2 Use of Safety Measures.

Safety measures at school, home, road society etc. place will help to reduce most accident and injuries. Safety measure should be used in every area. The use of safety measures among these schools are listed below table.no.3.

Table.no.3. Use of safety measures

Use of safety measures	23 (53.5%)
No use of safety measure	20 (46.5 %)
Total	43 (100%)

The above table shows that only 23 (53%) schools have used safety measures at school and 20 (46.5%) schools hasn't used safety measures at school. This indicates that students are at risk in many schools and many schools are unable to maintain safety measures at school.

4.3.3 Safety Education.

Safety education is that education which aware people about probable accidents and injuries and reduce it. Its objective is to reduce the sudden death and save the life of people. Schools are the temple of education and each and every school should provide this kind of behavioral education. Among 43 schools every school provides safety education through subject and interaction.

4.3.4 Follow up of infected students.

Follow up of students will help to know the present condition of students and take the appropriate steps to help in the student health and education field. The follow up condition of among these schools are given in table.no. 4.

Table.no.4. Follow up of infected students.

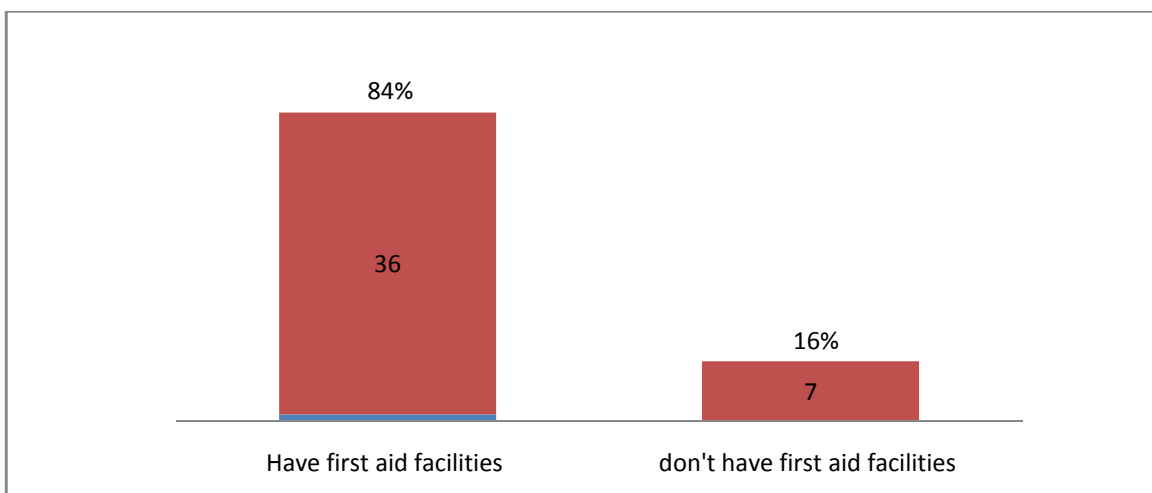
Topic	No of School
follow up infected student	12 (28%)
Don't follow up infected student	31 (72%)
Total	43 (100%)

The above table shows that most of the schools don't follow up the students. Among 43 only 12 (28%) school follow up the infected student and 31 (72 %) schools don't follow up the students. Lacking in follow-up creates most of the problems in student health and study, so that most of students leave the schools due to it.

4.3.5 First Aid Facilities.

First aid is very important things in each and every area where there is probability of accidents. first aid is an immediate treatment so it can prevent from further injury and seriousness. The facilities of first aid these schools are given below in fig.no. 16.

Fig.no.16 First aid facilities.



The above figure shows that only few schools don't have first aid facilities. Among 43 schools 36 (84%) schools have first aid facilities with general medicine, cotton, bandage, etc. but 7 (16%) schools they are without first aid facilities. This indicates that still few schools are without it, which may create more complicated health problems in students due to lack of first aid.

4.4 Remedial Aspects of S.H.S

Remedial aspects are intended to improve someone health when there is any health issue. It helps to find the health related problems of school family. It is one of the important part of SHS. Lack of this aspect will not support healthy school environment. The following heading are described in this aspects.

4.4.1 Health Guidance and Counselling Facilities.

Health guidance and counselling is the process of warning people and giving idea, suggestion of their health condition. The facilities help to choose right path for a student. It is very important in school for healthy living. The availabilities of health guidance and counselling facilities among these school are given in table.no. 5.

Table.no.5. Health guidance and counselling facilities

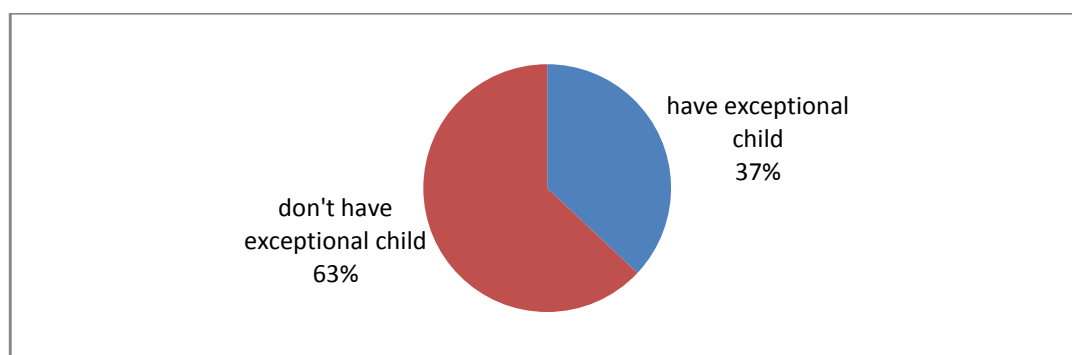
Detail	No
have guidance &counseling facilities	43
Don't have guidance &counseling facilities	0
Total	43

The above figure shows that all the school guide and counsel students or their health issue. which is very important to make students mentally strong and healthy.

4.4.2 Exceptional Child.

Exceptional child are very special child who need special care and learning environment. The number of school who have exceptional child are given in fig. 17.

Fig.no.17. Exceptional child



The above figure shows that among 43 schools 16 schools have exceptional child and 27 schools don't have exceptional child. Those who have exceptional child must have separate class, method and materials for teaching and special care for all round development of child.

4.4.3 Separate Class and Care of Exceptional Child.

Exceptional child need special and separate care, because they are differ from other children from the above fig. 22 only 16 school has special child. The availabilities of room and care in these 16 school are given below in table.no.6.

Table.no.6. Separate Class and Care of Exceptional Child.

Detail	No
have separate room	1
Don't have room	15
Total	16

The above figure shows that 16 schools has exceptions child and only 1 school has separate room and special care other is schools don't have separate room and special care. Which indicates that the exceptional child are also treated same as other which

will not bring the better result for them, so they must be cared separately according to their characteristics.

4.4.4 Referral Facilities.

All the health problems can't be treated at school. So they must be refer to the hospital in major issues. All schools refer to hospital in any emergency case. This kind of facilities helps to save the life of students and school family in needs .

CHAPTER- V

SUMMARY, FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Summary

School health service is an important part of every school. Its aim is to promote and maintain the health of school children. If children are the pillar of the nation so there must be proper care of our future manpower. This study was started to find out the condition of school health service in government school. The present study entitled "Practice and Facilities of school Health services in Sundarharaincha Municipalities Government school.

The objectives of this study were to identify the school health services facilities and practices in the government school of Sundarharaicha Municipalities. Beside this I aimed to find the problems of SHS and to find out the effective implementing measures of S.H.S.

The study followed descriptive, qualitative as well as Quantitative research design, interview schedule and observation was the tool of the study. Required data and information were collected by interviewing by myself. Data were interpreted statistically with the help of mean and percentage which were shown in table, picture, figure, pie chart in the form of percent. To identify the service and facilities of S.H.S., the Existing condition of the school were treated as independent variable and appraisal, preventive and remedial aspect were taken as dependent variable and available information was managed manually in chart. Analysis and interpretation of data were done sequently as per objectives of the study. Finally at the end part of the study, brief summary, major finding of the study, conclusion and recommendation of the study are presented.

5.2 Major Findings of the study.

5.2.1 Existing condition of the schools.

- a) Among the 43 schools only 7% have good play ground, 49 % have satisfaction play ground and 44% of the schools have poor condition of play ground.
- b) In terms of condition of ventilation and window among total school 19 % have appropriate and 81 % don't have appropriate condition of ventilation and window.
- c) Among these schools, 72% schools toilet sanitation is in satisfactory condition, 21% are in poor condition and 7 % are in good condition.
- d) Among these schools only 76% have soap in toilet 24 % don't have soap in toilet.
- e) Among 43 schools 65% schools have appropriate furniture and 35 % don't have appropriate furniture.
- f) Most of the school (60.5%) use tap as a sources of water and 39.5% use hard pump but none of school purify the water.
- g) About 49% of school don't have enough dustbin and 51 % have enough dustbin.
- h) Only 5 % schools sanitation is in good condition, 23 % have poor condition and 72 % school sanitation is satisfactory.
- i) Most of the school (81.5) use burning 14% use dumping method to manage waste and 4.5% of school don't manage waste.

5.5.2 Appraisal aspects of S.H.S.

- a) In terms of health observation only 35% school among 43 school observe the health condition of the students and 65% don't.
- b) Among 43 school only 14% schools do screening test and 86% don't do screening test.
- c) About 7% only school do health examination and 93 % don't do health examination.
- d) Among 43 school only one school has school clinic facilities.
- e) Among 43 schools only 7% schools have separate treatment room.
- f) Among 43 schools only 1 school has health specialist and other don't have.

- g) In terms of health campaign only 14 % school conduct health campaign for their students and 86 % don't conduct health campaign.
- h) Most of the schools don't have essential drugs only 21 % schools has essential drugs and 79 % don't have.

5.2.3 Preventive aspect of S.H.S

- a) Each and every schools among 43 provides knowledge about preventive measures of disease.
- b) Most of the schools has used safety measures but still 46.5 % schools hasn't used safety measures of schools.
- c) All schools among 43 provides safety education to the students to reduce accidents and injury.
- d) Most of the schools don't follow up infected students only 28% schools follow up the infected students.
- e) Only few 16 % schools don't have first aid facilities and 84 % schools have first aid facilities.

5.2.4 Remedial aspects of S.H.S

- a) All schools of Sundarharaicha provide health guidance and counselling facilities to the students only 37 % schools has exceptional child and 63 % don't have exceptional child and school.
- b) Among 16 schools those who have exceptional child only 1 school has separate classroom for teaching exceptional child.
- c) All the school refers student to the hospital or health post in an emergency.

5.5 Conclusion

In this study the investigator has tried to show the clear picture of practices and facilities of S.H.S in Sundarharaicha Municipality government school. Specially four components i.e existing condition school, appraisal aspect, preventive aspect and remedial aspect. are discussed in this research. The study has found out that only few schools existing condition is good. Most of the schools don't have good play ground, appropriate furniture, Windows. The sanitation of school, toilet is in good condition in some of the schools only most of schools use tap as a sources of water and none of the schools purify it. Most of the schools have soap in the toilet. About half of the schools

don't have appropriate dustbin and most of the school manage the waste by burning. Most of the school don't do health observation, screening test health check up and don't have school clinic facilities, separate treatment room, health specialist. Only few schools have essential drugs and conduct health campaign. All the schools provide knowledge about preventive measures of diseases and about safety education, but only half schools have used safety measures at schools to reduce accidents. Most of the schools don't follow up the infected students and only few schools have first aid facilities. Every schools provide health guidance and counselling services to the students. About one third schools have exceptional child but among these one third only one school has separate room for exceptional child and other schools care them as other students.

Finally, from the above list fact, it can be said that. Most of the schools are lacking in appraisal, preventive and remedial aspects in S.H.S. There is lack of health knowledge among the staff of the schools. Hence to overcome this situation, government as well as school Administration should work on S.H.S and provide knowledge on S.H.S through different seminar, work shop, training to the teacher and implement school health program effectively.

5.4 Recommendations.

Recommendation of this study is given below as in three section separately. General recommendation, Recommendation for National policy and recommendation for the further study.

5.4 General Recommendations.

- a) There must be standard playground, healthy living, proper waste management, pure drinking water and soap in toilet at school,
- b) There must be regular observation of health condition of students and send them for health screening and examination if required and school clinic facilities along with essential drugs, separate treatment room, health campaign and health specialist to ensure students healthy living and prevent them for further injury.

- c) All schools provide safety education, health guidance but very few has used safety measures at school. So every schools must use safety measure at school and manage first aid kit.
- d) Few school have exceptional child but only one has separate room for them. So there must be separate room and special care for exceptional child to ensure their proper development.
- e) Training and orientation about S.H.S school be given to school staff. to make it effective.

5.4.3 Recommendation for National policy.

- a) Knowledge, Practice and facilities of S.H.S have been inducing in national police but implication aspect is very poor and limited in paper only. So a strong and collective policy should be emphasized by the concerned department and ministry and regular supervision and feedback is required.
- b) Municipalities, Ward should cooperate with school administration and other local organization to support S.H.S.

5.4.3 Recommendation for further Research.

Further research can be undertaken the further study on as following.

- a) Study should be conducted to find out the S.H.S. practice and facilities available in government school of the country.
- b) Selection of large area and sample can give the clear picture of the study.
- c) This is a descriptive type of the study therefore analytical study is recommended for further study.

- viii) How many teachers are there in your school?
- a) Male b) Female
- ix) How many office helpers are there in your school?
- a) Male b) Female
- x) What is the source of water in your school?
- a) Tap b) Hand pump
c) Well d) others
- xi) Do you purify the water before drinking?
- a) Yes b) No
- xii) If yes than, by which method?
- a) Filter b) Soadish
c) Piush d) Other
- xiii) Is there enough dust bin in your school?
- a) Yes b) No
- xiv) How do you manage wastes of your school?
- a) Burning b) Dumping
c) Burial d) Don't manage

B) Appraisal aspects of School Health Services

- i) Do you observe the health status of student time to time?
- a) Yes b) No
- ii) Yes than, which aspect do you observe?
- a) Eye b) Teeth
c) All d) Other
- iii) Yes, than who observe the health status of student?
- a) All b) Nurse
c) Health teacher d) Medical personnel
- iv) Do you take screening test of your student?

- a) Headmaster b) Medical personnel
- c) Health teacher d) Other

xi) Is there first aid facilities in your school?

- a) Yes b) No

xii) Yes, than what type of instruments are there in first aid kit?

.....
.....

xiii) Do you have used safety measures while constructing physical structure of school?

- a) Yes b) No

xiv) Have you done any things to reduce accident in your school?

- a) Yes b) No

D) Remedial Aspect of School Health Services

i) Do you have health guidance and counselling facilities in your school?

- a) Yes b) No

ii) Yes, then who provides it?

- a) Headmaster b) Medical personnel
- c) Health teacher d) Other

iii) Do you follow up the student if he is sick?

- a) Yes b) No

iv) Yes, than who follow up?

- a) Headmaster b) Medical personnel
- c) Health teacher d) Other

v) Do you have exceptional child in your school?

- a) Yes b) No

vi) Yes,than how do you take care of them?

.....

.....

vii) Is there separate class for exceptional child?

- a) Yes
- b) No

viii) Have you refer any student to hospital?

- a) Yes
- b) No

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