SEAMEO INNOTECH
RESEARCH Updates

School Health Care and Nutrition in Primary Schools in Southeast Asia: Policies, Programs, and Good Practices

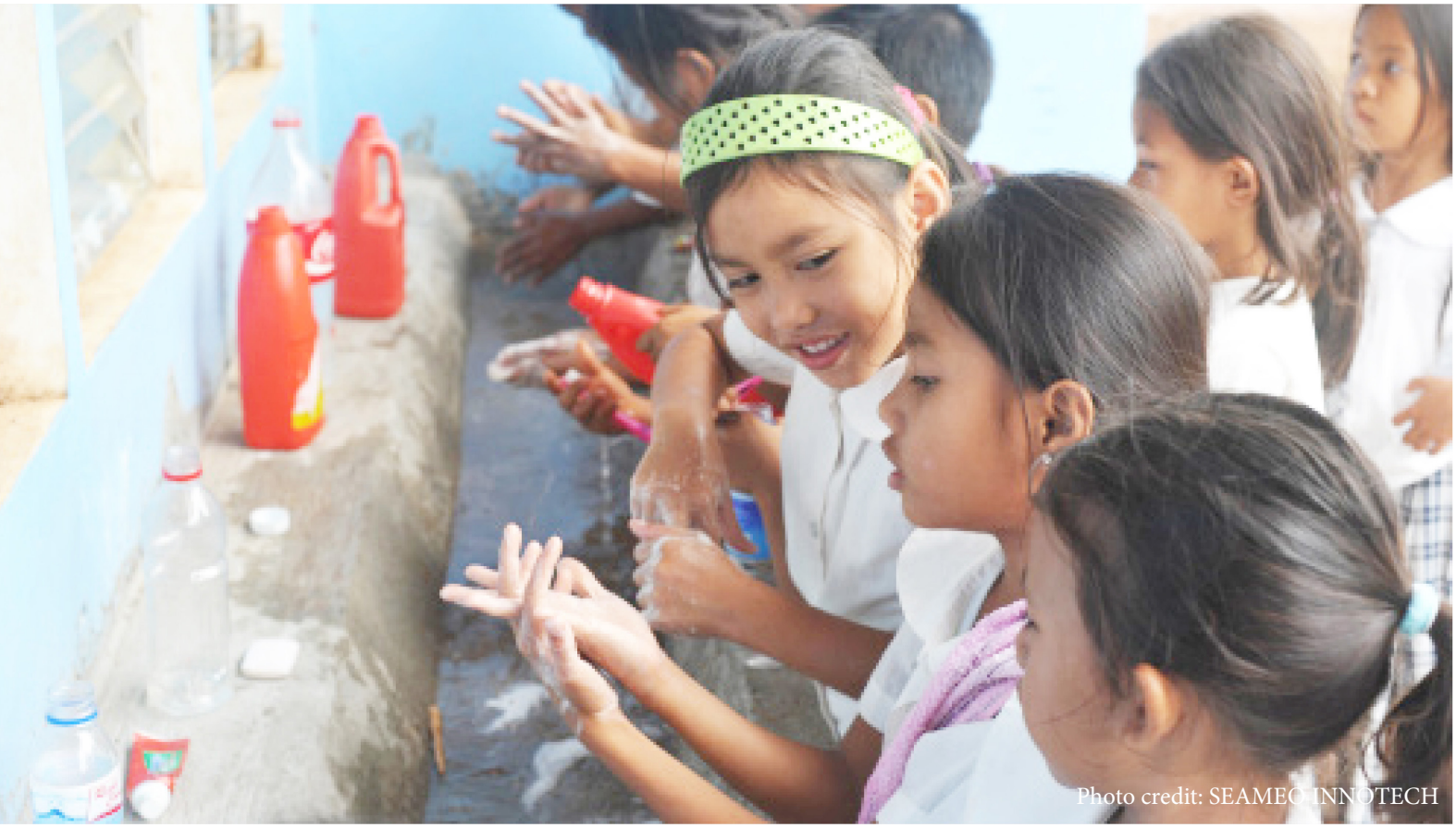

Photo credit: SEAMEO INNOTECH

School Health Care and Nutrition in Primary Schools in Southeast Asia: Policies, Programs, and Good Practices

The focus of school health care and nutrition (SHCN) in recent decades has shifted away from preventing diseases and towards promoting and protecting the health and well-being of all pupils, particularly those who are poor and vulnerable. As a result, SHCN programs have successfully led not only to improved student health and performance but also to increased chances for disadvantaged children to attend and finish school.

Given this well-established link between student performance and their health and nutrition, countries in Southeast Asia have been working with non-government, government, and international organizations to develop, fund, implement, and monitor school-based health and nutrition programs. Many of these school health initiatives target grade school students, as the primary school system has been the main channel for delivering basic health and nutrition services to children.

Guided by the perspective that school-based health and nutrition programs can help countries in Southeast Asia improve access to education and student achievement and supported by funding from the SEAMEO INNOTECH Regional Education Program (SIREP), SEAMEO INNOTECH conducted a two-phase study on School Health Care and Nutrition in Primary Schools in Southeast Asia vis-à-vis the following components of coordinated school health:

- **Healthy and Safe School Environment** which covers the school's physical environment, access to WASH (water, sanitation and hygiene) facilities, psychological climate, and overall culture;
- **Health Education** which refers to classroom instruction addressing the physical, emotional, mental and social aspects of student health and well-being;
- **Physical Education** which refers to the planned sequential curriculum aimed at promoting physical activity and fitness as well as developing sports skills among students;
- **Nutrition Services** which pertain to all efforts to promote healthy eating among students both inside and outside the school;
- **Health Services** which include programs, emergency protocols, and nursing and dental services designed to prevent health problems and injuries and ensure care for students;
- **Counseling, Psychological, and Social Services** which aim to prevent mental and emotional problems early on and enhance healthy development;
- **Health Promotion for Staff** which covers school programs that encourage school staff to lead healthy lives and support the school's overall coordinated health program; and
- **Family and Community Involvement** which refers to all efforts by the school to elicit SHCN support from the students' families and the surrounding community.

Phase 1 reviewed current national policies, frameworks, and programs implemented in support of SHCN in seven member countries: Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Philippines and Thailand while Phase 2 featured case studies of selected primary schools with good SHCN programs and practices in six countries: Indonesia, Myanmar, Philippines, Singapore, Timor-Leste, and Vietnam.

Key Findings

Research findings show that SHCN implementation in the seven countries covered in Phase 1 is strengthened by the existence of many national policies and frameworks on health and education. In addition, school case studies featured in Phase 2 show that many of the programs implemented at the school level are driven and guided by these national policy documents, but that the region's decentralized approach to school management allows principals and school heads to 1) choose which programs to prioritize based on the health and nutrition status of their students, 2) customize implementation


Photo credit: SEAMEO INNOTECH

to best address the school's and community's pressing needs, and 3) craft and implement original SHCN programs to address health and nutrition concerns not covered in the national education or health agenda. Good practices emerging from Phase 2 of the study touch on almost all of the eight SHCN components, with most focusing on Nutrition Services, Health Services, and Health Education. On the other hand, there was no identified country good practice targeting the Health Promotion for Staff, and most of the existing programs addressing this SHCN component are initiated by individual faculty or staff members instead of embedded in the school's overall SHCN plan.

"SHCN implementation in Southeast Asia is strengthened by the existence of many national policies and frameworks on health and education, and many of the programs implemented at the school level are driven and guided by these national policy documents."

Factors that Lead to Successful SHCN Programs

The factors considered to be most crucial to the successful implementation of SHCN programs in primary schools are effective collaboration between government agencies and strong partnership with different stakeholders. Strong policy support and adequate program funding, when available, also go a long way in ensuring the success of the school's SHCN programs. Also worth noting is the combination of strong leadership and adequate human resources, as both are crucial to the success of SHCN particularly at the school level. Some respondents also believe that solid community support is key to achieving student health and nutrition targets, while others think that a holistic and functional monitoring and evaluation (M&E) scheme is necessary for effective SHCN implementation.

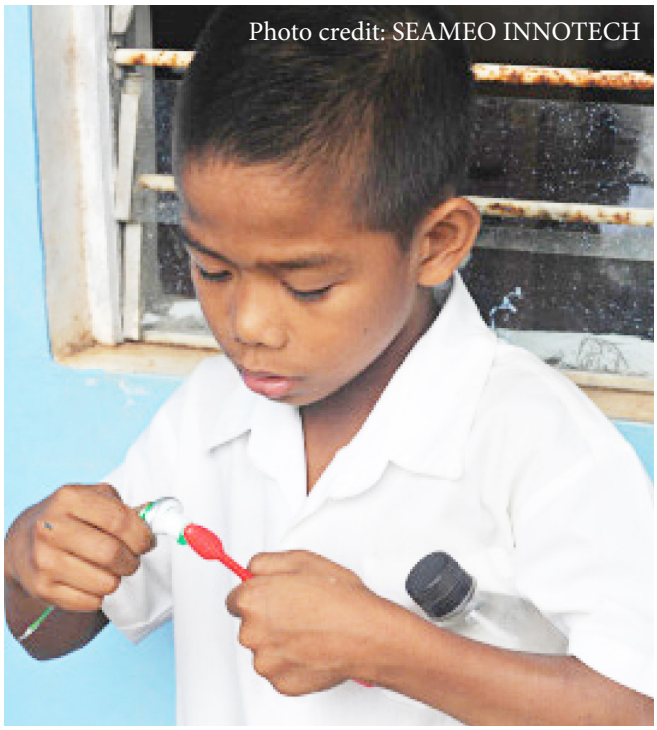
Photo credit: SEAMEO INNOTECH

Challenges to Effective SHCN Implementation in the Region

Southeast Asian countries also face conditions which impede successful SHCN implementation in the region. Although already being done, coordination within and among government agencies can still be improved. Limited or insufficient funding is also a major challenge for some countries, particularly because some of the health and nutrition programs are funded by international aid or private donors. Related to this is the inadequacy of SHCN facilities in schools to support effective program implementation, particularly in schools with large student-to-staff ratio. In addition, the compensation package for school staff is not attractive enough in a few of the countries to motivate the best licensed professionals to pursue a career in school-based healthcare, while the limited career path is also a disincentive for others. Some also voiced out the need for more SHCN-targeted professional development opportunities so that they themselves can be better program implementers. Another common challenge is lack of full support from the parents of students, particularly when parents themselves are indifferent to health and nutrition concerns. Students themselves also lose interest in SHCN at times, and this often manifests in the lack of success among schools when it comes to sustaining positive behavior change in their students.

Future Directions for SHCN in Southeast Asia

Although the challenge to close the gap between SHCN policies and actual SHCN implementation remains, education stakeholders in Southeast Asia continue to take steps to improve SHCN implementation in the region. To this end, school principals, head teachers, and ministry officials surveyed for this study offered the following recommendations which could help improve SHCN implementation in primary schools in Southeast Asia:

- **Foster a strong policy environment that encourages inter-sectoral collaboration and helps realize the sustainable development goals (SDGs) on ensuring healthy lives, promoting well-being, and providing inclusive and quality education for all.** MOEs should work to establish a policy environment that engenders collaboration among stakeholders and active teacher and student involvement in program implementation. Moreover, the global commitment to take steps to provide adequate healthcare, particularly to the disadvantaged, should also be reinforced.


Photo credit:
SEAMEO INNOTECH

- **Improve SHCN implementation in the region's primary schools by strengthening operationalization of Focusing Resources on Effective School Health (FRESH), a widely adopted framework for utilizing primary schools as the main channel for delivering basic health and nutrition services to children.** Because funding for child healthcare in many countries in Southeast Asia is insufficient, it makes sense for governments to aim to craft and implement policies that promote and protect the health of everyone at school and ensure that they have access to a clean environment, skills-based health education, and simple yet cost-effective health and nutrition services delivered through the school system.

- **Thoroughly consider implementation concerns during policy formulation.** The facilitation of rapid and large-scale implementation of school-based health and nutrition programs should already be considered early on and throughout the policy formulation process instead of as an afterthought after programs are already being rolled out. Right from the start, MOEs should already be looking for strategies to ensure and maintain quality in the delivery of SHCN programs as they are scaled up.

- **Strengthen capacity-building efforts at the school level.** Representatives from each country's MOH can conduct workshops to adequately train school staff and teachers on their respective countries' national health standards. Training sessions on school-based management can also be held for school heads so they can hone their skills on designing, implementing, and managing SHCN programs and projects within education systems which are increasingly becoming more and more decentralized. Opportunities for knowledge sharing on SHCN among school heads through cluster meetings and other peer-to-peer learning exchanges should also be encouraged and supported.

"Knowledge sharing on SHCN among school heads should be encouraged and supported."


Photo credit: SEAMEO INNOTECH

- **Allot a bigger budget for school-based health and wellness initiatives.** Central governments should make the implementation of effective, timely, and cost-efficient school-based health programs a priority, and government funding allotted to SHCN should reflect that. For countries following a decentralized governance structure, provincial and/or district governments should allocate regular budgets to cover the majority of material costs involved in delivering school health and nutrition interventions.

- **Strengthen efforts to integrate health promotion and wellness into the curriculum whenever possible.** Integrating health and nutrition topics into communication arts, science, or social studies lessons can reinforce what students learn about how to best take care of themselves and thus, help them retain this information. This approach may prove to be more effective in promoting health and wellness than conducting one-off community parades, sports fest, or contests which often require classes to be called off for a few hours or the whole day.

- **Expand on simple, scalable, and sustainable school-based health initiatives.** Many of the common health problems of grade-school children can be avoided if they consistently observe good hygiene, so there is a need to expand on SHCN efforts, such as or similar to the Fit for School (FFS) program, that promote hand washing, toothbrushing, deworming, and sanitary practices.

- **Engage pupils as active partners in implementing SHCN programs.** A good number of established and successful SHCN initiatives in the region provide students with opportunities to become health ambassadors and student leaders. Apart from the WASH in Schools program in which students are asked to help teachers supervise group activities such as handwashing and teach proper hygiene to their younger counterparts in school, programs such as Indonesia's "Little Doctors" and the Philippines' "Pupil-Led Total Sanitation" (PLTS) show that when students are given the chance, they can be effective change agents in their respective schools and communities instead of just being mere beneficiaries of the SHCN initiatives.

- **Encourage parents and other members of the school community to become more involved.** Efforts to enlist the support and increase the participation of all stakeholders should continue. Schools can work more with the PTA, local government officials, and other NGOs to increase parent and community engagement.

"When students are given the chance, they can be effective change agents in their respective schools and communities instead of mere beneficiaries of the SHCN initiatives.

- **Strengthen school-based management (SBM) and inter-sectoral collaboration. SBM can be an effective vehicle to implement responsive, quality SHCN programs, particularly if these are anchored on strong school-community partnerships as advocated by the FRESH framework.** Involving stakeholders beyond those in the school and further intensifying collaboration with them can help make SHCN initiatives more

effective and sustainable. Apart from education and health ministries, local government units (LGUs), nongovernment organizations (NGOs) and even sanitation and social protection agencies should also be engaged as partners as this could also help ensure successful SHCN implementation. The multi-stakeholder approach towards implementing SHCN would also give schools a wider support base from which to seek assistance and with which to share accountability. Representatives from the different agencies can hold quarterly coordination meetings, and a central online portal where everything can be updated, coordinated, and monitored may also help align efforts within and among government offices.

- **Strengthen monitoring and evaluation (M&E) systems and use data for benchmarking purposes as well as to plan and design SHCN program assessment.** To encourage accountability and further engage school administrators and project managers, countries should develop or enhance assessment systems to monitor and evaluate the impact and success rate of school-based health programs. A comparison of results among different schools can also be done in order to identify best practices and common pitfalls.

- **Conduct further studies to help stakeholders better overcome the challenges to successful SHCN implementation.** School heads and education ministry officials in Southeast Asia have reported finding it difficult to enlist genuine engagement from the community, generate enough funds, and sustain behavior change in their students. As such, future research endeavors can look into cases of particular schools and countries that have successfully overcome such hurdles in their implementation of health and nutrition initiatives from school-aged children. Education ministries can look into effective approaches to best support primary students in the region to translate their awareness of and learnings on health and wellness to good habits that they will continue to practice inside and outside of school.

SEAMEO INNOTECH hopes that through this study on school health care and nutrition in primary schools in Southeast Asia, more education professionals will recognize the importance of promoting and protecting the overall health and well-being of students in Southeast Asia. More importantly, it is hoped that the findings from the study will support SEAMEO member countries in their efforts to strengthen their SHCN policies, address current challenges to effective SHCN implementation, and ultimately close the gap between SHCN as envisioned in national education and health plans and how it is actually implemented in districts and schools.

The full "School Health Care and Nutrition in Primary Schools in Southeast Asia: Policies, Programs and Good Practices" report can be accessed electronically via the SEAMEO INNOTECH website at www.seameo-innotech.org.

Educational Research Unit
SEAMEO INNOTECH
Commonwealth Avenue,
Diliman, Quezon City
Philippines 1101

Tel: (632) 924-7681 to 84
Fax: (632) 926-1554, (632) 351-7147
Email: info@seameo-innotech.org
www.seameo-innotech.org