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CHILD FRIENDLY SCHOOL INITIATIVE AT THREE PRIMARY HEALTH CENTERS OF BELGAUM DISTRICT, KARNATAKA

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ABSTRACT

Background

Children between the ages of five-seventeen years are school children. Children spend most of their time during the day in the school. Hence the present study was undertaken to determine how many schools met these 10 commandments for the child friendly school initiative. The aim of the present study is to find out how many schools met the 10 criteria of Child Friendly School Initiative.

Materials and methods

This cross-sectional study was conducted at 3 Primary Health Centre's, in Belgaum. 60 government primary schools were selected and necessary data related to 10 criteria's of child friendly school initiatives was collected.

Results

In 42% schools, weight of the school bag exceeded 10% of the child's weight. 82% of schools provided hygienic drinking water. More than 60% of the schools did not have adequate urinals and latrines.

Conclusion We found that none of the schools met all the 10 commandments .Although 50% of them followed 4 to 5 criteria.

KEYWORDS: Child friendly school initiative, Child friendly schools, Indian Academy of Paediatrics, Primary health centres.



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INTRODUCTION

Children are the creators and shapers of a nation's tomorrow. India has the largest child population in the world. The number of children under age 18, which was 428 million in 2001 and rose to 430 million in 2006, is projected to remain above 400 million in the coming decade¹. Out of every 100 children, 19 continue to be out of school. Of every 100 children who enrol, 70 drop out by the time they reach the secondary level. Of every 100 children who drop out of school, 66 are girls². Children spend a significant portion of their time in schools and its environment definitely carries a bearing on their well being. Children between the ages of five-seventeen years are school children. About 30 percent of the population is comprised of this age group. Children spend most of their time during the day in the school. They are exposed to varied environmental factors within the school. Each child interacts differently to these factors depending upon his/ her biological factors, socio-cultural and economic background etc and may develop some health problem which may impede health and learning activities. To make attending school attractive to the children it must have an environment of good quality characterized by several essential aspects which are inclusive of children, effective for learning, healthy and protective of children, gender-sensitive, involved with children, families, and communities^{3,4}. Therefore to prevent the drop outs child friendly school initiatives should be adopted.

ASPECTS OF CHILD FRIENDLY SCHOOL INITIATIVES

It consists of 10 commandments that schools should meet in order to promote positive health for children.

- 1) No physical punishment
- 2) No excess baggage
- 3) Safe and proper transportation to school
- 4) Hygienic drinking water
- 5) Clean kitchen or a place where children can bring and eat house food
- 6) Minimum 4 games periods in one week
- 7) Properly ventilated and illuminated classrooms

8) Periodic health check-ups and health related lectures

9) Facility for first aid in emergency

10) Adequate number of toilets.⁵

Hence the present study was conducted to find out how many schools met the 10 criteria of Child Friendly School Initiative at three primary health centers of Belgaum district.

MATERIALS AND METHODS

This cross-sectional study was conducted at 3 Primary Health Centre's, Kinaye, Handignur and Vantamuri which come under field practice area of the Department of Community Medicine, JNMC, Belgaum district Karnataka. There are a total of 92 schools under the 3 PHC's and we decided to include 60 government primary schools, based on proximity to our 3 health centres. A questionnaire was designed based on the criteria recommended by the Indian Academy of Paediatrics^{5,6,7,8}. The survey was conducted in 20 Government Primary Schools each from 3 primary health centres. The study period was of 1 month duration from 1st June to 30th June 2012.

All the schools selected were visited and necessary data related to 10 criteria's were collected using the pretested and predesigned questionnaire by inspection of the school premises and interviewing the Headmaster. All the information was analysed using proportions and percentages.

RESULTS

Table I depicts the amount of Government schools following the 10 criteria's proposed by the IAP. Physical punishment was not practised in any of the schools. In 42% schools, weight of the school bag exceeded 10% of the child's weight. None of the schools provided transportation in the form of buses and the students came by walking to school. 82% of schools provided hygienic drinking water. The majority of the government schools had kitchen. 83% of the schools had 4

game period in a week. 22% of the government schools had one large room divided into smaller classes by dividers. 22% of schools had inadequate ventilation and illumination in classes. 65% of the schools did not provide desks. In 60% of schools area/student was adequate. All the schools

had health check – ups once a year at the school premises. 78% schools had well equipped first aid box. 62% of the schools did not have adequate urinals and 67% schools did not have adequate latrines. Facility for running water was present in 35% schools.

Table I
Distribution of schools with respect to 10 commandments of IAP

Commandments	Government primary schools
Physical punishment practised in school	0%
Excess baggage carried by students	42%
Availability of safe and proper transportation	0%
Hygienic drinking water	82%
Hygienic kitchen	75%
Minimum four game periods in one week	83%
Properly ventilated and illuminated classrooms	57%
Adequate area/student in classroom	60%
Periodic health check-ups	100%
Availability of first aid kit	78%
Adequate urinal/students	38%
Adequate latrine/student	33%

DISCUSSION

Children spend a significant proportion of their time in schools and its environment definitely carries a bearing on their well being. The Child Friendly School Initiative (CFSI) is operating in other countries too and is geared to meet local needs. The Child Friendly Schools (CFS) initiative in Nigeria was developed as a partnership between the Ministry of Education & UNICEF in the 1990s. Less than 80 percent of school-age children were enrolled in school. About a third of that number did not complete primary school, while two thirds did not achieve basic literacy or numeric proficiency. Schools had inadequate classroom space, furniture, equipment and teaching/learning materials; many of them had inadequate water, health and sanitation facilities; and there was very limited community involvement in education. Teachers were poorly motivated and used ineffective teaching methodologies. Hence this strategic partnership, which later became the child friendly school initiative^{6,9}.

In the present study majority of the schools followed the child friendly initiatives like no physical punishment to the students by the teachers, provided hygienic drinking water,

clean kitchen, provided 4 games periods in a week, periodic health check up to the students. Whereas only 57% of schools provided proper ventilated and illuminated classrooms, 11% provided clean area where children can bring and eat house food. Physical punishment was not practised in any of the schools as it is against the law¹⁰. As for fit drinking water, the headmaster was asked about the source of the drinking water, frequency of testing and the method of decontamination of the water. Most of the government schools had kitchen, possibly because of the presence of the government sponsored mid-day meal program at these schools^{4,5}. All the schools had health check – ups once a year at the school premises. The school health committee 1961 in India recommends medical examination of children at the time of entry and thereafter every 4 years^{5,11}. Headmaster was enquired about knowledge of teachers in first aid, as well as the presence of a well equipped first aid box. In every school fully equipped first aid post should be provided as per regulations of St. John Ambulance association of India⁴.

65% of the schools did not provide desks, whereas it is desirable to provide single desks and chairs, with minus type and proper backrest¹². The children carried excess baggage with no duplicate set of books in the home and schools. In some schools the weight of the school bag is exceeded 10% of the child's weight. None of the schools provided transportation in the form of buses and the students came by walking to schools. Whereas it is recommended to have a bus with trained driver and conductor. Most of the schools had 4 game periods in a week, which helps the children in personality development⁵. Some of the government schools had one large room divided into smaller classes by dividers. Hence ventilation and illumination in such classes were inadequate. The area/student was adequate in 60% of schools as there were few students per class. One urinal per 60 students and one latrine per 100 students were provided in 40% of schools which is according to recommendation of school health committee 1961^{4, 5}. There were

no facility for running water; students used stored water from tanks. The water in these tanks was collected from the common well which was chlorinated once in three months by the Gram Panchayat. The water was tested for chemical and biological contamination by the nearby primary health centre and the District health office respectively as per the guidelines¹³. We found that none of the schools met all the 10 commandments. Although 50% of them followed 4 to 5 criteria.

Recommendations

1. Child friendly school initiative helps school personnel to assess school environment.
2. Provides the need to emphasise to make schools a friendly place for children.
3. Provides the guidelines for the government to set the standards to certify the schools for being child friendly schools.

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REFERENCES

1. Child rights in India: Current status and challenges. India paper For High Level Meeting on Child Rights in Asia Pacific Region. 2010.
2. 'Human Development Report', 2005, UNDP, Oxford University Press, New Delhi.
3. Child friendly schools, UNICEF Manual 2009.
4. Park K. School Health Service. Park's Textbook of Preventive and Social Medicine, 21st ed. Jabalpur: Banarasidas Bhanot. 2011; 532-535
5. Inamdar S. Ten commandments for child friendly school initiative. Indian Pediatr 2005; 42: 269-272.
6. Hegde A, Shetty A. Child friendly school initiative at Karkala Taluk, Karnataka. Indian Pediatr 2008 May; 45(5):407-9.
7. School bag policies and procedures for memorandum prepared by student service and International Relations. Department of Education, Division of Malta Floriana. [https://www.education.gov.mt/ministry/doc/pdf/schoolbags .pdf](https://www.education.gov.mt/ministry/doc/pdf/schoolbags.pdf) Accessed on 20 November 2012.
8. Gupte S. Rights of the Child. The Short Textbook of Pediatrics. 11th Ed. New Delhi: Jaypee Brothers, India. 2009: 17-18.
9. Child Friendly School Initiative in Nigeria <http://www.air.org/expertise/>

- index/?fa=viewContent&content_id=751_ Access-ed on 20 November 2012.
10. The Juvenile Justice (Care and Protection of Children) Act 2000, Section 23. National Institute of Social Defence. Ministry of Social Justice and Empowerment. Government of India. <http://hyderabad.ap.gov.in/revenue/nclp/pdf/jlact.pdf>. Accessed on 22 October 2012.
 11. Report of school health committee, Part I, Central Health Education Bureau, New Delhi; Government of India: 1961.
 12. Report of seminar on school health services, Central Health Education Bureau New Delhi 1965.
 13. Park K. Purification of water. Park's Textbook of Preventive and Social Medicine. 20th ed. Jabalpur: BanarasidasBhanot,2009: 624-628.