



Republic of Zambia

MINISTRY OF EDUCATION

**Guidelines for the Implementation of
School Health and Nutrition
Programme Activities**

September 2008

ACRONYMS

AIDS	Acquired Immune-Deficiency Syndrome
CHANGES2	Community Health and Nutrition, Gender and Education Support-2
HIV	Human Immuno Virus
CDC	Curriculum Development Centre
ZNUT	Zambia National Union of Teachers
MACO	Ministry of Agriculture and Cooperatives
MCDSS	Ministry of Community Development and Social Services
MCH	Maternal and Child Health
MLGH	Ministry of Local Government and Housing
MoE	Ministry of Education
MoH	Ministry of Health
DEBS	District Education Board Secretary
WFP	World Food Programme
TA	Technical Assistant
CHU	Child Health Unit
WASHE	Water and Sanitation Health Education
UNICE	United Nations Children's Emergency Funds
PHASE	Personal Hygiene and Sanitation Education
MSYCD	Ministry of Sport, Youth and Child Development
WHO	World Health Organization
UNESCO	United Nations Education Scientific Cultural Organization
NFNC	National Food and Nutrition Commission
SHN	School Health and Nutrition
FPP	Focal Point Person
STI	Sexually Transmitted Infection
UNICEF	United Nations International Children's
IMCI	Integrated Management of Childhood Illness
ZCB	Zambia Bilharzia Control
DHMT	District Health Management Team
FPMU	Food Programme Management Unit
MCDSS	Ministry of Community Development and Social Services
TT	Tetanus Toxoid
ITN	Insecticide Treated Net

FOREWORD

The guidelines are based on the National School Health and Nutrition Policy, which takes into account the Ministry of Education Policy statements and addresses SHN interventions.

These guidelines are developed to help education providers and other implementers to understand and use the School Health and Nutrition strategies given to address and promote the health and nutrition status of the learners. This will in turn reduce children's absenteeism from School and increase their active learning capacity.

If learners learn and practice good health and nutrition habits and develop caring attitudes they will be able to disseminate health and nutrition information to their communities and the next generation.

It is therefore important that these guidelines are followed by learners, teachers, communities and other stakeholders so that schools become models of health and nutrition promotion.



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1.0 INTRODUCTION

The Ministry of Education Policy, Educating Our Future, recognises the fact that good health and nutrition is an essential pre-requisite for effective learning. Studies have shown that the introduction of the integrated Health and Nutrition interventions enhances the enrolment, retention and performance of learners in schools.

The SHN Policy is an elaboration of the chapter on educational areas of special concern contained in the Ministry of Education Policy specifically on school personal and environmental health.

The general objective of the SHN programme is to improve and provide equitable services in learning institutions, through integrated health and nutrition interventions, in collaboration with the community and other partners.

These guidelines are, therefore, formulated to help all implementers to understand and use the SHN strategies in line With SHN Policy. The guidelines will assist to accomplish the activities of the SHN programme.

1.2 RATIONALE

The education system strives to ensure that all learners access quality basic education. Ensuring that learners are healthy and are able to learn is an essential component of an effective education system.

According to WHO, UNESCO, UNICEF and WORLD BANK (APRIL 2000), good health and nutrition are not only essential inputs but also important outcomes of basic education of good quality. First, learners must be healthy and well nourished in order to fully participate in education and gain its maximum benefits. Early childhood care programmes and primary schools, which improve learner's health and nutrition, can enhance the learning and educational outcomes for learners. Second, good quality education can lead to better health and nutrition outcomes for learner, especially among girls, and thus for the next generation's learners. In addition, a healthy, safe and secure school environment can help learners from hazards and exclusion.

Consequently, the Ministry of Education strives to put in place school- based health and nutrition intervention programmes that will address the health nutrition concerns of learners. This is necessary to achieve "Education for All" and MDGs, even in the most deprived areas. Education investment in this way can lead to increased rates in enrolment, retention, progression, reduced absenteeism, repetition and drop out.

2.0 STRATEGIES FOR IMPLEMENTING SHN

2.1 Situation Analysis

Each School implementing SHN activities will be required to carry out a situation analysis of health and nutrition concerns of their school. This may entail looking at issues of health and welfare of learners, environment, health services, food security, safety of the school and social-cultural activities as they relate to SHN.

This information will be used to draw a comprehensive SHN Plan of Action and help the school mobilise human, material and financial resources for implementation of the programme. It will also help the school to develop indicators that will be used to monitor how SHN activities are being implemented. In addition, the situation analysis will help to advocate for support from all sectors including the community. Lastly, it will be used to evaluate and ascertain learners' benefits.

2.2 School Health Nutrition Committees

Each school must form SHN committees in addition to existing school structures such as Parents and Teachers Associations (PTAs) and Education Boards. These structures should be used for discussing Health and Nutrition concerns, mobilizing the community and resources.

The SHN committee should meet and identify the Health and Nutrition concerns and the appropriate interventions to address these concerns. The school needs to assess its technical capacity to implement the activities and the involvement of the community and other stakeholders beyond the community might be required. SHN committees at provincial and district level will comprise representation from line ministries like MoH, MACO, MCDSS and MLGH.

2.3 Action Plan

Each School will be required to produce SHN Action Plan jointly with other stakeholders including the learners and community. The Action Plan will address the what, who, how, when and where. It will also address short and long term objectives to be achieved.

2.4 Resource Mobilization

Internal and external resources can be sourced through the existing system and procedures. A school may also wish to use the leadership from various organisations but only through established structures and mechanisms. Resources so raised should be accounted for the particular activities. Therefore, accountability, transparency and other internal controls need to be developed to safe guard the sourced funds. Sourced funds and materials will become public funds and resources and will be audited as such.

2.5 Monitoring and Evaluation

A standard monitoring and evaluation tool should be used to measure performance of SHN. However, a school can develop its own monitoring and evaluation tool that can be used. The District Committee will help to carry out an assessment annually. The information collected from monitoring and evaluation should help them in planning and reviewing School activities other than just forwarding the information to higher levels.

2.6 Reporting Systems

Schools shall use a standard reporting format to compile data for onward transmission to national level through districts and provincial level as required.

2.7 Accreditation

Schools shall be accredited according to the Health promoting school criteria set at school, zone, District, Provincial and National levels. Each level of the education system will formulate its own incentive for awarding the best performance based on the SHN implementation guidelines.

CHAPTER 3

3.0 IMPLEMENTATION OF SHN

The School Health and Nutrition Programme plays an important role in the promotion of Health and Nutrition for all learners. In order for the learners to participate actively and positively in learning they need to be healthy, have good nutrition and be exposed to a conducive environment. This chapter therefore highlights the salient areas in the implementation of the guidelines as they relate to health and nutrition issues. It specifically looks at health, nutrition, records, life skills and guidance and counselling.

3.1 HEALTH

Health is an essential component in enhancing the learning and educational outcomes of learners. In order to improve and maintain the health status of the learner and a conducive learning environment, the following should be done:

a) Vaccinations

Vaccination is aimed at reinforcing immunity. All vaccinations must be administered by trained health personnel.

The School and Health facility shall:-

- During Grade 1 enrolment, check under-five clinic cards for vaccinations received and ensure that all school children entering Grade 1 receive T.T., measles and other vaccination recommended by MoH.
- Vaccinate all girls above 15 years with T.T. and sensitize them on the importance of getting a total of five T.T vaccinations in their reproductive life.
- Arrange for vaccination for all transferred learners for vaccinations they have not received

b) Physical Examination

Class teachers shall be required to carry out a basic (head to toe) physical examination of all the learners before they enter the classroom to ascertain their personal hygiene; and their health status.

The School shall also arrange for a health worker to screen the learners at least once a year.

c) Treatment and Referrals

The School shall;

- Have a sick bay
- Ensure that basic medicine to treat minor illnesses are available and teachers are trained in their use
- Ensure that a well equipped First Aid Kit is available
- Refer the learner to the nearest Health Centre if the condition is serious and if it does not improve after basic treatment;
- Refer learners with medical deformities which need specialised care;
- Liaise with parents on the health conditions their children are experiencing;
- Collaborate with the health personal, local authority and community in cases of major health conditions/outbreaks affecting learners;
- Assist and provide Psychosocial support to the learners and parents of learners with chronic diseases;
- Encourage parents to put their children are on health scheme
- De-worm all children at least once a year with appropriate medication according to prevailing medical guidelines.
- Treat children with bilharzias with appropriate medication according to prevailing medical guidelines.
- Ensure that trained teachers administer the deworming drugs under the supervision of the trained Health personnel; and
- Ensure that teachers assess and screen all children before drug administration day

All SHN Drugs shall be stored at the nearest health centre where schools shall access them for administration to learners.

d) Environmental Health and Sanitation

It is important that the school environment shall be kept clean, safe and conducive for effective learning. Each school shall act as a model, and teachers as role models. The school can influence communities by using learners who are in touch with a large proportion of the households in the community. Therefore, under environmental health, the school should ensure the following:

- Regular supply of safe and clean drinking water
- Safe clean and well-ventilated classrooms that are **not** overcrowded;
- Adequate room and appropriate furniture for teachers and pupils to sit and write comfortably
- Accessible classrooms and facilities for children with Special Education Needs to get to their **classes** without much difficulty;
- Adequate and clean sanitary and hand washing facilities that are gender friendly and well sited
- Good and adequate, refuse disposal systems
- Structures are safe for **habitation** and use
- Regular inspection of surrounding, structures and facilities and regular maintenance
- Collaborate with the community in maintenance of school facilities

- Collaboration with health personnel for guidance on environmental health issues and sanitation
- Provision of information on the importance of good environmental health and personal hygiene
- Guard against sources of pollution

e) Sexual and Reproductive Health

During the transition from childhood to adolescence, both girls and boys experience physical and physiological changes in their bodies. These changes will lead to different **patterns** of sexual behaviours, which maybe based on insufficient or incorrect information. Consequently, this may lead to risky sexual behaviours. Therefore, the school shall ensure that:

- The school staff are role models exhibiting high moral standards
- Learners understand the physical and Physiological changes that they may go through
- Learners are taught about growth and development in terms of sexuality and reproduction;
- Information given is gender responsive and age appropriate
- Learners are made to understand the risks of initiating sex at an early age and their consequences i.e. teenage pregnancies, STIs/HIV/AIDS
- Guidance on girl/boy relationships is provided
- Sexual harassment and abuse (physical and verbal) are explained and discouraged
- Information on available family Planning and other Reproductive Health Services is provided
- Learners are taught the social-cultural issues as regards sexual and reproductive health.

f) Communicable Diseases

Communicable Diseases are those that can be passed on from one person to another through air, touch, food, water and physical/sexual contact, e.g T.B, dysentery, cholera, salmonella (food poisoning), lice and some skin diseases.

The School in liason with local health authorities shall Institute measures to prevent and control communicable diseases

- Isolate all learners with communicable diseases as recommended;
- Educate children on the dangers of exchanging clothes and any other personal effects that may convey diseases;
- Ensure the school provides safe and clean drinking water
- Encourage hand washing at all times and ensure that properly positioned hand washing facilities are available

NOTE: There are many other ways of preventing and controlling these diseases. The teacher should explore these measures

g) Non-Communicable Diseases

Non-communicable diseases are those that cannot be transmitted from one person to the other.

i. Substance abuse

This section is restricted to habits like drug and alcohol abuse. These might cause addiction/dependence, and other health problems that can affect the heart, liver, lungs and many others

Therefore, the school should ensure that:

- Smoking and consumption of alcoholic beverages within school premises is prohibited
- Information on the dangers of substance abuse is provided to discourage the practice
- Learners consuming substances of dependence are referred to rehabilitation services
- Addicts or those committed to rehabilitation or those who have been rehabilitated from substance dependence should be not stigmatised or discriminated against

ii. Chronic diseases

This refers to diseases such as diabetes, sickle cell anaemia, epilepsy, heart diseases
Schools shall

- Identify learners with chronic diseases
- Acquire knowledge on chronic diseases and provide relevant support and information to learners
- Ensure learners with chronic diseases take their medicines appropriately

h) Health Promotion

Health promotion is the process of enabling people to increase control over, and to improve their health. It is a comprehensive process that not only embraces actions directed at strengthening the skills and capabilities of individuals, but also actions directed towards changing social environmental and economic conditions. Health promotion will impact positively on public and individual health. Participation by all stakeholders is essential to sustain health promotion action.

Therefore the school shall ensure:-

- High standards of personal and environmental hygiene are observed at all times
- Participation of the community in all health promoting activities;
- Health checks are carried out regularly
- Provision of health services .e.g. deworming
- Learners interact with the community to share ideas on health issues;
- Provision of health promotion information to community through appropriate committees and outreach activities
- Establishment of networks with other schools to share ideas on health issues;
- Guest speakers and/or celebrities are invited to give talks on specific issues
- Activities that contribute to health promotion, for example, drama and festivals are drawn up.

i) Safety and Emergencies

The emergencies are life-threatening conditions that require quick action in order to save life. Some of these emergencies are acute illness, disease outbreaks and accidents such as drowning electrocutions and injuries.

To have safety and emergency preparedness, the school should ensure that:-

- School communities are trained on how to prevent accidents
- School communities are knowledgeable in handling emergencies;
- Individual safety measures are observed when handling accidents and infectious diseases;
- Emergency cases are referred to the nearest health centre.
- The school environment is made as safe as possible with appropriate well labelled emergency exits
- Children are safe when playing
- There is a well stocked First Aid Kit in an accessible place
- Information on road safety rules is provided
- Safety rules are formulated and enforced
- Serviced fire fighting equipment is available

j) HIV/AIDS

HIV and AIDS is a major problem in Zambia. Children coming from infected/affected families and those living with HIV and AIDS may not be able to attend school because of many reasons including opportunistic infections.

Therefore the school in collaboration with stakeholders where necessary shall;

- Provide guidance and counselling services
- Ensure that learners living with HIV/AIDS and those affected are not stigmatised and discriminated against;
- Provide support to learners living with HIV/AIDS and those from affected homes
- Ensure that teachers are knowledgeable in handling minor opportunistic infections and refer serious infections to the health centres;
- Encourage abstinence and educate learners on the dangers of unsafe sex;
- Establish and or strengthen existing Anti-Aids clubs
- Have Youth Friendly Corners with HIV and AIDS materials
- Have peer educators within the school community;
- Inform the learners on the availability of Voluntary Counselling and Testing Services;
- Strengthen the teaching of HIV and AIDS in the classroom
- Ensure confidentiality of information of those infected with HIV

k) Malaria

Malaria continues to be a major public health problem in Zambia and is the leading cause of illness and death. However the disease is preventable and treatable and as such the MOH has put in place a number of strategies and tools to fight the disease.

Schools shall contribute to this fight by ensuring that:

- Learners are encouraged to sleep under an ITN every night
- Learners are advised to keep the school surroundings clean to get rid of any possible breeding sites for mosquitoes
- Learners seek medical attention within 24 hours of onset of malaria symptoms (fever, nausea, headache, muscle ache etc)

- Learners diagnosed with malaria are encouraged to complete the prescribed treatment regime as instructed by the health service provider
- All nets are treated and re treated appropriately
- All positive malaria cases are recorded and data given to relevant authority
- Malaria prevention and control messages are disseminated to the school community.

3.2 NUTRITION

Nutrition plays an important role in the physical and mental development of the learner. It enhances the learning capacity, ability to pay attention and concentrate.

Therefore, in order to promote the nutrition status of learners, the schools shall carry out the following activities:

a) **Growth monitoring and promotion**

- This is done to monitor and promote the growth and development of learners in relation to given standards.
- In collaboration with Health centres conduct regular weighing and height measuring of all learners at least twice a year.
- Counselling on growth problems
- Refer any cases of serious growth faltering to health and community based feeding centres, or any other organisation offering such services

b) **Micronutrient supplementation**

- Supplementation of learners with Vitamin A capsules once a year
- Supplementation of learners with iron tablets as per schedule.

c) **Food Production Units (cum [Home Grown School Feeding Programme])**

Documented evidence has shown that providing food at school promotes and fosters improved learning, health and nutrition of learners. In collaboration with communities and other stakeholders, schools shall ensure that Agricultural production units are used to;

- Teach children improved food production methods and agricultural entrepreneurship skills
- Encourage the growing of seasonal crops and the preservation of foods such as drying mangoes, vegetables and sweet potatoes.
- Ensure that all learners benefit from the agricultural Production Unit products
- To demonstrate sustainable agricultural methods and crop diversity

d) **Improving feeding and eating practices**

Schools shall

- Establish a tuck-shop, which should be selling healthy foods.
- Encourage the family to prepare and pack healthy foods for learners.

- Support the introduction of community based feeding schemes.
- Ensure that food handlers within school premises are medically fit and practice personal hygiene.
- Ensure all vendors are oriented on hygiene and sanitation so that foods sold in school are appropriately prepared, packaged and stored.
- Ensure that learners are advised and counselled on good feeding practices.
- Encourage consumption of traditional and local foods

3.3 HEALTH AND NUTRITION EDUCATION

Good nutrition practices come about when learners acquire knowledge and skills at an early age and develop into healthy and productive adults. Therefore the school shall ensure the following;

- Revitalise the Child to Child methodology to disseminate health and nutrition information.
- Apply the integrated method of teaching SHN issues as identified in the curriculum framework document.
- Teach basic health and nutrition principles.
- Teach the importance of personal hygiene and good grooming.
- Promote the consumption of micronutrient rich foods such as green leafy vegetables and fortified foods like sugar and use of iodated salt.
- Educate learners and community on how to read and understand food labels and symbols and how to make food choices when buying.
- Encourage learners and the community to eat a variety of foods.
- Educate learners on healthy eating habits to avoid becoming under or over nourished.
- Initiate nutrition clubs in schools and communities.

3.4 HEALTH AND NUTRITION RECORDS

Record keeping is cardinal in monitoring the health and nutrition status of learners. Schools shall be required to keep health and nutrition records of all learners.

It is important that:

- The information is in standard form(SHN Card)
- the information is clearly written ;
- the SHN card is kept for all school grades (one to twelve)
- all the required vital statistics on the school health record for all the learners are filled in and updated as necessary
- The learner goes with the SHN card when s/he is transferred to another school.

3.5 LIFE SKILLS

Life skills are abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life. It helps children to acquire and practice good health behaviours along with the underlying knowledge and positive attitudes.

The school shall ensure;

- A learner centred , interactive and participatory approach to SHN issues
- Learners are equipped with psychosocial, practical, vocational and entrepreneurship life skills
- Stakeholder participation in teaching life skills
- That communities within its catchment are made aware of life skills

3.6 GUIDANCE AND COUNSELLING SERVICES

Provision of Guidance and Counselling Services in a school should take into account issues of reproductive health, dangers of Sexually Transmitted Infections, HIV/AIDS, substance abuse and other issues that may have a bearing on the health and nutrition status of learners.

For effective Guidance and Counselling the school shall ensure:

- Provision of Guidance and Counselling services by trained staff
- Records of Guidance and Counselling are maintained in confidentiality
- Regular Interaction with parents/guardians if need be;
- Gender sensitivity and age when guiding and counselling;
- Referral to appropriate institutions is provided when problem requires further professional attention;
- Availability of a trained teacher in Guidance and Counselling.