



# Simplified Needs Assessment for Global School Health: A Pilot Approach

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## BACKGROUND

- Schools around the world provide education and have an opportunity to provide resources to improve health and safety for students and staff.
- The creation of a Global School Health Toolkit is in development with many national and international partners in the American Academy of Pediatrics.
- Collaborating with schools in under resourced sites, we adapted a simplified needs assessment to be used by health to guide partnership and drive interventions.

## METHODS

- Informal interviews with administrators of three private schools focused on education of poor children in North India during a month-long elective for 3<sup>rd</sup> year pediatric residents.
- Questions included how schools measure health, immunization records, response to illness/injury, nutrition, wash facilities, mental health, environment, and recreation.
- Follow-up questions were utilized to gain insight and evaluate possible challenges for future collaboration with health partners.
- Data was compiled electronically, qualitatively analyzed, and final needs assessment was shared with all schools.

## RESULTS

	Tibetan Children's Home (TCH)	Jagriti Vidyalaya (JV)	Johnson Secondary School (JSS)
<b>School information</b>	School with hostel Total 99 students, age 5 to 18 yrs (66 staying in school hostel)	Day school, all children living with families Total 102 students, age 3 to 13 yrs	Day school, all children living with families Total 650 students, age 3 to 18 yrs
<b>General health information</b>	No funds budgeted for student health	No funds budgeted for student health	No funds budgeted for student health
	No health information obtained upon enrollment	Required health enrollment forms for each student	No health information obtained upon enrollment
	Most common illnesses: diarrhea, headache, upper respiratory infection, fever	Most common illnesses: abdominal pain/vomiting, fainting, leg aches	Most common illnesses: fever, abdominal pain, upper respiratory infection, abrasions and minor injuries
<b>Current health practices at the school</b>	No staff with medical training on site	No staff with medical training on site	No staff with medical training on site
	School provides sick visits to two local clinics, and hostel staff dispenses prescribed medications	Child illness is responsibility of parent School provides limited funding if parents unable to afford care	Responsibility of parent to take child for evaluation when ill School unable to provide health funding
	No deworming medications No vaccines provided	Deworming provided twice per year Vaccines through ASHA* worker	No deworming medications No vaccines provided
<b>Nutrition and physical activity</b>	No written health policies	No written health policies	No written health policies
	Vegetarian food provided for 66 students living at hostel, varied and balanced diet	Food brought from home by children	Food brought from home by children
	Recreation time: 1 hour per day for day students, 2 hours per day for boarding students	Recreation time: 30 minutes per day	Recreation time: 15 minutes per day
<b>Water and sanitation</b>	Reverse osmosis system Bathrooms and showers with indoor plumbing	Reverse osmosis system Bathrooms with indoor plumbing	No water filtering system Utilize government water supply Children can bring water from home Bathrooms with outdoor plumbing
<b>Mental health</b>	No formal counseling or other mental health services	No formal counseling or other mental health services	No formal counseling or other mental health services
<b>Injury concerns</b>	Monkey bites	Transportation to school (motor bikes, scooters)	Mosquito borne-illnesses Bruises/scrapes on school grounds
<b>Requested areas for improvement</b>	General check-ups Medical personnel available to school as needed Vaccines provided	General check-ups Screening blood work	General check-ups Medical personnel available to school as needed Health education sessions

**Schools lacked formal health policies**  
**All had safe drinking water and toilet/hand-washing facilities**  
**No on-site medical staff**  
**All schools interested in first-aid training and general check-ups**

## CONCLUSIONS

- Utilization of a needs assessment aids in a thorough evaluation of current practices, highlights areas to improve health outcomes, and can strengthen collaboration and future partnerships between health professionals and school administrators.

## ADDITIONAL KEY INFORMATION

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