

## **UNICEF EDUCATION**

# **Education Case Study**

### **INDIA**

Integrated school health and wellness ensure better learning for students

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The Government of India recognises that schools create a unique opportunity to improve both the education and health status of learners throughout the country. However, the National Family Health Survey-5 recently found that 59 per cent of girls and 31 per cent of boys aged 15-19 years had iron deficiency anaemia, which reduces cognitive performance and can lead to learning difficulties. The Comprehensive National Nutrition Survey 2019 revealed that a third of adolescents are deficient in essential micronutrients like zinc, folate and Vitamin B12, and almost one fourth of adolescents have Vitamin D deficiency. These deficits can have severe consequences, including increased susceptibility to infections, blindness, reduced growth, cognitive impairment, decreased school performance and work productivity, and even death.

In response, the Ministry of Health and Family Welfare (MoHFW) and Ministry of Human Resource and Development, with technical guidance from UNICEF, launched the School Health and Wellness Programme in February 2020. This comprehensive programme sets out to reach 260 million schoolchildren and their families by 2030, aiming to:

- Provide age-appropriate information about health and nutrition to children in schools;
- Promote healthy, lifelong behaviors among schoolchildren;
- Test and treat diseases early in schoolchildren, including appropriate referral of malnourished and anaemic students to hospitals and doctors;
- Promote the use of safe drinking water in schools;
- Promote safe menstrual hygiene practices in schools;
- Promote yoga and meditation for physical and mental wellbeing; and
- Encourage research on health, wellness and nutrition for children.

In every public school, two teachers—preferably one male and one female—are declared Health and Wellness Ambassadors (HWA) and trained to promote healthy lifestyles and disease prevention information through engaging weekly activities in the classroom. To prevent anaemia among children, the programme also provides mid-day meals and weekly iron-folic acid. Other services include nutrition counselling, tobacco prevention and provision of life skills education.

UNICEF, in partnership with U.N. Population Fund and <a href="https://dx.doi.org/like/">Jhpiego</a>, provided technical support to the MoHFW and National Council of Educational Research and Training to develop <a href="https://dx.doi.org/11.00/">11 modules</a> on adolescent health, nutrition and wellbeing for implementation in schools. These modules address the comprehensive needs of adolescents to prevent disease or health issues before they occur, helping students make informed, responsible decisions regarding their own health and wellbeing.

There are no official studies yet connecting the programme with higher school attendance and retention, since COVID-19 shut down schools in India until just recently, in early 2022. However, the Government is investing in and prioritising linkages among education, health and food systems to respond to children's learning and growth needs holistically.

#### **RESULTS**

- At the outset, India's School Health and Wellness Programme targeted 72,000 schools in 108 aspirational districts (identified as the most under-developed) and 45,042 schools in 83 non-aspirational districts. However, within two years of implementation, the programme expanded to all 117 aspirational districts and 245 non-aspirational districts, or 52 per cent of the country's total 736 districts, reaching 10.9 million schoolchildren in 156,880 schools.
- UNICEF helped to train the National Resource Group (NRG), which provides guidance for bringing about reforms in teaching and learning processes, curriculum and monitoring and evaluation. The NRG, in turn, trained State Resource Groups to further train 235,311 teachers (48 per cent female) across 156,880 schools as HWAs and to orient 129,016 school principals. UNICEF is also ensuring quality of cascade trainings in schools via mentoring support to teachers.
- To provide peer support, HWAs and principals selected 320,607 students as Health and Wellness Messengers, who partner with HWAs to facilitate school activities that nurture a healthy learning environment. These include providing innovative ideas for engaging classmates in weekly sessions and encouraging attendance, organising 'question boxes' in schools and

- sensitising parents on better health promotion, strengthened prevention and curative measures.
- Many U.N. Agencies came together to support the Government and weave in various adolescent health issues under the 11 comprehensive school modules. While the U.N. World Health Organisation supported the operational framework, UNICEF and other U.N. Agencies helped develop the modules and execute field testing.

#### **LESSONS LEARNED**

- The active involvement of learners is key. Student Messengers take the lead in organising Adolescent Health Days, celebrated in schools under the programme, that provide stimulating activities students look forward to including debates, quizzes, development of jingles and painting competitions around the thematic areas.
- Learners, teachers, health workers, parents and communities must be jointly engaged to improve the overall health and wellbeing of students. The Government of India also convenes mega-adolescent days where 3-4 schools come together along with health workers, parents and others. This provides an opportunity for student health check-ups, referral to higher health facilities for students identified with ailments, on the spot checking of haemoglobin to ascertain anaemia and provide supplemental iron and folic acid tablets, and counselling services for adolescents.
- An integrated approach to school health and nutrition and coordinated actions are essential to bring multicomponent programmes to scale. Previously, adolescent initiatives were undertaken in piecemeal. The School Health and Wellness Programme, however, pulled together the MoHFW, U.N. Agencies and development partners to deliver services in an integrated way, addressing the comprehensive needs of students to improve health and learning.

### **NEXT STEPS**

The Government intends to expand the programme across all the districts of the country by 2025. Many state governments are taking ownership and scaling the programme to the entire state using their state budgets.

**Cost effectiveness:** From February 2020 to date, UNICEF India has invested about US \$100,000 in school-based health and nutrition interventions, benefitting 10.9 million well-nourished, healthy and educated schoolchildren.

