

PRIMARY SCHOOL PARENTS' PERCEPTIONS OF SCHOOL NURSE'S ROLE AND HEALTH SERVICES IN BACNINH CITY, VIETNAM

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ABSTRACT: The school nurse is the key person in school health services who contributes to appraise, protect and promote student health. This study aimed to determine the perceptions of primary school parents/ guardians toward school nurse roles and school health services and examined the level of parents'/guardians' agreement to support to school health services. There were 580 parents randomly selected from 2 primary schools of BacNinh city, one had school nurse (SN) and the other had school health staff (SHS) responding completely the self administrator questionnaires developed for the study. Chi square test was used to compare the knowledge of parents/guardians about school health programs and setting school nurse and health clinic in their children school. The parents in school having school nurse knew about school health programs higher than in school having school health staff ($p < 0.001$). More than 90% of parents/ guardians thought that it is needed of school health clinic (95.9%) and of school nurse working full-time (89.8%). Most of parents agreed support to school health services (99.3%) and willed to pay for school health services (97.4%). Most of parents/ guardians thought that the school where their children studying should have a school nurse and a health clinic to take care of student's health at school. They also agreed to support and were willing to pay from 20,000 to 40,000 VND for school health services.

Keywords: school nurse, school health services, perception, primary school parents

INTRODUCTION: School is one among the main settings for children to study and live. School can promote students' health and development. It can transmit prevalent cultural values to children through organizing training experiences¹. The schools enable to make effect to good health behavior by teaching about health and life skills for caring and protecting children health. To do these well, school need to have a specialized professional, who are trained to help advance and promote student well-being, academic success and lifelong achievement². As health care providers in schools, school nurse play a crucial role in assisting children to form positive health values, to develop life skills and to share experiences for solving health problems³.

School Health Services are services from medical, teaching and other professionals applied in or out of the school to improve the health and well-being of children and in some cases whole the families. "Health services in the school setting provide the opportunities to appraise protect and promote student health. The school health services require that professionals as school nurses take an

important role in overall children health"⁴). School health services are an important component of the public health system as they help to assure that students are healthy, in the classroom, and ready to learn⁵

The purpose of this research was to determine the perceptions of primary school parents/ guardians of school nurse's roles and health services provided by school nurses. In addition, the study also examined the level of parents'/guardians' agreement to support to school health services.

MATERIALS AND METHODS: Data collection: From 2 selected BacNinh primary schools in which one had school nurse (SN) and the other had school health staff (SHS), each school chose 10 classes including all 5 primary class levels. In each class, there were approximate 30 students. Total 615 students' parents were invited for participating. All teachers and parents of these classes were trained shot and explained the aim of study and the questions before answering the questionnaire. The participants of the study were willing to take part in the study, and they could refuse to join this study without effecting to the study of their children and

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without explanation. After one week, the questionnaires were returned and collected by teachers. There were 35 uncompleted questionnaires. A total of 580 usable questionnaires completed by a parent or by a caregiver were collected by teachers. The response rate was 94.3%. There were 287 parents/guardians of school having school nurse and 293 parents/guardians of school having school health staff. Instrument Development: All the questions of the questionnaire were translated to Vietnamese Language with formal valid checking. In the questionnaire, respondents (schoolchildren's parents/guardians) were explained about objectives and information of the study so that they completely understood before responding to all questions. The questionnaire contained 55 items included socio-demographic characteristics, the knowledge of parents/guardians about school health services and school health, the roles of school nurse, the types of school health services that were provided and the perceived importance of these role and school health services and their support of school health services. Measurement tool: The content validity was checked by 3 experts and 2 parents after constructing the draft questionnaire. Then the validity was revised after testing the questionnaire. The reliability was pre-tested on 40 parents/guardians of schoolchildren those are learning in other two selected schools. The Cronbach's alpha coefficient in pre-test was 0.85. Data analysis: Descriptive statistics and chi-square test were applied to describe the participants' characteristic and to compare their knowledge of 2 schools.

RESULTS:

Socio-Demographics Characteristics: The sample consisted of 53.1% male, 99.7% were parents of students, more than 50% were between 35 – 45 years old, and approximately 94% were married. About one-third of parents/guardians of both schools (37.1%) completed their high school, 37.6% worked for the government and 17.1% were private company employees. More than 50% were household work, home business owners (who owned a

small shop at home or in central market), motor-taxi drivers and farmers. Approximately 79.3% of the participants lived in urban areas and 20.3% in suburban and rural areas. Almost parents/guardians (88.3%) were non member of School Parent Association. In term of family income, the result showed 19.3% were poor families with monthly income per person less than 338,000 VND (\$20)⁶.

Parents'/ Guardians' Knowledge of School Nurse and School Health Services

More than half of the parents (56.2%) correctly knew about the availability of health clinic in their children's school and 79.5% said correctly their child school having or not having school nurse. On both data of setting health clinic and school nurse, the number of parents of school SN was higher than of school SHS with the strongly significant $p < 0.001$ (Table 1). Nearly three-fourths of the respondents (73.1%) knew about the school health services through School/Teacher. (Table 2)

Parents'/ Guardians' Perceptions of School Nurse and School Health Services

From 25 items of school nurse's roles, 10 roles of the highest percentage of importance were chosen to compare between the 2 schools. These highest percentages corresponded to the percentage of parents/guardians' assessment about "important" or "extremely important". All ten roles had more than 87% of estimation "important" or "extremely important". Most of the respondents thought that the school nurse had the responsibility of *providing first aid and emergency care to student* (99.1%) and *perform health screenings (vision, dental, etc.* (97.3%) (Table 3).

The study also showed that, some school health services were get highest parents thinking need to set in primary school such as *Checking up student health annually* (100%), *Protecting teeth and check oral* (98.8%), *Providing fresh water and environmental sanitation* (98.8%), *Food safety hygiene* (98.4%), *Check eye* (98.1%), *Check hearing* (97.8%), *Vaccination* (94.8%), and *Health education* (94.7) and some services get lowest services as *Sex education* (79.7%) and *EQ test* (85.2%).

Table 1 Knowledge of Parents about setting health clinic and school nurse in their children school

Knowledge about setting health clinic and school nurse in their children school	Number (percentage)		Total (N = 580)
	School SN (N=287)	School SHS (N=293)	
Health clinic			
Correct	219 (76.3)	107 (36.5)	326 (56.2)
Not correct	67 (23.3)	133 (45.4)	200 (34.5)
Don't know	1 (0.3)	53 (18.1)	54 (9.3)
School nurse			
Correct	272 (94.8)	189 (64.5)	461 (79.5)
Not correct	15 (5.2)	32 (10.9)	47 (8.1)
Don't know	0 (0.0)	72 (24.6)	72 (12.4)

Table 2 Knowledge of Parents about school health programs and the information sources which they got from

Knowledge about school health programs and the information sources	Number (percentage)		Total (N = 580)
	School SN (N=287)	School SHS (N=293)	
Knowledge about school health programs			
Know	260 (90.6)	133 (45.4)	393 (67.8)
Don't know	27 (9.4)	160 (54.6)	187 (32.2)
Information source			
School/ Teachers	257 (89.5)	165 (56.9)	422 (73.1)
Radio	170 (59.2)	182 (62.8)	352 (61.0)
Parent Association	102 (35.5)	104 (35.9)	206 (35.7)
Newspaper	56 (19.5)	66 (22.5)	122 (21.0)
Colleague/ friend	42 (14.6)	54 (18.6)	96 (16.6)
Other	6 (2.0)	20 (6.7)	26 (4.6)

Table 3 The top ten school nurse's roles of highest percentage of importance chosen by the parents

No.	Role of school nurse		Not important	Somewhat important	Important	Extremely important
1. Provide first aid and emergency care to students	SN	-	-	1.4%	98.6%	
	SHS	0.7%	1.0%	10.6%	87.7%	
	Total	0.3%	0.5%	6.0%	93.1%	
2. Perform health screenings (vision, dental, etc.	SN	-	0.3%	28.9%	70.7%	
	SHS	-	5.1%	35.2%	59.7%	
	Total	-	2.8%	32.1%	65.2%	
3. Prevent and control common and infectious diseases	SN	-	0.3%	35.9%	63.8%	
	SHS	1.4%	9.2%	29.7%	59.7%	
	Total	0.7%	4.8%	32.8%	61.7%	
4. Teach students about health issues	SN	0.1%	2.4%	59.2%	36.2%	
	SHS	1.4%	15.7%	59.4%	23.5%	
	Total	1.7%	9.1%	59.3%	29.8%	
5. Helps create a positive school environment	SN	1.0%	8.7%	22.0%	68.3%	
	SHS	0.3%	8.9%	45.1%	45.7%	
	Total	0.7%	8.8%	33.6%	56.9%	
6. Monitor sanitation of school environment	SN	2.1%	9.4%	38.3%	50.2%	
	SHS	0.7%	5.5%	56.7%	37.2%	
	Total	1.4%	7.4%	47.6%	43.6%	
7. Identify health problems for students	SN	1.0%	16.4%	39.7%	42.9%	
	SHS	0.7%	9.9%	57.7%	31.7%	
	Total	0.9%	13.1%	48.8%	37.2%	

Table 3 The top ten school nurse's roles of highest percentage of importance chosen by the parents (cont.)

No.	Role of school nurse		Not important	Somewhat important	Important	Extremely important
8. Maintain health records and perform physical exams	SN		2.1%	11.1%	42.2%	44.6%
	SHS		1.0%	13.7%	61.4%	23.9%
	Total		1.6%	12.4%	51.9%	34.1%
9. Provide counseling to parents and other teachers to solve children's concerns and problems	SN		1.7%	11.5%	47.4%	39.4%
	SHS		1.0%	10.9%	59.4%	28.7%
	Total		1.4%	11.2%	53.4%	34.0%
10. Provide counseling to parents in children health issues	SN		12.2%	3.8%	49.8%	34.1%
	SHS		2.7%	5.8%	64.8%	26.6%
	Total		7.4%	4.8%	57.4%	30.3%

Table 4 Agreement to support to school health services

Parents' support to school health services		Number (Percentage)		
		School SN (N=287)	School SHS (N=293)	Total (N=580)
Willingness to pay and support				
	Yes	287 (100.0)	278 (94.9)	565 (97.4)
	No	0 (0.0)	15 (5.1)	15 (2.6)
Affordable annual amount of money				
	Lower than 20,000	8 (2.8)	20 (6.8)	28 (4.8)
	20,000-40,000	264 (92.0)	258 (88.1)	522 (90.0)
	Higher than 40,000	15 (5.2)	15 (5.1)	30 (5.2)
	Median	30,000VND	20,000VND	30,000VND

On the need of school nurse and health clinic, most of parents/ guardians thought that school health clinic (95.9%) and school nurse (99.3%) were necessary. Among these parents 89.8% suggested for full-time school nurse.

Regarding the willingness to support and to pay for school health service fee, most parents agreed to support school health services (99.3%) and were willing to pay for school health service fee (97.4%). A majority of parents/ guardians (90%) were willing to pay for 20,000-40,000 VND (approximately \$1.5-2.5) per year for school health service fee (Table 4). More than 81% of the parents wanted to pay the fee directly to school.

DISCUSSION: More than half of the parents answered correctly about the availability of health clinic in their child's school, and about 80% whether their children's school had school nurse. There were highly statistically significant differences between knowing about the availability of school nurse and health clinic between these schools with p -value < 0.001 (Table 1). The percentage of correct answers of school SN was higher than that of

school SHS. In school SN, the parents knew about school health programs and the number of parents who got the information from school (teachers) was higher than that in school SHS (p -value < 0.001, Table 1). It meant that either parents of school SN paid attention to school health activities in their child's school more than those of school SHS or the school SN provided more information about school health activities to student parents.

On the importance of school nurse's roles, this study pointed out the top ten roles chosen from 25 items regarding the importance of school nurse's role. The roles "Providing first aid and emergency care to student" and "Perform health screening (dental, vision, etc.)" were the two highest evaluated "important" and "extremely important" by the parents/ guardians (99.1% and 97.2%). This finding correlated with the study by Kirchofer⁷⁾, whose result showed the ideas of US parents/ guardians about school nurse's roles. They identified that the 2 most important health services provided by school nurse were

providing first aid and emergency care (94.2%) and communicating with parents, school, and health providers (83.7%). The roles also related to the school health contents of the decree No.73/2007 of Ministry of Education and Training⁸⁾ and the components of school health promotion of National Association of School Nurses (NASN)⁹⁾.

The vast majority of parents/ guardians thought that their children's school should have a health clinic (95.9%) and a school nurse (99.3%). The school nurse should work full-time at school (89.8%). Setting regime work of school nurse had a significant statistical difference between 2 schools with p -value < 0.001 (96.2% vs. 83.4%). It meant that the parents expected a full-time school nurse at school more than a part-time one. Most parents agreed to support (99.3%) and were willing to pay for school health service fee (97.4%) whenever the schools had clear budget for each activity. More than 81% of parents wanted to pay directly to school, about 10% through insurance company as it presently was. Most of them (90%) wanted to pay 20,000-40,000 VND (about \$1.5 to \$2.5) per year for these services. It was in line with another study, which most parents in discussion group agreed to pay for school health service fee on the condition that the schools had to report clear budget¹⁰⁾. These findings also related with a study which pointed out that a majority of the US parents/ guardians also strongly agreed and agreed to pay for each service⁷⁾.

RECOMMENDATION: Both Ministries of Health and Education and Training should set a attention School nurse's roles and school health services from workload. They should soon issue a policy about standards of responsibility, obligation and interests for the school nurse according to their parents' ideal on school nurse's roles and school health services. For optimal implementation, the People Committee and Departments should set priority for sectional areas to organize hierarchical deployment and evaluate outcomes. Due to restrained budget,

the organization should schedule periodically and supervised carefully. For the policy implementation of setting services of school nursing, there need to have a further studies emphasizing on managerial staff, head teachers and student on demand using school nurse and school health services. An evaluation to assess the effectiveness of projective implementation should be made periodically.

The study did contain much of the limitation. First, as the research tool was a self-administrated questionnaire, some respondents might have answered the questionnaire or parts in a socially desirable manner. Second, the questionnaire included close questions, so additional information from the parents/guardians were not extracted, parents/guardians responding to the questionnaire might have some different perceptions which were not assessed by the questionnaire. Third, because the questionnaires were self administered at homes, canvassing among family members was possible. Finally, due to time and budget limitation, this study could only assess 2 schools in one province of Vietnam so it could not represent the situation of the country.

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