School nurses’, feldshers’ and general nurses’ health education practices in North Karelia, Finland and Petrozavodsk, the Republic of Karelia

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**Contribution**

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School age is a propitious development stage for adopting healthy life style, when nearly all pupils with their families can be easily reached by the school health services (Naylor & McKay 2009, McCabe 2011, Wright et al. 2013).

School nurses monitor development of children and adolescents, provide first aid, prevent and treat diseases and cooperate with other professionals and parents (Magnusson et al. 2012, Sendall et al. 2013). Health education, guidance and health counseling of the pupils and their families are also an important part of the school healthcare workers’ work (Naylor & McKay 2009, McCabe 2011, Hakulinen-Viitanen et al. 2012, Wright 2013).

The discussions between the school nurse and the pupil often concentrate on issues like healthy nutrition, counseling related to overweight and encouraging exercising. Also screen time and issues related to alcohol and drugs are common topics in health guidance. (Borup & Holstein 2010, Haddad et al. 2010, McCabe 2011, Luokkanen et al. 2013.) Pryjmachuk et al. (2011) and Laaksonen (2012) underline the importance of mental health and emotional wellbeing in school nurses’ work and health check-ups. Secondary school pupils need also information about sexual health (Paananen 2013). Consequently, the school nurses have emphasized the importance of medical education and health promotion competences in their work.
The aim of this study was to investigate school nurses’, feldshers’ and general nurses’ health education and counseling practices in North Karelia, Finland and in the City of Petrozavodsk, the Republic of Karelia, Russia.

The research questions were:
1. How do the school nurses, feldshers, and general nurses describe their health education practices as a part of their work?
2. How do the school health care workers view the responsibilities of home and school in pupils’ health education content areas?
3. What are the possible needs of school health care workers in terms of continuing education?

Method
A quantitative survey was carried out in the spring 2014 among the school nurses in North Karelia and feldshers and general nurses working for the school healthcare services in the city of Petrozavodsk in the Republic of Karelia. In total 30 Finnish school nurses (response rate 57%) and 33 Russian feldshers or general nurses (response rate 97%) participated in the study.

The used paper questionnaire consisted of 106 (in Russian) or 107 (in Finnish) questions about contents of work with pupils, families and fellow professionals, health threats to children and adolescents now and in the future, and training needs of the employees.

In this study, school nurses' views about the responsibility areas of home and school were examined on eighteen health education content areas, such as everyday health habits, sexuality and reproduction, bullying and violence, interaction and social relations, sufficient and good quality sleep and rest, and healthy nutrition and regular eating.

Research data was analyzed by statistical methods using SPSS for Windows version 21. Non-parametric methods, cross tabulation and chi square –test were used. Open questions were analyzed by using content analysis.

Expected Outcomes
In both regions, most of the school nurse working time was spent on health check-ups and paper work, leaving little time for health education and counseling.

School health care workers in both countries saw the responsibilities in health education similarly, and emphasized the role of home in teaching most of the health-related issues. Topics related to everyday routines such as hygiene, sleep and safe use of media were considered a responsibility of home, while school was seen responsible for teaching first aid, sexuality, human body and its functions as well as reproduction.

About half of the nurses planned health education together with teachers, and most of them participated in different theme events and parents’ evenings. The Russian respondents participated more in curriculum work than their Finnish counterparts, but the Finnish school nurses gave more often lessons to pupils than their Russian colleagues.

School nurses in North Karelia dealt more evenly with issues concerning health and wellbeing of pupils than their Russian counterparts. The topics discussed often with the pupils by the school nurses in both regions included healthy nutrition, sleep and rest, daily rhythm, exercise, hygiene, internet and media, health promotion and self-care, tobacco and alcohol. Topics seldom or never discussed by the Russian respondents included sexually transmitted diseases, contraception, bullying, conflict situations, social relationships, worries and coping with everyday life, while the Finnish respondents handled these issues often, sometimes or seldom.

In both countries school nurses recognized the importance of continuing education in several fields. The most urgent needs were in the areas of helping pupils with multiple problems, mental problems of children and adolescents, and early intervention. The Russian respondents expressed the need for further education in the substance of health education more often than their Finnish colleagues.

References


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