# Text  Description automatically generated with medium confidenceIntersectoral working in schools between education staff and primary healthcare professionals

# **Case study template**

## **Introduction**

Schools have a significant impact on student health, both in terms of the environment provided and the education offered. Health professionals, whether part of the school ecosystem or from the community, can help schools play an active role in improving health conditions for all students.

We know that many examples of good collaborations between health and education professionals exist throughout the world. This is why the UNESCO Chair Global Health & Education is launching a call for intersectoral initiatives between health and education professionals to promote the health of all students in schools.

The analysis of these case studies will increase our appreciation of resilience-promoting factors of effective intersectoral working between health and education professionals in schools. We are collecting as many as possible, representing the experiences of people and communities from a wide variety of social and cultural global contexts.

The collected case studies will be carefully described ensuring that we can learn from them – both in terms of success, effectiveness, potential and challenges.

You are invited to complete the template on the next page. The template is made to help you to describe what you did and to share your experiences with an international audience.

**Please also read the** [**Participant Information Sheet**](https://unescochair-ghe.org/the-unesco-chair-ghe/activities/intersectoral-working-in-schools-between-education-staff-and-primary-healthcare-professionals/) **before completing the template.**

You can complete the template in English or French, or in another language if you prefer – please note we will then use an electronic translation tool called DeepL to translate it into English.

**Only case studies in the template format will be considered and shared. Please do not send files in other formats.**

Completed templates can be sent to the UNESCO Chair GHE Project Lead, Dr Nicola Gray, using the email N.J.Gray@hud.ac.uk **before 31 May 2023**.

You will receive a summary of the submitted case studies by 30 September 2023.

## **Consent Form**

**Please read the statements and put a X in the appropriate box on each line**

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| I have read and understood the **Participant Information Sheet, Version 2, dated** **April 2023**. I have had enough time to consider the information and to ask questions. I am happy with any answers I have been given.  |    |    |
| I understand that participation is voluntary; I can withdraw at any time and my professional relationship with the study team and the UNESCO Chair GHE will not be affected.   |    |    |
| I understand that my case study will be displayed on the UNESCO Chair ‘Global Health and Education’ website; and that my name, organisation and contact email will be listed with it. |    |    |
| I confirm that I have the permission of others involved with the case study to send it to the UNESCO Chair GHE team for sharing on their website. |  |  |
| I understand that if I decide to withdraw, my case study can be removed from the website and all my information can also be destroyed. However, once the publication process has been initiated, it will not be possible to destroy the analyses and results related to my data.   |   |   |
| I am happy for the UNESCO Chair GHE team to publish anonymised aggregated data from the case studies in research papers that can be shared on the website, in peer-reviewed journals and at professional conferences. In these circumstances, I understand that my name and organisation will not be mentioned. I understand, however, that the details could still be traced through the separate case study that is named on the website.  |  |  |
| I understand that all identifiable data collected (e.g. consent responses) will be stored in a OneDrive University of Huddersfield, UK, and will always be held and processed in line with the UK Data Protection Act 2018. Only the UNESCO Chair GHE research team will have access to the data collected.  |    |    |
| **I agree to take part in the case study collection.** |    |    |
| **I would like you to send a summary of the case studies to me by email.** |  |  |

|  |  |
| --- | --- |
| **Your name (please print) – *This should be the person who is sending the email*** | **Date** |
|  |  |

## **The information above will be removed from this case study template before sharing it on the website**

|  |  |
| --- | --- |
| Contact details – you will be asked if you would like to share these or not before your case study is added to the website | Your NameYour RoleYour OrganisationYour email addressChoose your main area of practice |

## **Case study description**

|  |  |
| --- | --- |
| Title of the initiative / case study (20 words max) |  |
| Country / Territory |  |
| Summary of the intersectoral initiative *(250 words max)* |  |
| Focus of the initiative  | Choose one |
| Goal and objectives Overall goals and specific objectives.*(250 words max)* |  |
| School setting* Age group of students covered (0-18)
 | Please write age group/s covered e.g. 5-11, 16-18 |
| * Number of students in the school
 | Please write total here  |
| * Public (*no fees*) or Private (*pay fees*)?
 | Choose one |
| * Location
 | Choose one |
| * Socioeconomic environment
 | Choose one |
| Description of the initiative (*500 words max*)What was the driver to start the initiative? Was it the pandemic, or something else?From when to when did the initiative take place? Does it continue now?Did it get funding? How was it funded? What type of activities took place e.g. health professionals seeing students or staff for consultations, health professionals training education staff, teachers training health professionals? |  |
| Partners(*250 words max*)* Who are the partners involved?

Who are the education professionals involved in the initiative?Who are the health professionals involved in the initiative?Where are the health professionals located? (e.g. In the school, in the community?)At what stage/s did intersectoral work happen (eg conceptualization, co-design, implementation or evaluation)? |  |
| Results of the initiative (*250 words max*)* What were the deliverables?
* Can you give some examples of actions resulting from the initiative?
* What do you think was the impact of the initiative, if any?
 |  |
| Evaluation of the initiative(*250 words max*)* Was the initiative evaluated? If Yes - *How, and by whom?*
* Name two things that went well.
* Name two things that could be improved.
* What were the main barriers to intersectoral working?

What were the main facilitators for intersectoral working?* What advice would you give to others who would like to do a similar initiative?
 |  |
| Additional information if available:* Links to relevant websites
* Link to / title of relevant articles
* Other relevant resources
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