

Intersectoral working in schools between education staff and primary healthcare professionals



Case study description

Title of the initiative / case study	Description of community health activities carried out in a primary care centre in Elche: Health Week.
Country / Territory	España
Summary of the intersectoral initiative	<p>Introduction: The primary care team is a key element in fostering preventive and health promotion activities in its population. The school plays an important role in the health of the community, since it is where many of the habits and behaviours that lead to good health are identified, addressed, taught and modified. The important role of nurses as collaborators with teachers in health education (HPE) in schools should be highlighted.</p> <p>Design: Descriptive and observational study of the health promotion and education programme: Health Week. For data collection, we used nurse observation and a Likert scale that was administered to teachers.</p> <p>Results: The results obtained show that the health activities carried out and oriented towards the needs expressed have fulfilled the objectives proposed through the analysis of the workshops. The programme has generated a healthy space that fosters autonomy and the ability to generate potential protective health behaviours.</p> <p>Discussion: This experience has also demonstrated to the interdisciplinary team that collaboration between the educational environment, the community and the primary care centre can promote a process of transformation towards healthy lifestyles.</p> <p>Conclusion: The Health Week aims to respond to the expressed needs of the</p>

	population from an interdisciplinary perspective, empowering people to increase control over their own health.
Focus of the initiative	Both mental health and physical health
Goal and objectives Overall goals and specific objectives.	
School setting	3-12
- Age group of students covered (0-18)	
- Number of students in the school	500
- Public (<i>no fees</i>) or Private (<i>pay fees</i>)?	Public
- Location	Urban
- Socioeconomic environment	Privileged
Description of the initiative - What was the driver to start the initiative? <i>Was it the pandemic, or something else?</i> - From when to when did the initiative take place? <i>Does it continue now?</i> - Did it get funding? How was it funded? - What type of activities took place <i>e.g. health professionals seeing students or staff for consultations, health professionals training education staff, teachers training health professionals?</i>	<p>The primary health care team is a key element in encouraging preventive and health promotion activities in its reference population, and there is evidence of the effectiveness of health education in encouraging the involvement of individuals in improving lifestyle habits.</p> <p>The school plays an important role in community health, as it is where many of the habits and behaviours that lead to good individual and collective health are identified, addressed, taught and modified. It is important to highlight the important role that nurses play as collaborators with teachers in Health Education (HPE) in schools, together with the rest of the professionals in the health teams. Community health activities should emanate from the need felt by the community and the team should act as an essential element in responding to that need in collaboration with the rest of the community actors.</p> <p>In the local context, the adoption of this type of programme is proving to have a great impact on our population, and thanks to the promotion and support of the coordination and management of the health department,</p>

	<p>more and more health professionals are becoming involved in community intervention.</p> <p>The objective of this study is to describe the Health Week programme as a healthy space of EpS that generates autonomy, participation, criticism and creativity, and offers the possibility of developing physical, social and intellectual potentials through the creation of adequate conditions for recreation, coexistence, safety and knowledge construction, with the participation of the educational and elderly community, with the aim of favouring the adoption of lifestyles and behaviours that protect their health.</p>
<p>Partners</p> <ul style="list-style-type: none"> - 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? (<i>e.g. In the school, in the community?</i>) - At what stage/s did intersectoral work happen (<i>eg conceptualization, co-design, implementation or evaluation</i>)? 	<p>The population study of our geographical area shows that the population pyramid establishes two vulnerable groups with a total number of: children from 1 to 14 years of age (2868 people) and the elderly population >65 years of age (2937 people), updated in April 2023.</p> <p>The method of working with assets for health, in practice, is an ideal meeting point for intersectoral work, being the fertile ground where ideas grow in the form of expressed health needs, being multiple and diverse depending on the population we are addressing, including the geographical area where we are located.</p> <p>After assessing the needs expressed by the community, which were many and very diverse, we went on to determine the form and content of the possible approach through health education.</p> <p>The first days of March were decided upon, concentrating the efforts on three days in which the workshops could be carried out twice thanks to the space offered by the Elche Vinalopó Hospital. There were two main spaces: the auditorium with a capacity for 116 people and classrooms 1, 2 and 3, which can vary in size depending on the number of</p>

	<p>participants (from 25 to 75 people). It is worth mentioning that the outside of the hospital was also used for activities related to first aid and other places in the geographical area where activities are offered to the community on a daily basis.</p> <p>Interdisciplinary work was carried out at all stages of the intervention, and we have serious doubts that it is possible to carry out this type of work without this characteristic at all stages.</p>
<p>Results of the initiative</p> <ul style="list-style-type: none"> - 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? 	<p>15 workshops were created in an interdisciplinary way, i.e. the need expressed by the school entity, group or person was transferred to the different active parties, who contacted the population in question and the EAP and agreed on: the age group at which the workshop would be aimed, the duration, the didactic dynamics (talk, round table, practice...etc.) and the place where it would be held. Activities related to the following topics were carried out: mental health, emotional management, addictions, tackling suicidal behaviour, first aid, therapeutic comedy, nutrition, physical activity, music therapy and cardiovascular and diabetes prevention.</p> <p>This experience has shown the interdisciplinary team that the strength of collaboration between the educational environment, the community and the primary care centre can drive a process of transformation towards protective health behaviours.</p> <p>The programme has created a healthy space that fosters autonomy and the ability to generate potential protective health behaviours.</p>
<p>Evaluation of the initiative</p> <ul style="list-style-type: none"> - Was the initiative evaluated? If Yes - <i>How, and by whom?</i> - Name two things that went well. 	<p>For the evaluation and data collection we used nurse observation and a Likert scale administered to teachers.</p>

<ul style="list-style-type: none"> - Name two things that could be improved. - What were the main <u>barriers</u> to intersectoral working? - What were the main <u>facilitators</u> for intersectoral working? - What advice would you give to others who would like to do a similar initiative? 	<p>The results were good throughout the evaluation, the objectives of promoting protective health behaviours were met and participation through active recruitment was massive (a total of 1049 students).</p> <p>Adequacy of the number of workshop attendees and not exceeding the stipulated workshop time (duration).</p> <p>The main barriers for the intersectoral work are related to the number of school children in our basic health area, too many people to receive the same type of health education activities, so we made a distribution of activities that could be as equitable as possible between the different schools. Another barrier may be the organisation of the schools, as they themselves within their institution are responsible for age-appropriateness of each type of intervention and some provisions were made but failed.</p> <p>The main strengths were the availability of community health assets, subject matter experts, the primary care team and their connection to the community through a community interventions group that has been running for 5 years and has a strong network of participation and creation of healthy spaces where health promotion is the primary objective.</p> <p>Our advice is always focused on practice, to start doing activities, to ask questions, to be flexible, to make mistakes, to do training and to start recording, to disseminate, to compare and always to evaluate in every way you can because the perspectives in community interventions are many and very diverse.</p>
<p>Additional information if available:</p>	<ul style="list-style-type: none"> - Participación ciudadana Pla (redes sociales, instagram y facebook)

<ul style="list-style-type: none">- Links to relevant websites- Link to / title of relevant articles- Other relevant resources	
--	--