Title: A study of knowledge, understanding and practices in health education among standard seven pupils in Kibera division, Nairobi

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Abstract: The purpose of this study was to evaluate the health knowledge of Standard 7 pupils over a wide range of health topics and some of their health related practices. This group of pupils was chosen because they will soon (in Standard 8) finish their first cycle of formal education and at this stage, many pupils tend to drop out of formal school and are thus unlikely to receive further systematic health education. Concepts tested during this study included that of balanced diet and its relation to health, causes and home management of high fever, the role of immunization, knowledge of environmental sanitation control measures. The study investigated practices such as the food intake patterns at home and at school, compared nutritional status with nutritional knowledge and also assessed the state of the school environmental sanitation. The study was conducted by the use of a 30-item questionnaire, an observation chart and an informal interview schedule, all of which were administered by the researcher herself. The study sample consisted of 208 Standard 7 pupils from 5 schools in Kibera, Nairobi. The interview schedule was administered on 20 teachers teaching in these 5 schools. The results were analysed and expressed in raw frequency and simple percentage, and a Z-test analysis was performed to investigate if nutritional knowledge affected nutritional status. A summary of the findings revealed that the pupils had limited knowledge in some concepts such as nutrient content of food, items used to constitute a home made oral dehydration solution, evidence of immunization and examples of immunizable diseases. However, the majority of the pupils are knowledgeable about the role of immunizations, environmental sanitation control measures, the need for food and fluid by a patient suffering from diarrhoea and some simple steps in the home management of high fever. The pupils do not eat well-balanced meals at home or at school, and their nutritional knowledge does influence neither their food intake nor their nutritional status. The pupils also learn in schools whose environmental sanitation contrasts with the knowledge that they have. Their teachers are of the opinion that the pupils apply little of what they learn in school health education but also believe that given the correct teaching/learning conditions they could apply more. Strong recommendation is given for the inclusion of parents in the school Health Education programme in order to make it more effective to the community. It is also recommended that school Health Education programmes should deliberately seek to improve the health experiences of the pupils and especially give priority to the pupils' immediate environment.