

# A Helping Hand to Rural Public School in Sri Lanka

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## ABSTRACT

Public schools located in rural areas in Sri Lanka seem to be neglected and both educational resources and infrastructure facilities are extremely poor in most of these types of schools. This project is an interventional project carried out in a rural school located in Moneragala district with the aim of supporting to improve education and wellbeing of the students learning in the selected school. Few major issues were identified including inadequate infrastructure and sanitary facilities, poor road accesses, inadequate staff, non-availability of quality and adequate amount of reading materials and nonexistence of School Health Programmes. Few interventions were applied to rectify few prioritized issues which investigators make intervene. Applied interventions successfully improved the problems prioritized. Students and the staff members were very satisfied about the intervention. However, study found that major interventions are required at the national level to rectify the issues identified. Nevertheless, such simple interventions can be applied by any organization and or individual level to help education and wellbeing of the future generation in Sri Lanka. rural children. Most children have to contribute to family income. Most parents in these communities cannot afford the education of their children [5].

Some schools have no drinking water and sanitary facilities, lab facilities, electricity and the communication facilities are not available. Road accesses to most of these schools are very unsatisfactory. Some researchers have found that wild attacks are common in the schools located in Northern and North eastern provinces. Most of them are underfunded and difficult in fulfilling basic requirements required for the education. Teacher shortage is severe and skilled teachers turn away from rural schools due to lack of amenities mainly unavailability of quarters. Rural students frequently have high dropout and low level of reading and numeracy due to these issues. Moreover, the student performances are low in stated provinces. As many studies highlighted a few challenges such as lack of robust national policy, unplanned policy changes done by the political leaders, politicization of recruiting procedures and inability of identifying real needs of the country which hinders the attempts taken by the relevant authorities [6].

**Keywords**— Rural Public-school, Book donation, School health programme, Intervention

## INTRODUCTION

Education is considered as a fundamental right of each and Student wellbeing programmes play a major role in schools. These programmes include free school text book programme, free mid-day meal programme, free uniform materials programme and health programmes etc. provides enormous every child in Sri Lanka. Since 1944 children have been offered support to the children in Sri Lanka. Some local and free education supporting the quality of the national education international supporting agencies and charity organizations system of the country. The Sri Lankan government has spent a launch different kinds of programmes in order to help the rural huge amount of money on education over recent years since education is considered a high priority. Due to the efforts made by the government Sri Lanka has achieved a remarkable place children such as donations of books, school items in order to provide some kind of relief to the children in rural communities [7]. among developing countries encompassing a 92.38% literacy Interventional project studies carried out in rural schools are not rate in 2020 [1]. In Sri Lanka, schools are mainly classified as private schools, abundant and most of the articles have highlighted the disparities and difficulties faced by such students only. This public schools, special schools, international schools and project is implemented

with the objective of supporting the pirivenas. There are about 9,790 public schools located all schools located in Uva province. Similar interventions can be around the country which provide free education for children. However, there is a significant difference in education indices between rural and urban [2]. When it considers the applied by individual organizations or individual levels who are willing to invest in the betterment of future generations.

## METHODOLOGY

infrastructure facilities, there are huge discrepancies among the This project is intended to be implemented in different selected schools. It is a known fact that urban schools are very popular in school settings in Uva province. Yakunnawa Maha Vidyalaya the society while rural schools are out of favor [3]. located in Monaragala district was selected as the first setting This is mainly due to regional imbalances in the resource and the project was carried out in three phases including pre availability for education. Provinces in Sri Lanka have been intervention, intervention and post intervention. Study methods divided into four categories based on the availability of include both qualitative and quantitative methods. Current book educational resources. Western provinces are on the top and provision was calculated.

$$\text{Book provision} = \frac{\text{Number of available books}}{\text{Number of students}}$$

Focus group discussions were conducted with randomly selected few students ( $n=15$ ), teachers ( $n=10$ ) and the principal to get some information regarding present issues faced by the students during pre-interventional period. Discussed with randomly selected some ( $n=15$ ) parents regarding the health conditions of their children. Identified gaps were listed and prioritized. The most accessible problems were identified by applying nominal group technique. The Nominal Group consisted of 10 members including 9 teachers and principle. Few interventions carried out including book donation and health programme during the intervention period. Following steps were followed to organize the donation of reading materials.

1. *Identify the requirement of reading materials and collection* Identify the beneficiaries' requirement with the support of staff working in the respective setting. Reading materials was done from the public through a donation drive and there were some personnel donations Publicity was given through social media and radio channels.
2. *Book screening ready for donation* Collected books were screened and sorted based on the grades and the subjects including short stories, novels, social philosophy and politics with the support of few school teachers to ensure the applicability of the donated materials for the school children. Over 1000 books were donated.
3. *Student motivation for reading Marking scheme was developed with the participation of the teachers in order to select the best reader of the month with the purpose of stimulating the students to read. He or she will be awarded monthly based on the marks he or she obtained.*



Figure 1 Book donation event

Focus group discussion was conducted with the same group Marking scheme was developed with the participation of the after intervention. Narrative analysis measures the effectiveness teachers in order to

select the best reader of the month with the purpose of stimulating the students to read. He or she will be awarded monthly based on the marks he or she obtained.

**Figure 2 Student health programme**



**Figure 3 Shramadana and tree planting campaign**

A school health camp was carried out with the support of a few medical officers. At the same time an awareness programme was carried out to inform the parents and teachers to introduce of qualitative data. Administrative clearance was obtained from the relevant authorities to carry out the project.

## FINDINGS AND DISCUSSION

Based on focus group discussion with the principal and teachers following points were identified as major issues faced by the school.

- Lack of infrastructure and sanitary facilities
- Poor road access
- Inadequate staff due to poor retention
- Inadequacy of quality and quantity of reading materials
- Nonexistence of School Health programmes (SHP)

Two issues were prioritized by using nominal group technique where the principal investigator can intervene.

### **Inadequacy of quality and quantity of reading materials**

simple nutritious diet recipes to improve the nutritious status of There are 529 students currently studying in this school. The the children. Medical advice given to the students and informed library is not a permanent one consisting of 1,650 reading their parents where it needs further medical inspection. Safe materials. Current book provision was reported as 3.1. Standard school environment is also critical. Therefore, a shramadana book provision per pupil should be 5-10 [3]. Library is operated campaign and three planting programme were carried out in by a volunteer teacher for the entire school. Most of the books parallel to that. that are available are applicable to primary grades. Advanced level students are studying in the schools and subject related books seem to be very limited. Social and entertainment related reading materials are

also the same. After the book donation programme book provision was improved up to 5 and the quality of the available reading resources. Library is identified as an essential infrastructure facility of a school. However, it has recorded that 39% of public schools do As per the staffs' and parents' responses, no health programme had been conducted in the selected setting. Children have to not have a library. Almost all international schools and travel long distances to seek medical advice for their health monasteries have a library and 97% of private schools have a problems. On the other hand, school staff or the parents give library facility [3]. Furthermore, 50% of school libraries are not priority for academic related outcomes rather than health related up to the standard stipulated by MOE and staff are not qualified. concerns. Furthermore, parents mentioned they are worrying One report has revealed that only 17.5% of personnel out of about the nutrition of children simply because they cannot 2000 of staff working in libraries are qualified to operate a afford the price of the food items. Parents were happy about the library. Due to poor budget allocation, most of the reading low cost diet recipes introduced and students will enable further material is outdated [8]. It has been decided by MOE to appoint medical treatments who need special attention on their teacher librarians to all schools after providing a five day healthcare. All students, staff members and staff actively preliminary programme [3]. Quality and the quantity of the library materials impact on the student achievements. According to the School Library Development Unit Sri Lanka, standard book provision per pupil engaged in shramadana and three planting campaigns and staff members mentioned that this kind of extracurricular activities are good in providing mental relief to both staff and the students. should be at the range of 5-10. However, it has been reported There is a positive correlation between education and the health that existing average book provision is lower than 5 in most status of the child. Students must be healthy enough both schools located in rural areas. These data indicate that there is a physically and mentally in order to get the full potential of their significant gap in quality and quantity of the reading materials education. SHP in Sri Lanka was started in 1918 and the Family available in some public school libraries. [9] Books should be the best companion of the students. Empowering the future generation with knowledge and education is a responsibility of every parent and teacher to Health Bureau is the administrative focal point. SHP in Sri Lanka is one of the best and oldest school health programmes in the south Asia region [16]. However, these SHPs are not effectively being conducted in encourage or stimulate their children for reading. However, many schools in rural areas due to various reasons. This today most students are unaware of its significance and they situation is aggravated due to lack of logistics and shortage of spend inadequate time reading books. Modern students spend personnel [16]. their spare time on mobile games and social media [10]. On the other hand, required updated information is readily available on the internet and it is easy to navigate. SHPs are not about delivering health services; it covers most of the important things including formulating school health policies, ensuring a safe school environment, developing competencies and community relationships for promoting health Library plays a major role in a school as the self-learning [17]. Moreover, the same focus needs to be given to improve the environment provides an additional source of information mental wellbeing of the students. Staff can perform a major role outside the classroom [11]. Researchers have found that when promoting student's mental wellbeing. Reading is also a good the students tend to use the library more frequently, their test approach. Various school activities such as gardening, planting, scores become higher than the other students. Moreover, there is and shramadana campaigns will trigger the mental wellbeing of a positive impact on students' self-esteem, confidence, students [18]. independence and sense of responsibility in regard to their own learning [9]. Another study carried out among USA school In conclusion students and the staff were very happy about the children has identified libraries as a powerful source which contributes to students' performances [12]. interventions applied that rectified the prioritized issues. This project highlighted that any individual can make positive intervention towards the education of the students. Still many Other obstacles found are inadequate and outdated reading gaps are existing and as recommendations we would suggest materials, inadequate amount of qualified librarians, and scarcity of library buildings, inadequate funding for technical making policy changes by the relevant authorities and focus on a national level strategy to overcome such issues in the long improvements such as computer supported library operation term. [13]. Book donation is now everyday practice for more volunteer organizations in Sri Lanka. Researchers also have highlighted



different views towards the book donation. Some researchers have mentioned that books aid in overcoming the problems associated with scarcity of information materials in developing countries [14].

However according to UNESCO (2015) book donation programmes need to be adapted to the needs and sensitivity of the beneficiaries. Based on that effective book donation needs to be started with the identifying actual need of the ultimate reader otherwise donation of books would not gain real impact. Therefore, a matter of considerable urgency to set up training and information programmes for all those who directly or indirectly play a role in the donation of books will be essential [15].

### **Nonexistence of School Health Programme**

As per the staffs' and parents' responses, no health programme had been conducted in the selected setting. Children have to travel long distances to seek medical advice for their health problems. On the other hand, school staff or the parents give priority for academic related outcomes rather than health related concerns. Furthermore, parents mentioned they are worrying about the nutrition of children simply because they cannot afford the price of the food items. Parents were happy about the low cost diet recipes introduced and students will enable further medical treatments who need special attention on their healthcare. All students, staff members and staff actively engaged in shramadana and three planting campaigns and staff members mentioned that this kind of extracurricular activities are good in providing mental relief to both staff and the students.

There is a positive correlation between education and the health status of the child. Students must be healthy enough both physically and mentally in order to get the full potential of their education. SHP in Sri Lanka was started in 1918 and the Family Health Bureau is the administrative focal point. SHP in Sri Lanka is one of the best and oldest school health programmes in the south Asia region [16].

However, these SHPs are not effectively being conducted in many schools in rural areas due to various reasons. This situation is aggravated due to lack of logistics and shortage of personnel [16].

SHPs are not about delivering health services; it covers most of the important things including formulating school health policies, ensuring a safe school environment, developing competencies and community relationships for promoting health [17].

Moreover, the same focus needs to be given to improve the mental wellbeing of the students. Staff can perform a major role promoting student's mental wellbeing. Reading is also a good approach. Various school activities such as gardening, planting, and shramadana campaigns will trigger the mental wellbeing of students [18].

In conclusion students and the staff were very happy about the interventions applied that rectified the prioritized issues. This project highlighted that any individual can make positive intervention towards the education of the students. Still many gaps are existing and as recommendations we would suggest making policy changes by the relevant authorities and focus on a national level strategy to overcome such issues in the long term.

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