

# Appendix 1

## Focus Group and Interview Guide

- **Introduction:** Good Morning, my name is (AMA, SEN, FHK, or KA). I'm a (mention specialty) from the Department of Public Health Protection, Dubai Health Authority.
- **Project details and aims:** In this project, we want to investigate the current issues, opportunities, strengths, and recommendations from your perspective to improve students' health. The information you provide will help us shape a school health strategies and policies for the emirate of Dubai, UAE. If you choose to be a part of this project, here is what will happen:
- **Session description:** We will have a conversation with you for an hour during this online session where we will ask a range of questions about the current practices and issues facing you, your students, or your children in Dubai schools.
- **Audio recording:** With your permission, we would like to make an audio recording of our discussion to make sure we are getting an accurate record of the session.
- **How identifiable you will be:** Your identity and any personal details you provided will be removed from any analysis we perform as well as from any publications or other research outputs.
- **Risks:** There are no risks in participating in this session as all the information you provide will be de-identified and therefore will not be linked to your identity in the analysis.
- **Rights:** You don't have to take part in this session if you don't want to; you can ask us any questions you want before or throughout; you can also withdraw at any stage of the session without giving a reason.
- **Complaints/ concerns procedure:** If you have any complaints or concerns please feel free to contact us.
- **Ethics review details:** This research project has been reviewed and approved by Dubai Scientific Research Ethics Committee, DHA. The ethics reference is [DSREC-01/2023\_02]. If, after contacting me with any concern, you're still unhappy and wish to make a formal complaint, please contact the ethics committee. Their email address is [DSREC@dha.gov.ae](mailto:DSREC@dha.gov.ae).
- Ok, thanks, let's start.
- **Questions:**

## Questions

**Table 1: Questions asked for each focus group/interview.**

Focus Group	Entity	Questions
Focus Groups 1,2,3 and In-depth Interview	Entity 1,2,3,4,5,6,7, and 8	<ul style="list-style-type: none"> <li>• <b>Q1</b> What do you think are the key health services required in schools?</li> <li>• <b>Q2</b> What are the current supporting health-related programs for school students?</li> <li>• <b>Q3</b> How can your entity contribute to support school health policy?</li> <li>• <b>Q4</b> What kind of policies are needed to improve student's health?</li> </ul>
Focus Group 4 and 5	Entity 9 (Department 1,2,3,4,5,6, and 7) and Entity 10 (Department 1,2,3,4, and 5)	<ul style="list-style-type: none"> <li>• <b>Q1</b> What do you think are the key health services required in schools?</li> <li>• <b>Q2</b> What are the current supporting health programs for school students?</li> <li>• <b>Q3</b> What kind of policies are needed to improve student's health?</li> <li>• <b>Q4</b> What is needed to improve in the school environment to improve health?</li> <li>• <b>Q5</b> How can we improve nutrition and physical activity in schools?</li> </ul>
Focus Group 6	Schools 1, 2, 3, and 4 (Teachers & Healthcare Professionals)	<ul style="list-style-type: none"> <li>• <b>Q1</b> What are the key social, emotional, or health challenges facing students in class?</li> <li>• <b>Q2</b> What are the key services needed for students in the clinics?</li> <li>• <b>Q3</b> Do you think counselling for nutrition, physical fitness, and mental health is needed? Why?</li> <li>• <b>Q4</b> How can you identify students with unhealthy behaviors (e.g., smoking, bullying, unhealthy food intake, etc.)?</li> <li>• <b>Q5</b> What are the current supporting health programs for school students?</li> <li>• <b>Q6</b> What kind of health education topics are needed for students?</li> </ul>
Focus Group 7	Schools 1, 2, 3, 4, and 5 (Principals)	<ul style="list-style-type: none"> <li>• <b>Q1</b> What are the key issues facing students in the school environment?</li> <li>• <b>Q2</b> What are the current supporting health programs for school students?</li> <li>• <b>Q3</b> What do you think are the key health services required in schools?</li> <li>• <b>Q4</b> What kind of policies are needed to improve student's health?</li> </ul>
Focus Group 8	Schools 1, 2, 3, 4, and 5 (Social workers/Counsellors)	<ul style="list-style-type: none"> <li>• <b>Q1</b> What are the key social, emotional, or health challenges facing students in class?</li> <li>• <b>Q2</b> What are the current supporting programs for school students?</li> <li>• <b>Q3</b> How can you identify students with unhealthy behaviors (e.g., smoking, bullying, unhealthy food intake, etc.)?</li> <li>• <b>Q4</b> What kind of health education topics are needed for students?</li> <li>• <b>Q5</b> What is needed to improve in the school environment to improve health?</li> </ul>
Focus Group 9	Schools 1, 2, 3, 4, and 5 (Parents)	<ul style="list-style-type: none"> <li>• <b>Q1</b> What are the key social, emotional, or health challenges facing your sons/daughters in schools?</li> <li>• <b>Q2</b> Are you aware of any supporting health programs for school students?</li> <li>• <b>Q3</b> What is needed to improve in the school environment to improve health?</li> <li>• <b>Q4</b> What do you think are the key health services required in schools?</li> <li>• <b>Q5</b> What kind of health education topics are needed for students?</li> </ul>

## Appendix 2

### استمارة موافقة

عنوان البحث: دراسة تقييم الاحتياجات الصحية المدرسية

أنا الموقع/الموقعة أدناه أقر:  
بأنني قرأت وفهمت ورقة المعلومات للمشاركين بتاريخ \_\_\_\_/\_\_\_\_/\_\_\_\_ ، للدراسة المذكورة أعلاه، وقد سنحت لي الفرصة الكافية للاستفسار عن أي تساؤلات.

- بأن مشاركتي في هذه الدراسة تطوعية، ويمكنني الانسحاب منها متى شئت
- بأن انسحابي لن يؤثر علي من الناحية الوظيفية.
- أن جميع المعلومات الخاصة بي سوف تعامل ضمن إطار السرية التامة .
- بأن مشاركتي في الدراسة لن تتطلب مني أي دفع/تكلفة.
- بناء على ما سبق ذكره:
  - أوافق على المشاركة في هذه الدراسة.
  - أوافق على السماح للباحثين باستخدام المعلومات المأخوذة من الجلسات النقاشية من أجل الدراسة.
  - كما أوافق على إعطاء المعلومات التالية:

رقم الهاتف المتحرك:

البريد الإلكتروني:

اسم المشارك/المشاركة (الثلاثي):

التاريخ: \_\_\_\_/\_\_\_\_/\_\_\_\_

التوقيع: \_\_\_\_\_

الباحث المساعد/الباحث المشارك فقط

اسم الشخص المخول بالحصول على موافقة المشاركة: \_\_\_\_ التاريخ: \_\_\_\_/\_\_\_\_/\_\_\_\_ التوقيع: \_\_\_\_\_ :

اسم الشاهد (في حالة عدم قدرة المشارك/المشاركة على القراءة والكتابة): \_\_\_\_ التاريخ: \_\_\_\_/\_\_\_\_/\_\_\_\_ التوقيع: \_\_\_\_\_ :

رقم تعريف المشارك/المشاركة المستخدم في الدراسة (للاستعمال الرسمي فقط):

اسم الباحث الرئيسي :

د. كاظم العبادي، استشاري صحة عامة، قسم برامج ودراسات الصحة العامة، إدارة حماية الصحة العامة، هيئة الصحة بدبي

أسماء وعناوين جميع الباحثين في هذه الدراسة :

اسم الباحث	المسمى الوظيفي	مكان العمل	البريد الإلكتروني	الهاتف
د. كاظم العبادي	أخصائي صحة عامة أول	قسم برامج ودراسات الصحة العامة، إدارة حماية الصحة العامة، هيئة الصحة بدبي	KAIAbady@dha.gov.ae	+9714 5024316
د. علي منير آل رحمه	أخصائي صحة عامة	قسم برامج ودراسات الصحة العامة، إدارة حماية الصحة العامة، هيئة الصحة بدبي	amalahma@dha.gov.ae	+9714 502 4328

## CONSENT FORM

**Research Title:** Health Needs Assessment for Schools

By signing this form, I confirm that:

• **I have read and understood the participant information sheet dated**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ for the above study and have had the opportunity to ask questions.

- I understand that my participation is voluntary and that I can withdraw anytime.
- I understand that if I withdraw from the study, this will not affect my employment.
- I understand that my participation in the study will not require from me any payment/cost.
- I understand that my data will be kept confidential.
- Based on that, I agree to: 1. Take part in this study. 2. I allow the researcher to use the data from the focus group sessions for research purpose. I agree to give the below information:

**Mobile:**

**Email:**

**Name of participant:** \_\_\_\_\_

**Date:** \_\_/\_\_/\_\_\_\_

**Signature:** \_\_\_\_\_

**Research Assistant/ Associate ONLY**

Name of person taking consent: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_ Signature: \_\_\_\_\_

Name of witness: \_\_\_\_\_ (if participant unable to read/write) date: \_\_/\_\_/\_\_\_\_ Signature: \_\_\_\_\_

**Study Identification Unique Code (SUIC):**

**Name of Principal Investigator:**

Dr. Kadhim Al Abady, Public Health Consultant, Public Health Programs and Studies Section, Public Health Protection Department, Dubai Health Authority

**Names and Contacts of All Project Researchers**

Researcher Name	Title	Place of Work	Email	Telephone
Dr. Kadhim Al Abady	Senior Public Health Specialist	Public Health Programs and Studies Section, Public Health Protection Department, Dubai Health Authority	kalabady@dh a.gov.ae	+9714 5024316
Dr. Ali Muneer Al Rahma	Public Health Specialist	Public Health Programs and Studies Section, Public Health Protection Department, Dubai Health Authority	amalrahma@ dha.gov.ae	+9714 502 4328