School Health



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Health

Seminar"

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What is school health Program?

A school health program is an organized set of policies, procedures, and activities designed to protect and promote the health and well-being of students and staff which has traditionally included health services, healthful school environment, and health education

Season Mark

Reference: https://www.ncbi.nlm.nih.gov/books/NBK231148/

2. What are the components of a school health program

Ghadeer Alsager 435201762





1. Health Education:

A K-12 curriculum that addresses the physical, mental, emotional, and social dimensions of health.

Including:

f-motivate students to maintain and improve their health, prevent disease, and reduce health- related risk behaviors.

II- increase students health-related knowledge:

Includes a variety of topics, such as personal health, family health, community health, consumer health, environmental health, sexuality education, mental and emotional health, injury prevention and safety, prevention and control of disease, and substance use and abuse.

III-Providing qualified educators.





2. Health Services

Services provided for students to appraise, protect, and promote health.



Including:

I-Ensure access and appropriate use of primary health care services:

By guiding students to access to services they might not seek out otherwise, particularly counseling and family planning services.

II- Provides qualified professionals.





2. Health Services

Services provided for students to appraise, protect, and promote health.



Including:

III-Prevents and controls communicable disease and other health problems.

By developing guidelines that every school must follow and have available the exposure control.

Management of Communicable Diseases in a School Setting

1-Standard precautions: Guidelines recommended by the Centers for Disease Control and Prevention (CDC)

Hand washing: is the single most effective technique.

Use of protective equipments, like gloves and masks.

Proper environmental cleaning.

Additional precautions beyond Standard Precautions are needed.

2-Transmission-based precautions: airborne precautions-droplet precautions-and contact precautions.

3-Personal Hygiene Measures: example: Keep fingernails short and clean-Avoid touching or rubbing eyes.

4-Immunization Procedures

5-Reporting of Absence Rates







2. Health Services

Services provided for students to appraise, protect, and promote health.

Including:

IV-Provides emergency care during emergencies and disasters.

These emergencies and disasters involve threats of harm to students, personnel, and/or facilities and require immediate and effective responses wither caused by natural events (such as severe weather, earthquakes, fires, floods, and tsunamis) and man-made events (such as acts of terrorism), or even accidents.

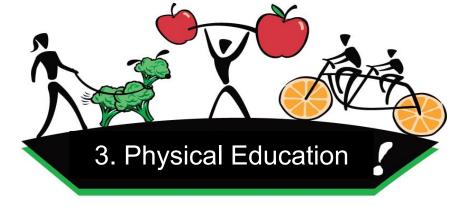
Example of emergency management:

-When a fire alarm is heard, schools evacuate buildings and call 911 to report a fire.

- Severe weather warning they to seek shelter.







A planned, sequential K-12 curriculum that provides cognitive content and learning experiences by promoting activities and sports that all students enjoy and can pursue throughout their lives.

Including:

I-Basic movement skills; physical fitness; rhythms and dance; games; team, dual, and individual sports; tumbling and gymnastics; and aquatics.

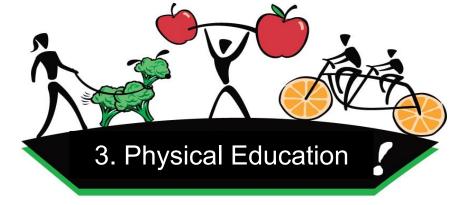
II- Promotes **each** student's development through physical activities.

III- Provide qualified, trained teachers.









Guidelines for Physical education from National Center for Chronic Disease Prevention and Health Promotion -2012

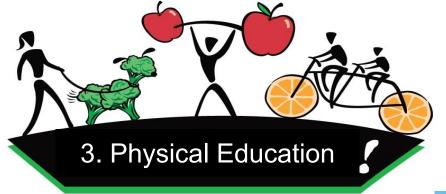
1-Physical education requirements: The CDC and the Institute of Medicine (IOM) recommend that all student should participate in at least **225** minutes of physical education per week.

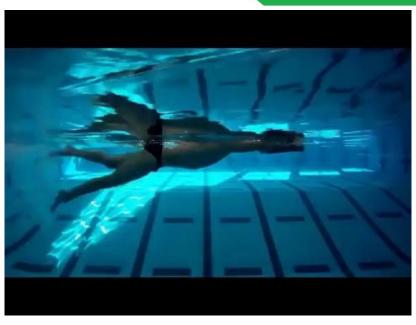
2. Physical **education curricula and standards**: Which offers guidance for teaching physical activity knowledge and skills to students.

3-Physical education **instruction** Appropriate, evidence-based instructional strategies. 4-Student assessment in physical education.

5-Guidelines for elementary, middle, and high school physical education maintain that physical education should be taught by a **qualified teacher with a degree in physical education.**

6-Professional **development** for physical education: for teachers through continuing education and training







Nutrition Services

4. Nutrition Services

Provides qualified child nutrition professionals, and access to a variety of meals that accommodate the health and nutrition needs of all students, according to the U.S. Dietary Guidelines for Americans to achieve nutrition integrity.

Including:



Guidelines according to USDA Food Composition Databases 2013-2014



Nutrition Services

Guidelines according to USDA Food Composition Databases 2013-2014



USDA interim final rule

General

General exemptions

Fresh, canned, and frozen fruit or vegetables with no added ingredients except water, or in the case of fruit, packed in 100 percent juice, extra light, or light syrup are exempt from the interim final rule's nutrient standards.

Canned vegetables that contain a small amount of sugar to maintain the quality and structure of the vegetable are exempted from the rule's nutrient standards.

Sugar-free chewing gum is exempt from competitive food standards and may be sold to students at the discretion of the local educational agency.







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5. Healthy School Environment

The physical and aesthetic surroundings and the psychosocial climate and culture of the school.

The psychological environment includes the physical, emotional, and social conditions that affect the well-being of students and staff

Including:

- ★ The school building and the area surrounding it
 - Design and construction of school next slide-.
 - an emergency preparedness plan ex. an alarm system, evacuation plans so that students and other occupants are familiar with the closest exit and the appropriate path., emergency drills so that students be familiar of How to manage in such situations
 - Rubber flooring in Kindergarten schools.
- ★ Biological or chemical agents that are detrimental to health
 - All chemicals in a school need labels that must identify the material, the appropriate hazard warnings
- **Physical conditions such as temperature, noise and lighting.**
 - Sound Insulation between Spaces
 - workplace temperatures must be kept 'reasonable' for children.



Design and construction of school:

Policy Guidelines & Technical Specifications for School Construction - ministry of education of Afghanistan Planning Guidelines for National Schools - Department of Education & Science in Ireland

• Class size and School size: (Two Standards for Class sizes shall be in use):

- Classroom space shall not be less than 0.7 m2/child
- o 7m x 4.3m for traditional construction/ rural schools
- 7.5m x 5m for improved construction/urban/peri-urban schools
- → School size (number of classrooms) shall depend on student capacity and type of school

Class rooms windows:

- Area of windows: 20% of floor area
- Sufficient natural ventilation
- Natural day lighting, to minimise the dependence on artificial lighting.
- Blackboard position in relation to window side shouldn't be less than 1 meter to minimize Glare.
- Proportioned for minimum damage in earthquakes

Doors:

- Doors should be easy to open and close. Care should be taken in the design of the door, frame, and opening
 mechanism to protect against injury to fingers, etc. An adequate glazed viewing panel in the solid core door
 from all rooms to the corridors should be provided for the benefit of small children.
- o Door should be close to the board so that the teacher be aware of who is going in & out the classroom.





6. Health Promotion For School Staff

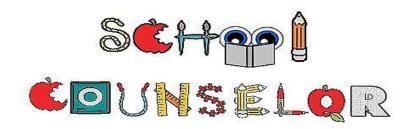
Opportunities for school staff to improve their health status through such activities as health assessments, health education, and health-related fitness activities.

Including:

- Encourages school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale, and a greater personal commitment to the school's overall comprehensive health program.
- ★ Improves staff productivity.
- ★ Decreases staff absenteeism.

Example: Jan - 25 May 2009 "Faculty and staff at Musselman High School in Inwood, West Virginia, recently lost a combined 791 pounds in four months as part of a "biggest loser" competition to improve their health. This quest for better health is an integrated part of the positive school culture established by the school's health educators." Musselman staff, faculty lose 791 pounds, By MATTHEW UMSTEAD, April 02, 2009.







7. counseling, psychological, and social services

Services provided to improve students' mental, emotional, and social health.

Including:

★ individual and group assessments, interventions, and referrals.

For example:

- **1-** counselors may meet with **teachers** to develop strategies for assisting a student with learning difficulties.
- **2-** The counselor may also meet with the **child's parents** to discuss ways that they can help facilitate learning in the home and maximize learning outcomes.
 - **3-** School counselors may also meet with with **teachers and parents** in cases concerning students with mental health issues or those with severe behavioral issues.
- represent the consultation of the school environment.
- rofessionals (such as certified school counselors, psychologists, and social workers) provide these services.



8. Parent and Community Involvement

An integrated school, parent, and community approach for enhancing the health and well-being of students.

Including:

- ★ Builds support for school health program efforts through school health advisory councils, coalitions, and broadly- based constituencies for school health.
- Schools should actively solicit parent involvement and engage community resources.



3. What are the school health services?



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School health services

the School Health Policies and Programs Study (SHPPS) has described school health services as a "coordinated system that ensu continuum of care from school to home to community health care provider and back"

Compagatha	TT14h	C	D	: 4l	Cabaala
Some of the	: neam	Services	Provided	m me	SCHOOLS:

2- Monitor vital signs

- 1- Temperature for any INFECTIONS
- 2- Blood pressure HYPO/HYPERTENSION
- 3- Respiration rate (PNEUMONIA...)
- 4- Pulse (THYROID DISORDERS...)

- 3- Provide screening (height/weight) vision, hearing
- 4-Child abuse evaluation and follow-up (physical or mental)

5- Evaluate emotional or behavioral problems

6- Administer medication

7- Clean and change dressings

1- Administer first aid

8- Case management for chronic health problems

9 - Provide nutritional counseling

10- Provide mental health counseling (depression, impulsive behavior ...)

Qualified professionals such as:

- School nurses
- Nurse practitioners
- Physicians
- Dentists
- Health educators
- Physician assistants
- Allied health personnel
- School principals



?

1- School health physician :

Ideally, school physicians should be board-certified pediatricians or physicians with expertise in pediatrics. The American Academy of Pediatrics recognizes the important role physicians play in promoting the optimal biopsychosocial well-being of children in the school setting. The roles of physicians working in schools are broad. Involvement can range from fulfilling mandated services, serving as an advisor to a school health advisory group, or being the leader of a coordinated school health program. A school health physician can provide:

- 1- Continuing care of students
- 2- Prevention of school-related hazards
- 3- Information about hazardous substances in the area of the school
- 4- Vaccinations and vaccination counseling at the request of the health authorities
- 5- Health education
- 6- First aid measures and information

2- School health nurse:



School Health nurse has to:

- Perform his/her duties directly in the school under the supervision of the SH unit at PHC centers.
- Be Responsible of providing the service for a maximum of (5) schools / a maximum of (1000) students



2- School health nurse

The role and duties of the School Health nurse:



- 1. Inspection of student's health and detect the sick cases and refer where needed.
- 2. Perform preventive and sanitary measures for contagious cases and infectious diseases.
- 3. Perform periodical inspection of the school environment and school canteen and follow the corrective measures.
- 4. Execute the preventive and Health promotion
- 5. Recognize the victims of bullying and violence from students and perform the needed measures.
- 6. Follow up students with chronic disease.
- 7. Deal with mild cases and emergencies till arrival of special team or refer to hospital
- 8. Participate in the training of school health teachers within the school health team.



3- School principals

The role of the principal covers many different areas including leadership, teacher evaluation, student discipline, and many others. One of the most important roles of school principals is health promotion and health education.

Some roles of school principals:

- 1-distribute smoking banning signs into school
- 2-determine the subjects of health education according to the students needs
- 3- put a plan for health education
- 4- run the plan of health education
- 5- provide different kinds of food in the canteen
- 6-provide protected windows for the building
- 7- get sure of water safety used in the school



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School health services



School health services use different ways to support students:

Acute and emergency care

Care coordination

Chronic disease management in schools

Family engagement



Acute and emergency care



- Urgent situations and medical emergencies can happen at any time.
- Most frequently the school nurse is the one dealing with these events as she might be the only professional trained to act in response to a medical crisis.
- School nurses are also certified to deal with larger emergency events affecting students and staff, e.g. earthquakes.

Care coordination



- Care coordination in schools is organized by school nurses arranging the care of students by providing data and communication among relevant authorities responsible for the needs and care of students with chronic health conditions.
- This integrated health care involves families, health care providers, teachers and school staff (e.g. administration).
- Care coordination benefits:
 - Improvement of medical management
 - Provision of more details
 - Highlighting the need for more resources
- Students with special and individualized needs benefit from care coordination; the school nurse plays a vital role in setting up these plans.

Chronic disease management in schools

- Students with chronic health conditions may suffer from daily difficulties with managin their conditions.
- Examples of chronic health conditions: asthma, diabetes and food allergies.
- Schools can play a major role in supporting those students by providing integrated school health services they need.
- For example a school nurse can help a student through an asthma exacerbation attack.







- It is important to involve families of students and make sure they are aware of the health services provided at school.
- Families can play a major role in identifying lack of adequate services and demanding better services.
- Families form an important part in the connection between the school and the health care providers which is of great benefit in following the health care plan for the student.
- Benefits of family involvement:
 - Updates in health status
 - Distribution of medication at the right time
 - Monitoring and testing during the school day as needed (e.g. blood sugar levels for a diabetic student)
 - Taking care of diet and physical considerations

WSCC model- overview:



- The Whole School, Whole Community, Whole Child (WSCC) model is established in the United States of America to ensure a unified powerful approach to improve learning and health across the nation's schools.
- CDC (Centers for Disease Control and Prevention) and ASCD (formerly the Association for Supervision and Curriculum Development) developed this model as an expansion of the eight elements of CDC's Coordinated school health approach combined with ASCD's Whole Child Framework.
- Also leaders from different fields like health, public health, and education joined in improving the WSCC model.
- Applying the WSCC model is of a great benefit because schools play a crucial role in promoting health among students guiding them towards a lifelong healthy behavior patterns.

Expanding the Coordinated School Health Approach

- The eight components of the CSH were expanded to be ten elements in the WSCC model:
- Displayed in the table below, we can see that each of those two points from CSH were further divided and replaced by another two points in the WSCC model.

CSH	wscc	
Healthy and safe school environment :	1- Social and emotional climate	2- Physical environment
Family/community involvement :	1- Community involvement	2- Family engagement

ASCD's Whole Child Framework - overview

- Whole child principles:

- Every student enters school healthy and learns about and practices a healthy way of living.
- Every student learns in an appropriate environment both emotionally and physically safe for students and adults.
- Every student should be involved actively in learning and is connected to the school and broader community.
- Every student has access to personalized learning and is provided support by certified, caring adults.
- Every student is challenged academically and prepared for greater achievements in college or further study and for employment and participation in a global environment.

WSCC model- overview:



WSCC model- health services:



- School health services cover emergency care, care coordination, chronic conditions management and family engagement.
- Promotion of wellness, preventive services, health education for student and parent all complete care coordination services.
- Health services establish the connection between school, students, families, community and healthcare providers to promote a healthy and safe school environment.
- School health services help students and families cope with health and social stressors (e.g. social and economic barriers) to be able to be in charge of these stressors and encourage their own health and learning needs.
- These services are provided by certified professionals like school nurses, nurse practitioners, dentists, health educators, physicians, physician assistants and allied health personnels.

4. Definition of comprehensive school health programme

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4. What is comprehensive school health program?



4.

Health scientists have established that 50 percent of premature illness, injury and death is due to an unhealthy lifestyle. Experience and research evidence suggest that a comprehensive school health approach can improve the health-related knowledge, attitudes and behaviors of students.

4. Definition of comprehensive school health program

A comprehensive school health program is an integrated set of planned, sequential, school-affiliated strategies, activities, and services designed to promote the optimal physical, emotional, social, and educational development of students. It is coordinated by a multidisciplinary team and accountable to the community for program quality and effectiveness.



4. Definition of comprehensive school health program

The program involves and is supportive of :

families

Family involvement implies that the family has knowledge of the CSHP—and participates in community deliberations to determine the needs and the activities, strategies, and services that are to be offered.

community, based on (needs, resources, standards, and requirements)

The local community refers to the wide range of stakeholders—parents, students, educators, health and social service personnel, insurers, business and political leaders.

program design must consider and be sensitive to the cultures, values, and moral standards of the community.

4. Definition of comprehensive school health program

CSHP approach require a substantial change in the way schools and their staff practice school health. This involves moving from practices that rely mainly on classroom-based health education models to a more comprehensive, integrated construct of health promotion that focuses both on children attitudes and behaviors, and their environment.



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A comprehensive school health approach includes a broad spectrum of activities and services which take place in schools and their surrounding communities that enable children and youth to enhance their health, develop to their fullest potential and establish productive and satisfying relationships in their present and future lives. The goals of a comprehensive approach are to:



- 1- Promote health and wellness.
- 2- Promote positive health and safety behaviors.



- 3- Prevent high risk social behaviors.
- 4- Prevent specific diseases, disorders and injury.



5- Help support those who are already exhibiting special health care needs.

6- Intervene to assist children and youth who are in need or at risk.

Storyblock

Attainment of these goals requires an integrated approach through developing multiple programs and strategies with the help of the school council, families and students. Which will contribute to the health, safety and well-being while assuring supportive health environment that nurtures academic growth and development.



School Health program in Saudi Arabia

SCHOOL HEALTH GENERAL DEPARTMENT IN MINISTRY OF HEALTH

Jawharah Almalki Aya Ghanim

DIRECTOR-GENERAL'S MESSAGE

"School Health General Department (SHGD) will invest to enhance youth health at school, with special focus on preventive measures. To do so, SHGD will improve school environment, monitor school canteens, and ensure receiving all basic vaccines. SHGD will also prepare educational and awareness health programs to enhance healthy diets and regular exercising to prevent diseases and their related risks."

Director-General of School Health General Department
 Dr. Mahmoud Abdul-Fattah Nahhas



VISION

School health with a leading role in promoting students' health and reducing their exposure to risk factors, to secure top health standards through collaboration with all stakeholders, to boost and develop school health programs and services, to put unified processes in place, and to provide information on health issues as well as required interventions.



MISSION

To enhance students' health and improve their academic performance, through cutting-edge programs, ongoing control of their health condition, and building effective partnerships to ensure quality health services for school community.



OBJECTIVES

- SHGD is the responsible body for **planning**, **implementing**, **monitoring** and **assessing school health services**.
- SHGD's programs and services depend on collaboration with all stakeholders, both inside and outside MOH, to provide better services, and to engage both the community and families in school health activities.
- Offer unique, creative and favorable health environment to promote students'
 health, and to boost their academic performance in conjunction with the
 Ministry of Education.



OBJECTIVES

- Ensure fair access to top-quality school health services and programs
 by students across the Kingdom.
- Participate in developing safety and health standards by providing the health-safe school environment (safe drinking water, safe canteen ...) in collaboration with all stakeholders.



 Reduce prevalence of lifestyle-associated diseases by promoting healthy behaviors among school community members.

DUTIES

- Develop SHGD's plans, programs and projects in coordination with all stakeholders.
- Design health promotion programs based on the school community's needs.
- Foster safe and healthy behaviors among school community members.
- Detect health and food issues in school communities, determine their priorities,
 and devise the right solutions with stakeholders.
- Coordinate with School Health Affairs Department at the Ministry of Education in terms of school health programs implementation.
- **Design performance indicators for school health** activities and programs.



DUTIES

- Monitor and assess school health programs implementation.
- Ensure implementation of all seasonal and emergency vaccination campaigns in schools.
- Participate in developing school health awareness media and messaging, both paper-based and electronic.
- Participate in preparing and implementing school health studies.
- Organize school health training courses for both health and educational staff.
- Develop school health workflow processes and update them periodically.
- Conduct and publish school health research and studies.



The Global Aspects of School Health

- 1. Health Education
- 2. Health Services
- 3. Physical Education
- 4. Nutrition Services
- 5. Healthy School Environment
- 6. Health Promotion for School Staff
- 7. Counseling, psychological, and social services
- 8. Parent and Community Involvement

1. Health Education

- Linked pages to the CDC on characteristic and standards of school health
- Health education on school level involved suggestions from the Unicef on integrating approximately 20 activities for each of the three subjects of science, math, and social studies in connection to health
- Manifested in the "Rashaga" initiative
- E.g. The teacher shows a healthy dish and asks students to prepare a meal and discuss the importance of diversification in meals
- 3 periods in total, one for each meal of the day

2. Health Services

- Divided into Curative, Preventive, and Promotive
- Curative: Periodic Fitness Examination, Curative Care, School First Aid Clinic
- Preventive: Vaccinations
- Promotive: A list of health promoting services and programs
- No indication of how it's implemented
- Key challenges: Shortage of medical staff particularly nurses (the standard is 1 nurse for 5 schools, Administrative and logistic burden and short time frame for transferring the Directorate from MOE to MOH, Denial or resistance of some steps of change

Preventative - Vaccinations

- The Expanded Programme on Immunization (EPI) in the Kingdom was launched in 1976
- Targets 15 infectious diseases

•	Tuberculosis	Tetanus	Mumps
	Hepatitis B	Pneumococcus	Rubella
	Polio	Rotavirus	Hepatitis A
	Diphtheria	Measles	Varicella
	Pertussis	Meningococcal	Haemophilus influenzae (B)

Rashaqa Initiative

- General goal: Reduce rate of obesity
- Mechanism:
 - Raising awareness
 - Recording height, weight, and BMI
 - Canteen adherence to health regulations
 - Periodic Reporting
- Roles of:
 - Principal
 - Organizer of Rashaqa
 - Health Advisor
 - Nurses
 - Physicians



3. Physical Education

- Prevention and management of obesity: Saudi guideline update
- Done in 2016
- Encourage children gradually to perform at least 60 minutes of moderate to vigorous exercise daily
- Encourage children to lead active daily life such as walking, cycling, etc.
- Discourage sedentary behavior of more than 2 hour for children particularly of screen time
- Encourage family approach to physical exercise (e.g., walking and cycling to school and shops, going to the park or swimming)

4. Nutrition Services

- States the importance of a balanced diet
- Canteen regulations including:
 - Building and location e.g. good lighting, well secured windows
 - Equipment and furnishing e.g. availability of tables, fridges in operating condition
 - Instructions for operating canteens e.g. daily cleaning, use of antiseptics
 - Requirements for food and beverages in schools e.g. Milk, fresh fruits and vegetables
 - Prohibited foods and beverages e.g. soft drinks, chips
 - Canteen workers e.g. personal hygiene, using gloves
- Procedure to follow in case of breach or food poisoning

5. Healthy School Environment



6. Health Promotion for School Staff



7. Counseling, psychological, and social services



8. Parent and Community Involvement



Suggestions for improvement

SCHOOL HEALTH IN KINGDOM OF SAUDI ARABIA

FOOD FOOD FOOD





A research shows that improved nutrition in schools leads to increased focus and attention, improved test scores and better classroom behavior

Daily Sport Activities













Studies were gathered by reviewing published papers in the Medline and Google Scholar databases reporting the prevalence of child abuse and neglect in SA over the past 15 years. In 2007, the prevalences of physical abuse, sexual abuse, and neglect in previous studies were 70%, 15%, and 15%, respectively. Between 2000 and 2008, the prevalence of child physical abuse and neglect was greater than other forms of abuse. Additionally, the annual report of the National Family Safety Registry noted the same findings. In 2014, a study in Al-Kharj found that psychological abuse was most prevalent among teenagers.









Child protection training for teachers







برنامج الأمان الأسري الوطني The National Family Safety Program





A cross-sectional study was conducted to examine the prevalence of smoking and habits of smoking among male secondary school students in Jeddah, Kingdom of Saudi Arabia (KSA) Of the studied group, 258 (37%) currently smoked, and of these, 83.7% had started smoking at the age of 14 years or less





Routine Doctor Visits for Schools





Suggestions for improvement

- Provide healthy food with nutritional benefits and delicious taste
- Implement Physical education programs and daily sport activities
- Activate Child protection system and spread awareness of children rights
- Involve Doctors in health education to educate students and improve their health knowledge

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