

## Knowledge of High School Teachers Regarding Healthful School Environment in Erbil City

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### ABSTRACT

**Background and Objectives:** A healthy school environment focuses on providing a suitable setting for learning and healthy behaviors because the school environment represents an important setting for many children's social habits and behaviors that are learned at school. The purpose of this study was to assess the high school teachers in Erbil City's public and private schools' knowledge of a healthy learning environment.

**Method:** An across-sectional survey was conducted to determine teachers' knowledge regarding a healthful school environment. The study included 360 teachers in Erbil city, 260 from public schools and 100 from private schools. A questionnaire was constructed for the purpose of data gathering.

**Results:** more than half (64.6%) of teachers of the public schools were aged 38-50 compared with 21% of teachers of the private schools; 51.2% of the teachers of the public schools were male compared with 64% of the private teachers; 81.9% of the teachers in the public schools were married compared with 69% of the private school teachers; and the majority (86%) of the private teachers had Bachelor degrees compared with 95.8% of teachers of the public schools. The highest percentage (74.6%) of the public teachers had a fair level of knowledge compared with 56% of teachers of the private schools.

**Conclusion:** Based on the study findings of the present study, it was concluded that the highest percentage of the teachers had a fair level of knowledge regarding school health policies.

**Keywords:** School Health Policy; Knowledge; Teachers.

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## INTRODUCTION

A healthy school environment focuses on providing a suitable setting for learning and healthy behaviors, which is insufficient in the majority of schools and exposes staff members and children to different health risks. To improve health among staff members and children in schools, adequate understanding of and adherence to healthy school environments are required [1]. According to the World Health Organization (WHO, 2010), a healthy school environment includes the school's physical structure, infrastructure, furniture, use of chemicals, and biological agents, as well as the site where the school is located and the immediate environment, including the air, water, and materials that kids may come into contact with [2]. Because many of a child's social norms and behaviors are learned in the classroom, the school environment is a crucial context [3]. The school is the children's second-most-important learning environment after the home, and it plays a significant role in the community [4]. The implementation of a healthy school environment was assessed putting into consideration the availability or presence of facilities that are basic to its implementation and that are conducive to optimal physical, mental and emotional health, safety of the pupils amongst all members of staff and students [5]. A key component of the School Health Program is a healthy school environment. The term "Healthy School Environment" refers to any carefully planned, organized, and carried out actions to guarantee safety and wholesome living conditions for all members of the school community. The level of intellectual growth and development of a person is significantly influenced by their school environment, which includes physical, biological, and sociocultural factors. The goals of a healthy school environment are to establish a secure and healthy learning

environment as well as adequate safe water supplies and restrooms for use in classrooms [6]. Health is essential to everyone's life. Everyone has to be in good health. Even though, everyone is in good health that needs to be maintained constantly. This knowledge will cause schools to adjust in order to care for children's health issues. A country's overall system for delivering healthcare should include a school health program [7]. A healthy school environment includes everything surrounding a school that has an impact on students' physical, mental, and emotional health [8]. Additionally, it presents an opportunity to guarantee the life cycle approach required for a kid's development as in addition to services for maternal and child health [9]. According to Ezeonu et al, the National School Health Policy was passed and accepted in Nigeria in 2006 as a manual for carrying out the School Health Programme to maintain and enhance the health of students [10]. As a result, it serves as both a legal foundation and a declaration of the government's commitment to protecting students' health at school. Future health may be contributed to and wisely ensured by making investments in children's health today. Through the ongoing execution of the sustainable development objective of "Ensuring an inclusive and excellent education for all and encouraging lifelong learning" as the cornerstone to improve people's lives and sustainable development, the school provides a great chance to reach many youngsters [11].

## METHODS

An across-sectional was conducted to determine teachers' knowledge regarding a healthy school environment. 360 teachers were recruited for the study (260 teachers from public schools and 100 teachers from private schools) in Erbil city/ Kurdistan

Region, from 1st November 2021 to 1st November 2022. A non-probability/convenience sampling technique was used to collect the data. The Scientific and Ethics Committee of the College of Nursing at Hawler Medical University gave its approval to the study (code 112) on 7/10/2021 before starting the research. The formal consent form was taken from the General Directorate of Education in Erbil, in both public and private schools to conduct the study. The inclusion criteria are composed of (high schools located in Erbil city, teachers of both genders who are willing to participate in the study and are available during the study). Exclusion criteria included (Students, non-teaching staff, crop members, students participating in teaching practice, and teachers who refused to participate in the study were all excluded from the study. the high schools not located within the Erbil city, non-teaching staff, teachers that experience less than 2 years and teachers that refuse to take part in the study). A semi-structured instrument was designed after reviewing related literature on school health policy Documents and perceived knowledge that related to healthy school environments. Two parts were used for data collection. Part one includes socio-demographic characteristics and the professional background of the teachers. This part contains information such as age, gender, marital status, level of education, years in service, subject taught, monthly income, house ownership and car ownership. Part two: knowledge of school health policies. The inquiries are open-ended. Respondents to the open-ended questions were required to provide a "Yes," "No," or "I don't know" response. Regarding the rating and scoring of the scales, the responses to the teachers' knowledge about school health policy document items included two answers (0 = Incorrect and 1= Correct). The calculation

of overall teachers' knowledge about school health policy documents (14 items) was categorized into three groups' poor knowledge (0-4.8), fair knowledge (4.9-9.7), and good knowledge (9.8-14). The data were analyzed by using Statistical Package for Social Sciences (SPSS) software for statistical analysis Version 26, for calculating descriptive statistical analysis (frequency and percentage). Inferential statistical analysis (Chi-square test, Fisher's exact test, and independent sample t-test) was used to determine the association between variables. The P-value is considered statistically significant if it's  $\leq 0.05$  which rejects the null hypothesis. The Scientific and Ethics Committee of the College of Nursing at Hawler Medical University gave its approval to the study (code 112) on 7/10/2021 before starting the research. The formal consent form was taken from the Ministry of Education in Erbil. The respondents' rights and confidentiality were protected throughout the study. They were informed and explained the goal of the study as well as the confidentiality of the information through a verbal permission process.

## RESULT

Three hundred and sixty teachers were included in the study. Their mean age (SD) was 39.8 (8.3) years, ranging from 25 to 63 years; the median was 40 years. Table 1 shows that the majority (74%) of private school teachers were aged (25-37), younger than public schools (64.6%) were aged between (38-50) years ( $p < 0.001$ ). The percentage of male in private school teachers was (64%), which was higher than male in public school teachers from 51.2% ( $p = 0.028$ ). The majority (81.9%) of the teachers in the public schools were married compared with 69% of the private school teachers ( $p = 0.046$ ). The highest (95.8%) of the public teachers had bachelor degrees

compared with 86% of teachers in the private schools ( $p = 0.001$ ). Around one-quarters (14%) of the private teachers had postgraduate degrees compared with 4.2% of teachers in the public schools ( $p = 0.001$ ). Regarding the duration of service, around two-thirds (65%) of the private teachers served less than 10 years in teaching compared with 10.4% of teachers in public schools. On the other hand, 35.4% of the public teachers had served 20 years or more as teachers compared with 11% of the private teachers ( $p < 0.001$ ).

There was no significant difference between public and private teachers in the subjects they taught ( $p = 0.643$ ). No significant difference was noticed in the income of teachers of the two groups ( $p = 0.105$ ). Regarding house ownership, 61.2% of the teachers in the public schools owned a house compared with 47% of teachers in the private schools ( $p = 0.016$ ). Finally, 85.8% of teachers of the public schools owned a car compared with 77% of the private teachers ( $p = 0.046$ ).

**Table 1:** Characteristics of study samples of high school teachers.

| Socio-demographic Characteristics |                              | School        |               | P-Value                  |
|-----------------------------------|------------------------------|---------------|---------------|--------------------------|
|                                   |                              | Public F. (%) | Private F.(%) |                          |
| Age Group (years)                 | 25-37                        | 60 ( 23.1 )   | 74 (74)       | <b>&lt; 0.001</b><br>VHS |
|                                   | 38-50                        | 168 (64.6)    | 21 (21)       |                          |
|                                   | 51-63                        | 32 (12.3 )    | 5 (5)         |                          |
| Gender                            | Male                         | 133 (51.2)    | 64 (64)       | <b>0.028</b><br>S        |
|                                   | Female                       | 127 (48.8)    | 36 (36)       |                          |
| Marital                           | Single                       | 44 (16.9)     | 30 (30)       | <b>0.046</b><br>S        |
|                                   | Married                      | 213 (81.9)    | 69 (69)       |                          |
|                                   | Divorced                     | 2 ( 0.8 )     | 1 (1)         |                          |
|                                   | Widowed                      | 1 (0.4)       | 0 (0)         |                          |
| Education                         | Bachelor degree              | 249 (95.8)    | 86 (86)       | <b>0.001</b><br>VHS      |
|                                   | Postgraduate                 | 11(4.2 )      | 14 (14)       |                          |
| Service duration                  | < 10                         | 27 (10.4)     | 65 (65)       | <b>&lt; 0.001</b><br>VHS |
|                                   | 10-19                        | 141 (54.2)    | 24 (24)       |                          |
|                                   | 20+                          | 92 (35.4)     | 11 (11)       |                          |
| Subject taught                    | English                      | 33 (12.7)     | 16 (16)       | <b>0.643</b><br>NS       |
|                                   | Kurdish                      | 23 (8.8 )     | 13 (13)       |                          |
|                                   | Arabic                       | 32 (12.3)     | 12(12)        |                          |
|                                   | Mathematic                   | 28 (10.8)     | 14(14)        |                          |
|                                   | Physic                       | 21 (8.1 )     | 7 (7)         |                          |
|                                   | Chemistry                    | 28 (10.8)     | 12 (12)       |                          |
|                                   | Biology                      | 32 (12.3)     | 8 (8)         |                          |
|                                   | Others                       | 63 (24.2)     | 18 (18)       |                          |
| Income                            | Sufficient for daily needs   | 136 (52.3)    | 64 (64)       | <b>0.105</b><br>NS       |
|                                   | Insufficient for daily needs | 122 (46.9)    | 36 (36)       |                          |
|                                   | Exceeds ne                   | 2 (0.8 )      | 0 (0)         |                          |
| House                             | Owned                        | 159 (61.2)    | 47 (47)       | <b>0.016</b><br>S        |
|                                   | Partially owned              | 41 (15.8)     | 15 (15)       |                          |
|                                   | Rented                       | 45 (17.3)     | 24 (24)       |                          |
|                                   | Others                       | 15 (5.8 )     | 14 (14)       |                          |
| Car                               | Yes                          | 223 (85.8)    | 77 (77)       | <b>0.046</b><br>S        |
|                                   | No                           | 37 (14.2 )    | 23 (23)       |                          |

Table 2 shows that more than half (52.3% of public and 58% of private) of the teachers have information about school health policy, but there was no significant difference between both groups of teachers ( $p = 0.398$ ). More than two-thirds (68.1%) of public school teachers compared to 74% of private school teachers knew the school health policy is a written guideline which helps in the effective monitoring and evaluation of the school health program, and no significant difference was detected between the two groups of teachers ( $p = 0.403$ ). More than three-quarters of (79.2%) public school and (81%) private school teachers knew the school health program helps in the promotion of health and development of the school community ( $p = 0.398$ ). Only 19.7% of teachers knew that the school health policy was formulated by the ministry of education, One-quarter of private teachers knew about that, compared with 17.7% of public teachers ( $p = 0.001$ ). Around three-quarters of (72.3%) public school and (75%) private school teachers knew that the school health policy is a structure that successfully monitors the duties of participants in the school. No significant difference was perceived between the two groups of teachers ( $p = 0.795$ ). Around two-thirds (63.8%) of public school teachers and (58%) private school teachers knew that the school health policy was formulated in joint conjunction with the ministry of health and education. No significant difference was noted between the private and public school teachers ( $p = 0.583$ ). More than three-quarters (77.2%) of the teachers knew that the school health programs enhanced the comprehension and learning abilities of the students (76.9%) public school teachers and (78%) private school teachers. The difference between the two groups was not significant ( $p = 0.794$ ). The majority (85%) of public school teachers and (87%) of private school

teachers knew that a safe physical, biological, and socio-emotional climate in the school is one of the components of the school health program, and there was no significant difference between the two groups ( $p = 0.468$ ). The majority of the teachers (88.6%) were aware that a school might be considered healthy if it promotes intimate relationships between the school, home, and community and there was no significant difference between the two groups ( $p = 0.339$ ). The table shows that only 16.7% (27% of the private and 12.7% of the public) of the teachers have a copy of the national school health policy in their school ( $p = 0.001$ ). More than one-third (37.5%) of the teachers mentioned that their school has written health-related guidelines or policies for use (51% of the private teachers compared to 32.3% of the public teachers,  $p = 0.001$ ). More than one-third (35.8%) of the teachers mentioned that there is a procedure in place to monitor and enforce proper implementation of the mentioned policies in their school (56% of the private compared to 28.1% of the public teachers,  $p < 0.001$ ). The majority (85.8%) of teachers consider that the school health policy encourages skill-based health education (89.2% of the public teachers compared to 77% of the private teachers,  $p = 0.001$ ).

**Table 2:** Distribution of the study sample according answers.

| Knowledge on School Health Policy Document  | School     |            |           |         |
|---|------------|------------|-----------|---------|
|   | Public     |            | Private   |         |
|   | Incorrect  | Correct    | Incorrect | Correct |
|   | F. (%)     | F. (%)     | F. (%)    | F. (%)  |
| Policies are written document formulated by law makers or recognized health institution to help coordinate a particular program or activities for the benefit of the population | 124 (47.7) | 136 (52.3) | 42 (42)   | 58 (58) |
| School health policy is a written guideline which helps in the effective monitoring and evaluation of the school health program   | 83 (31.9)  | 177 (68.1) | 26 (26)   | 74 (74) |
| The school health program helps in the promotion of health and development of the school community  | 54 (20.8)  | 206 (79.2) | 19 (19)   | 81 (81) |
| The school health policy document was formulated by the ministry of education   | 214 (82.3) | 46 (17.7)  | 75 (75)   | 25 (25) |
| The school health policy is a framework that effectively monitor the roles of stakeholders in the school  | 72 (27.7)  | 188 (72.3) | 25 (25)   | 75 (75) |
| The school health policy was formulated by the joint conjunction of the ministry of health and education  | 94 (36.2)  | 166 (63.8) | 42 (42)   | 58 (58) |
| School health programs enhance the comprehension and learning abilities of the students   | 60 (23.1)  | 200 (76.9) | 22 (22)   | 78 (78) |
| Do you know in which year the school health policy was formulated and adopted for use   | 253 (97.3) | 7 (2.7)    | 95 (95)   | 5 (5)   |
| The provision of a safe physical, biological and socio emotional climate in the school is one of the components of the school health program                                    | 39 (15)    | 221 (85)   | 13 (13)   | 87 (87) |
| School that enhances a close relationship between the school, home and the community can be considered healthy  | 33 (12.7)  | 227 (87.3) | 8 (8)     | 92 (92) |
| Do you have a copy of the National School Health Policy in your school  | 227 (87.3) | 33 (12.7)  | 73 (73)   | 27 (27) |
| Does this school has any written health related guideline or policy for use   | 176 (67.7) | 84 (32.3)  | 49 (49)   | 51 (51) |
| Is there any procedure in place to monitor and enforce proper implementation of this policy in this school  | 187 (71.9) | 73 (28.1)  | 44 (44)   | 56 (56) |
| School health policy encourage skill-based health education   | 28 (10.8)  | 232 (89.2) | 23 (23)   | 77 (77) |

Table3 shows that the highest (74.6% of public and 56 of private) of the teachers had fair knowledge about a national school health policy ( $p < 0.001$ ). And there

is a very highly statistically significant difference between public and private schools in regard to the level of knowledge.

**Table3:** Distribution of the study sample according to the levels of overall knowledge.

| Overall Knowledge on School Health Policy Document | School           |                  |
|--|------------------|------------------|
|  | Public           | Private          |
| Poor   | 28 (10.8)        | 8 (8)            |
| Fair   | 194 (74.6)       | 56 (56)          |
| Good   | 38 (14.6)        | 36 (36)          |
| <b>Total</b>                                       | <b>260 (100)</b> | <b>100 (100)</b> |

P-Value of Independent Sample t-test  $< 0.001$  VHS

Table4 shows that the relationship with car ownership was also highly significant ( $p = 0.004$ ), that 35% of people without cars had a high degree of knowledge compared to 17.7% of those who had cars. Also shows that a significant was noted between knowledge on national school health policy document with age ( $p = 0.031$ ) and educational level ( $p = 0.053$ ).The highest percentage (71.8%) of female teachers had fair knowledge, compared with 67.5% among males ( $p = 0.011$ ).Around one third (31.5%) of teachers with less than 10 years of service had a high level of knowledge, compared with

13.9% among those with 10-19 years of service, and 21.4% among those with  $\geq 20$  years of service ( $p = 0.019$ ). Also, table4 shows that no significant association was noted between knowledge of the national school health policy document and the following socio-demographic variables: marital status ( $p = 0.503$ ), income ( $p = 0.794$ ), and house ownership ( $p = 0.440$ ). And also the association with subject taught: no significant association was noted between knowledge on the national school health policy document and subject taught ( $p = 0.229$ ).

**Table 4:** Distribution of the study sample according to association between socio-demographic characteristics and levels of knowledge.

| Socio-demographic Characteristics |                              | Overall Knowledge on School Health Policy |                |                | P-Value                   |
|-----------------------------------|------------------------------|---|----------------|----------------|---------------------------|
|                                   |                              | Poor<br>F. (%)                            | Fair<br>F. (%) | Good<br>F. (%) | Chi-Square<br>test        |
| <b>Age Group (years)</b>          | 25-37                        | 15 (11.2)                                 | 82 (61.2)      | 37 (27.6)      | <b>0.031</b><br><b>S</b>  |
|                                   | 38-50                        | 18 (9.5)                                  | 144 (76.2)     | 27 (14.3)      |                           |
|                                   | 51-63                        | 3 (8.1)                                   | 24(64.9)       | 10 (27)        |                           |
| <b>Gender</b>                     | Male                         | 28 (14.2)                                 | 133 (67.5)     | 36 (18.3)      | <b>0.011</b><br><b>S</b>  |
|                                   | Female                       | 8 (4.9)                                   | 117 (71.8)     | 38 (23.3)      |                           |
| <b>Marital</b>                    | Single                       | 10 (13.5)                                 | 44 (59.5)      | 20 (27)        | <b>0.503</b><br><b>NS</b> |
|                                   | Married                      | 26 (9.2)                                  | 203 (72)       | 53 (18.8)      |                           |
|                                   | Divorced                     | 0 (0)                                     | 2 (66.7)       | 1 (33.3)       |                           |
|                                   | Widowed                      | 0 (0)                                     | 1 (100)        | 0 (0)          |                           |
| <b>Education</b>                  | Bachelor degree              | 30 (9)                                    | 235 (70.1)     | 70 (20.9)      | <b>0.053</b><br><b>S</b>  |
|                                   | Postgraduate                 | 6 (24)                                    | 15 (60)        | 4 (16)         |                           |
| <b>Service duration</b>           | < 10                         | 8 (8.7)                                   | 55 (59.8)      | 29 (31.5)      | <b>0.019</b><br><b>S</b>  |
|                                   | 10-19                        | 16 (9.7)                                  | 126 (76.4)     | 23 (13.9)      |                           |
|                                   | 20+                          | 12 (11.7)                                 | 69 (67)        | 22 (21.4)      |                           |
| <b>Subject taught</b>             | English                      | 5 (10.2)                                  | 39 (79.6)      | 5 (10.2)       | <b>0.229</b><br><b>NS</b> |
|                                   | Kurdish                      | 4 (11.1)                                  | 24 (66.7)      | 8(22.2)        |                           |
|                                   | Arabic                       | 4 (9.1)                                   | 29 (65.9)      | 11 (25)        |                           |
|                                   | Mathematic                   | 8 (19)                                    | 24 (57.1)      | 10 (23.8)      |                           |
|                                   | Physic                       | 0 (0)                                     | 23 (82.1)      | 5 (17.9)       |                           |
|                                   | Chemistry                    | 1 (2.5)                                   | 29 (72.5)      | 10 (25)        |                           |
|                                   | Biology                      | 3 (7.5)                                   | 26 (65)        | 11 (27.5)      |                           |
|                                   | Others                       | 11 (13.6)                                 | 56 (69.1)      | 14 (17.3)      |                           |
| <b>Income</b>                     | Sufficient for daily needs   | 18 (9)                                    | 142 (71)       | 40 (20)        | <b>0.794</b><br><b>NS</b> |
|                                   | Insufficient for daily needs | 18 (11.4)                                 | 106 (67.1)     | 34 (21.5)      |                           |
|                                   | Exceeds need                 | 0 (0)                                     | 2 (100)        | 0 (0)          |                           |
| <b>House</b>                      | Owned                        | 21 (10.2)                                 | 138 (67)       | 47 (22.8)      | <b>0.440</b><br><b>NS</b> |
|                                   | Partially owned              | 2 (3.6)                                   | 45 (80.4)      | 9 (16.1)       |                           |
|                                   | Rented                       | 9 (13)                                    | 47 (68.1)      | 13 (18.8)      |                           |
|                                   | Others                       | 4 (13.8)                                  | 20 (69)        | 5 (17.2)       |                           |
| <b>Car</b>                        | Yes                          | 34 (11.3)                                 | 213 (71)       | 53 (17.7)      | <b>0.004</b><br><b>HS</b> |
|                                   | No                           | 2 (3.3)                                   | 37 (61.7)      | 21 (35)        |                           |



## Discussion

Three hundred and sixty teachers were included in the study. Their mean age (SD) was 39.8 (8.3) years, ranging from 25 to 63 years. The median was 40 years. These results are almost similar to previous studies, such as a study done by Omakinwa, in which the age range of the respondents was between 23–62 years of age with a mean age of  $38.3 \pm 7.7$ . [1]. The finding of the present study shows that the majority of (74%) private school teachers were aged (25-37), younger than in public schools 64.4% were aged between (38 to 50) years. Because the employment of teachers in public schools has stopped only in private schools, the age of private school teachers is younger than that of public teachers. It is evident in Table 1 that around half of the teachers of the public schools were females compared with less than half of the private teachers. The current study results were similar to a study done by Obembe TA et al, conducted in Ibadan, which found that most of the respondents were males (51.9%) [12]. The majority of the teachers in the public schools were married, compared with more than half of the private school teachers. The current study results were similar to a study by Abubakar AU, which found that the majority of respondents were married [13]. It is evident that one quarter of the private teachers had postgraduate degrees compared with less than one quarter of teachers of the public schools. Similar findings were also reported by Omakinwa SO, who found that more than one quarter have a postgraduate degree [1]. No significant difference was noticed in the income of teachers of the two groups. A similar finding revealed in a study in the Philippines by Gregorio Jr ER, which found that there was no significant association between the school teacher's monthly income [14]. It is evident

in Table 3 that more than half of public and private school teachers knew the definition of a policy, but there was no significant difference between both groups of teachers. A similar finding was also reported by Abubakar AU et al, conducted in Nigeria, which found that a higher percentage of respondents had good knowledge of school health program [13]. More than two-thirds of the teachers knew the definition of school health policy, and no significant difference was detected between the two groups of teachers. The findings of the present study disagree with a study done in Nigeria by Obembe TA who found that only a few of the respondents (35.5%) knew the national school health policy [12]. The school health policy was created by the ministry of education, although only a little more than a quarter of teachers were aware of this. One-quarter of private teachers had knowledge about that, compared with one-quarter of the public teachers. This result was supported by the result of the study conducted in Ibadan Local government by Omakinwa SO, who found that the Ministry of Education does not create school health policy, according to more than half of the respondents [1]. Around three-quarters of teachers knew that the school health policy is a framework for efficiently observing the functions of school stakeholders. No significant difference was detected between the two groups of them. It can be compared to a study done by Ademokun OM et al, in Ibadan, which reveals that teachers are not well-aware of the presence of national school health policy [5]. Most of the schools that were visited—more than 75 percent—do not have a copy of any written document guidelines to assist in enhancing the state of staff and student health, which supports how little knowledge there is of the school health document. The school health policy was

developed in partnership with the ministry of health and education, according to about two-thirds of the instructors. No significant difference was detected between the private and public-school teachers. Similar findings were in a study in Ibadan[1]. More than two-thirds of respondents agreed that the national school health policy was developed by the ministry of health and education, and more than three-quarters believed that it aids in promoting the health and development of the school community, according to the data. This demonstrates that although the respondents were well-informed on the national school health policy content, they had little awareness about the year it was created. More than 75% of the teachers were aware that the understanding and learning skills were improved by the school health programs. The difference between the two groups was not significant. It also disagrees with the result of the study by Saadia AG concerning the awareness of national school health policy that only a few of the respondents had ever heard of the term national school health policy [15].The table also shows that only less than one-quarters of the teachers knew the year at which the school health policy was formulated and adopted for use, and there was no significant difference between the two groups. Similar findings in a study in Ibadan [1]. More than half of respondents do not know when the national school health policy was created or whether it is available in their schools. This could be due to the government not properly informing stakeholders in the education system about the policy creation and availability and another study supported by Ademokun OM, in Ibadan, which supports the fact that few teachers are aware of the existence of national school health policy [5].Most teachers—more than 75%—were aware that

a healthy school environment includes a safe physical environment, a biological environment, and a socio-emotional environment, and there was no significant difference between the two groups. A similar finding revealed in a study in Ibadan by Omakinwa SO, who found that more than half of the respondents concurred that a safe physical, biological, and socio-emotional environment is a crucial component of the school health program[1]. This could be as a result of the increased attendance and concentration of students in the classroom, further elucidating respondents knowledge of national school health policy. The majority of the teachers (88.6%) knew that a school that enhances a close relationship between the school, home, and community can be considered healthy, and there was no significant difference between the two groups ( $p = 0.339$ ). A similar finding revealed in a study in Ibadan by Obembe TA, who found that the majority of respondents, 340 (80%), agreed that parents should be informed of their children's health requirements in terms of "school, home, and community relationship[12].No significant association was detected between knowledge on the national school health policy document and the following socio-demographic variables: marital status, income, and house ownership. A similar finding revealed in a study in Nigeria by Abubakar AU, who found that there was no statistically significant relation between gender and knowledge[16]. Significant association was detected between knowledge on the national school health policy document with the following socio-demographic variables: age and educational level. It was in contrast to the study carried out by Abubakar AU, who found that there was no statistically significant relation between age and level of education[16]. Around more than one quarter of female teachers had high

knowledge, compared with one quarter among males. It was in contrast to the study carried out by Saadia AG, who found that more than half males demonstrated a good knowledge of the school health policy [15]. The association with car ownership was also significant, where it is evident that 35% of those who don't possess a car had a high level of knowledge compared with more than one quarter of the car owners, because in our country, whoever has a car goes to picnic and walk with his friends, so it will be short of time to read and get to the information. And no significant association was detected between knowledge on the national school health policy document and the socio-demographic variables in both public and private schools in Erbil City.

## CONCLUSION

In the present study's findings, it was concluded that the highest percentage of the teachers had a fair level of knowledge on national school health policy documents. There was a statistically significant association between teachers' knowledge on the national school health policy document with age, gender, level of education and service duration. There was a highly significant association between the teachers' knowledge on the national school health policy document and car ownership.

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