



Health Education in Algerian Schools and Its Role in Promoting Health Awareness among Students A Field Study on Selected Middle Schools in Algiers Province

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Abstract :

Through this study, we sought to address health education in Algerian schools and its role in promoting health awareness among learners. This was approached from two perspectives: a theoretical perspective, wherein we defined the objectives and characteristics of school health education, in addition to its fields and the relationship between school health education and health awareness, and an applied aspect, dedicated to testing the study's hypotheses and answering its questions. The study affirmed that the success of school health education in fully achieving its objectives lies in the reinforcement of healthy behaviours by increasing health awareness and understanding ways to care for and protect school health from diseases. Health education begins from the earliest stages of an individual's life, through learning how to care for one's health in terms of personal hygiene, practising sports, healthy eating habits, sleep and rest schedules, play, and the use of leisure time, among other aspects. This is accomplished by enhancing knowledge and acquiring competencies, skills, and values related to the well-being of learners through the development and dissemination of health awareness, which seeks to establish genuine health education within the school environment.

Keywords: Health education, health awareness, preventive behaviour, pupil.

L'éducation à la santé dans les écoles algériennes et son rôle dans la sensibilisation des élèves à la santé

Une étude de terrain dans certains collèges de la province d'Alger

Résumé :

Dans cette étude, nous avons cherché à aborder l'éducation à la santé dans les écoles algériennes et son rôle dans la sensibilisation des élèves à la santé. Cette étude a été abordée sous deux angles : un angle théorique, dans lequel nous avons défini les objectifs et les caractéristiques de l'éducation à la santé à l'école, ainsi que ses domaines et la relation entre l'éducation à la santé à l'école et la sensibilisation à la santé, et un aspect appliqué, consacré à la vérification des hypothèses de l'étude et à la réponse aux questions qu'elle pose. L'étude affirme que le succès de l'éducation à la santé en milieu scolaire dans la réalisation de ses objectifs réside dans le renforcement des comportements sains en augmentant la sensibilisation à la santé et la compréhension des moyens de prendre soin de la santé scolaire et de la protéger contre les maladies. L'éducation à la santé commence dès les premières étapes de la vie d'un individu, en apprenant comment prendre soin de sa santé en termes d'hygiène personnelle, de pratique du sport, d'habitudes alimentaires saines, d'horaires de sommeil et de repos, de jeux et d'utilisation du temps libre, entre autres aspects. Cela se fait par l'amélioration des connaissances et l'acquisition de compétences, d'aptitudes et de valeurs liées au bien-être des apprenants grâce au développement et à la diffusion de la sensibilisation à la santé, qui vise à mettre en place une véritable éducation à la santé dans le milieu scolaire.

Mots-clés : *Éducation à la santé, sensibilisation à la santé, comportement préventif, élève.*



Introduction:

Caring for one's health is an issue to which every individual should pay attention through learning healthy behaviours and proper habits and recognising their role in preventing the onset of disease. Studies in the health field have confirmed that the continual practice of healthy daily routines serves as a protective shield against health risks. Scientists have established that the adoption of such practices begins in the earliest stages of human life; thus, implementing early health education mitigates the escalation of health risks by increasing health awareness, which encourages the practice of healthy habits and trains children in mechanisms of physical self-care, such as maintaining personal hygiene, engaging in sports, regulating sleep and rest schedules, and making beneficial use of leisure time. Notably, Islam encourages constant personal cleanliness, considering it a part of faith and a purification of both the body and the soul. The Kingdom of Bahrain stands as a pioneer in this field, having received numerous honours and awards in health education, and is regarded as a successful Arab model. Moreover, the World Health Organisation (WHO) emphasises the necessity of including health education topics within school curricula. Algeria is no stranger to this field, as school health committees have been established to oversee the health of pupils and all matters related to their protection and safety, since achieving the aims of quality education is contingent upon the health of learners.

Previous studies:

Previous studies constitute an essential stage in the procedures of scientific research, serving as a starting point for the study of any topic and as the theoretical background that helps define the research problem, methodology, and tools. They also provide a suitable range of references. For this study, we selected three relevant studies, as follows:

First Study:

In the "A Proposed Programme for Nutritional Knowledge through Teaching Dietary Behaviour to Raise Nutritional Awareness and Healthy Habits among Pupils", this study by Holland was conducted on an experimental sample of 64 pupils and a control group of 36 pupils. The findings revealed that the implementation of a programme including nutritional awareness and healthy habits led to the development of healthy dietary behaviour, as evidenced by the practices of the experimental group.¹

Second Study:

This study included a sample of 104 headmistresses and 640 teachers, which were selected via stratified random sampling. The results were as follows:

- Health awareness in the school environment should be promoted by conducting training sessions within schools.
- The curriculum content and topics related to school health education were reviewed.

¹ Hoolund, U. "The Effect of Nutritional Education Programme," 1990.



- Ensuring the practical application of the school health education programme.¹

Third Study:

Entitled "The Role of Primary School Principals in Achieving the Objectives of School Health as Viewed by Principals and Health Supervisors in Basic Schools in Irbid Governorate, Jordan", by researcher Ghassan Ahmed Maqdad, this study's sample comprised 500 principals and supervisors. The results were as follows:

- The rate of practising healthcare among students and school staff was 84%.
- The rate of a healthy school environment was 79%.
- The rate of school health education was 78%.²

Research Problem:

The field of school health education is regarded as one of the modern domains of public health, as it is the process by which individuals and groups are trained and equipped with the competencies necessary to protect, promote, restore, and care for their health in times of illness. Consequently, one of the priorities of advanced societies is to adopt school health education as a key educational objective, owing to its significant impact on pupils' schooling. The acquisition of sound health habits by learners takes place during the early stages of education for two main reasons: first, the nature of this stage is characterised by a

¹ Khalid Al-Saraira and Turki Al-Rashidi, "The Level of School Health in Primary Schools in the State of Kuwait from the Perspective of Headmistresses and Teachers," *Al-Najah Research Journal* 26, no. 10, 12.

² Ghassan Ahmed Maqdad Othman, "The Role of Principals of Basic Schools in Irbid Governorate, Jordan," master's thesis, Department of Education, 1995.

rapid response to learning; second, learners at this stage are more sensitive to diseases, as well as to the transmission of illnesses from one child to another. Schools also accommodate pupils from diverse backgrounds in terms of living standards, the level of family care, and each child's physical constitution, among other factors. Therefore, it is essential to establish school health education by providing a suitable environment for its implementation. The significance of school health education and its role in the educational field have led us to pose the following questions:

- What are the areas of health education that learners receive?
- Do learners acquire health competencies that enhance their health awareness?

Hypotheses:

- Learners receive lessons on regulating sleep and play schedules, healthy nutrition, and engaging in physical activity.
- Learners acquire health competencies that enhance their health awareness.

1. Methodology:

The field of our study is located in Algiers Province. The statistical unit consisted of middle school teachers. For the study sample, we relied on purposive sampling, which is considered the most suitable and effective for the nature of the topic. According to Ahmed Ayad, a researcher selects a purposive sample either for scientific reasons, such as the belief that this sample adequately represents the original population, or for practical considerations, such as ease of



access. (Ahmed Ayad, 2009, p.119) Furthermore, we chose this type of sample due to the specificity of the study population, deliberately selecting the middle school stage because it is the most sensitive period in a learner's development, characterised by rapid cognitive, emotional, and physical growth and stimulation. The fulfilment of these aspects is closely linked to the learner's health status; thus, the existence of effective school health education enables us to achieve educational objectives, as these objectives are contingent upon the health of learners.

After the geographical scope was defined, it was necessary to determine the time frame of the study, which was conducted from 8 November 2023 to 30 December 2023.

We distributed the questionnaires, and our sample comprised 70 respondents. The questionnaire consisted of 25 questions, including 13 closed-ended questions, nine semi-open questions, and three open-ended questions.

With respect to the research technique, we adopted the descriptive method, which is defined by Obeidat and others as an approach that relies on analysis based on sufficient data over specified periods, following a scientific methodology that yields meaningful numerical forms for interpretation. (Obaidat et al., 1999, p. 46) This enabled us to collect data, organise them into statistical tables, and subsequently interpret and analyse them, leading to conclusions that reflect the reality of school health education in Algeria and its role in promoting health awareness among learners.

2. Operational definitions:

2.1. Health Education:

It is an educational process aimed at disseminating health awareness by providing individuals with experiences and knowledge about personal health to influence their health-related inclinations and attitudes and to instruct them on how to maintain health by modifying their behaviours, changing their perspectives, and instilling sound health habits throughout the various stages of life.

2.2. Health awareness:

It is the process of educating individuals by stimulating their awareness and disseminating concepts and knowledge so that they acquire healthy behaviours and habits, enabling them to maintain and care for their health, thereby avoiding diseases and accidents.

2.3. Preventive behavior:

This refers to the set of actions and measures an individual undertakes to prevent diseases and accidents, such as adhering to timely vaccinations and following daily healthy practices.

2.4. Learner:

This includes anyone enrolled in educational institutions at the middle school level for the purpose of acquiring competencies and training in skills that enable them to obtain a learning certificate, gain experience, or continue their studies towards higher qualifications.



3. Objectives of School Health Education:

The school is an institution among those responsible for socialisation, contributing to the formation of the child's personality by imparting educational competencies as well as healthy habits and behaviours so that they are able to care for themselves healthily. As defined by Raymond Boudon, the school is a social and educational system that forms generations to preserve this inherited system. (Raimond Boudon et al., 2005, p. 74.) From this perspective, the importance of school health education can be summarised as follows:

- The development of sound health habits and behaviours among learners and the instilling of health-related values in them.
- Learning about certain health concepts and ways to prevent diseases and accidents.
- Training in basic first aid procedures. (Ziyad Al-Jarjawi and Muhammad Aghad, 2011, p. 14)
- Understanding the impact of media and technology on individual health.
- Acquiring the ability to establish a daily schedule that includes methods for maintaining personal health.
- Exchanging ideas and good habits among learners and reinforcing all that is positive and beneficial to their health.
- Becoming acquainted with public facilities responsible for the care of learners' health so that learners may recognise the types of services provided.
- Working to improve and promote health awareness and reduce health risks. (Jamil Al-Rashid, 2004, p. 72)

3.1. Characteristics of School Health Education:

The school comprises various elements, including the teaching staff, teachers, school administration, and learners. All these elements interact relationally, exchanging ideas and information, whether concerning teaching methods or healthy habits and behaviours, within which school health education is included. According to Samia Lotfi Al-Ansari and Mahmoud Ahlam Hassan in their book *Mental Health, Social Psychology, and Health Education*, school health education is characterised by the following features:

- Learners acquire information and concepts about health education and aspects related to their well-being, enabling them to maintain their health and resolve environmental problems.
- The presence of positive role models and exemplary behaviour within the school environment is emphasised.
- The benefits of the group and harmony among learners include the formation of active groups that encourage cleanliness and the exchange of good health behaviours.
- Linking learners' inclinations and motives to healthy behaviour.
- Practically acquiring healthy behaviours, making use of learners' free time to learn beneficial health practices.
- Reinforcing positive behaviours related to health education.
- Aligning educational programmes with the psychological and physical needs of learners.
- Learning processes are built on the basis of principles that consider learners' levels of maturity, motivation,



and readiness. (Samia Lotfi Al-Ansari and Ahlam Mahmoud Hassan, 2007, p. 113)

3.2. Fields of School Health Education:

The fields of school health education are integrated cyclically, with each field supporting the others. These fields are as follows:

- **Personal health:**

This involves equipping the individual with sound behaviours and habits related to personal hygiene, sleep and rest schedules, and physical education. (Ali Muhammad Zaki, 1983, p. 43)

- **Health Education within the Home and Family:**

This entails instilling healthy habits in children from birth, making them an essential part of daily practice, such that one feels at ease and is reassured only when engaging in these behaviours. (Baha' al-Din Ibrahim Salama, 2001, p. 132) It also involves parents fostering health awareness among their children.

- **Health Education within the School Environment:**

This is achieved by emphasising physical education and school nutrition and taking into account the learner's level of maturity, readiness, and motivation, alongside the lessons they receive. It also includes encouraging available health services and group activities. (Ibrahim Wajih Mahmoud et al., 2000, p. 347)

4. School health education and health awareness:

The relationship between school health education and health awareness lies in the fact that one of the primary objectives of school health education is to promote health awareness within the school environment. This is achieved

by developing and encouraging sound health behaviours and habits, as well as educating all those involved in the sector, whether administrators, teaching staff, or learners, and providing principles and concepts aimed at protecting learners' health. This is accomplished by designing a programme that incorporates health awareness to ensure the continuity of practice. Through such efforts, a healthy school environment can be established, with every member of the educational community recognising their role in achieving this health project, ultimately leading to optimal emotional, physical, and social health. (Youssef Kamash, 2009, p. 68)

4.1. Importance of School Health Awareness:

The emphasis on developing health awareness within the school environment is a benchmark for the advancement of societies. Health education constitutes a culture reflected in individuals' practice of healthy behaviours from the earliest years of life, with schools playing a crucial role in further reinforcing these practices by instilling them in learners. Additionally, it serves as a policy that states seek to implement to protect public health and prevent disease. In this sense, health awareness represents both a culture of practice and a policy, reflecting the degree of societal development. The importance of school health awareness can be summarised as follows:

- Learners should be provided with a body of knowledge encompassing concepts about their health and methods for overcoming specific health problems and making beneficial use of leisure time by engaging in sports and taking care of their nutrition.
- The individual is encouraged to practice healthy habits in a practical and applied manner.



- Instilling in the individual a love of discovery and an interest in health matters, and all that brings benefit. (Abdul Malik Al-Shalhoob, p. 4)

4.2. Objectives of School Health Awareness

School health awareness forms the foundation for the establishment and sustainability of health education. The objectives of school health awareness are as follows:

- Introducing concepts related to health care by providing lessons that include both theoretical and practical aspects of healthy behaviours.
- Instilling the principle that health education is a collective responsibility by promoting health awareness from an early age and encouraging individuals to practise health guidelines willingly and proactively.
- Familiarising learners with health services and centres and their roles (Baha' al-Din Ibrahim Salama, 2001, p. 24) by organising field visits with pupils, thereby enabling the dissemination of concepts regarding the functions of these facilities and the health services they provide to individuals.

4.3. Fields of School Health Awareness

Health awareness is considered a priority in school health education. It is fundamental to its sustainability, especially when health risks are increasing due to global industrial expansion, the use of manufactured materials, and the resulting environmental pollution, all of which endanger human life. Therefore, effective health education arises from the dissemination of health awareness from the earliest years of life, beginning with school enrolment, so that healthy

daily practices become part of the individual's everyday conduct. The fields of health awareness can be defined as follows:

4.4. Personal Health awareness:

This refers to the set of daily practices an individual undertakes to maintain the cleanliness of their body and protect it from dirt and disease. It involves raising individuals' awareness of the importance of healthy nutrition, engaging in physical activity, and undergoing medical tests to benefit from available services. Personal health awareness also includes avoiding harmful habits such as smoking, using hallucinogenic drugs, and obesity. (Abdelaziz Miftah, 2010, p. 51)

4.5. Nutritional Health awareness:

This involves the learner acquiring a set of concepts regarding the types of food beneficial to the body and the required quantities that improve health and protect against disease. This is achieved by developing learners' nutritional health awareness through introducing the importance of food, the recommended daily nutritional intake for an individual, and the risks associated with both excessive and insufficient food consumption. Fresh and seasonal fruits and vegetables should also be consumed, and products treated with fertilisers and chemicals that increase their size and quantity should be avoided, as these products may cause serious illnesses.

4.6. Sports health awareness:

Focusing on the sport aspect enables individuals to acquire fitness, which contributes to the development of



their mental, physical, psychological, and social character.¹ By scientific principles and proper steps for exercising correctly. Practising sports is considered a healthy lifestyle, promoting proper breathing, relieving stress, making beneficial use of leisure time, and renewing energy to enhance readiness for learning while avoiding lethargy and inactivity by making methodical use of physical education classes.

4.7. Environmental health awareness:

Environmental health awareness is an approach aimed at creating individuals imbued with a culture of environmental preservation. This involves learning how to improve the relationship between humans and their environment by utilising technological advancements to serve the environment, avoid risks, and make rational environmental decisions, which are reflected in protecting and maintaining the environment to ensure healthy living in a clean environment.

4.8. Preventive health awareness:

This means avoiding harm and risks before they occur by providing learners with information, health concepts, appropriate attitudes towards specific health issues, and thinking skills. (Saud Al-Ratib, 2003, p. 214) In this way, individuals are equipped with knowledge that can be used to protect themselves from diseases and health problems. This encourages individuals to be mindful of daily

¹ Abdul Nasser Al-Qaddumi, “The Level of Nutritional Awareness among Physical Education Students at An-Najah National University and Sultan Qaboos University,” <http://blogs.najah.edu/staff/abdel-naser-qadoumi/article/article-38>, accessed 15 November 2023 at 17:15.

behaviours, such as washing their hands before and after eating to prevent germs, sitting properly to avoid digestive problems, drinking sufficient water to prevent colon diseases and constipation, and maintaining physical fitness through exercise while avoiding strenuous activities to prevent exhaustion. Moreover, attention should be given to keeping one's surroundings and recreational areas clean. Understanding the relationship between the individual and their environment enables one to influence their living environment, whether positively or negatively. (Ahmed Aroua, 1983, p. 30)

5. Results of the Field Study

Table (01): Distribution of Respondents (Teachers) by Years of Professional Experience

Percentage	Frequency	Years
5.71%	4	[1-3]
11.42%	8	[4-6]
20%	14	[7-9]
27.14%	19	[10-12]
35.73%	25	More than 12 years
100%	70	Total

The table shows the distribution of respondents (teachers) according to their years of professional experience. The number of respondents with [1-3] years of experience is 4 out of 70, which is the lowest percentage at 5.71%. Those with [4-6] years of experience numbered 8 out of 70 (11.42%). The number of respondents with [7-9] years of experience was 14 out of 70 (20%). Teachers with [10-12] years of experience constituted 19 out of 70 (27.14%) of the



sample. The highest proportion is teachers with more than 12 years of experience, at 25 out of 70 (35.73%).

From this, we conclude that most of the sample comprises teachers with extensive experience. This enables us to obtain reliable responses from individuals who have practised the teaching profession, experienced various circumstances, and dealt with learners at different cognitive, intellectual, and physical stages across a range of assigned levels.

Table (02): Fields in School Health Education as Perceived by Respondents (Teachers)

Percentage	Frequency	Response
28.57%	20	Personal hygiene
35.71%	25	Healthy nutrition
10%	7	Regulating sleep and play schedules
17.14%	12	Physical activity
8.58%	6	Disease prevention
100%	70	Total

The table shows the fields addressed in school health education from the perspective of the respondents (teachers). The number of respondents who identified personal hygiene was 20 out of 70, representing 28.57% of all respondents. Those who selected healthy nutrition numbered 25 out of 70, or 35.71%. Twelve respondents (17.14%) identified physical activity, whereas five respondents (8.58%) chose disease prevention.

On the basis of these findings, we conclude that most of the respondents (teachers) agree that the primary areas of school health education are personal hygiene and healthy nutrition. The latter is recognised and practised daily, as

pupils attend the school cafeteria under educational supervision, where they learn proper eating habits and the importance of nutrition. Before entering the canteen, the pupils wash their hands and practice turn-taking. The low proportion of responses regarding physical activity is attributed to the limited time allocated for it, usually only once a week for 60 minutes (full-time schedule) or 45 minutes (part-time schedule), which is insufficient for acquiring all the skills related to the importance and methods of practising sport. The low percentage of responses concerning disease prevention is due to the respondents' limited knowledge and experience regarding diseases and their prevention, which can be traced back to the infrequency of health team visits for teacher awareness and the lack of presentations about learner health and related risks. Health team visits are generally limited to pupil examinations, without informing teachers about their nature or importance. Thus, teachers' knowledge about diseases, their transmission, and prevention is primarily based on personal initiative.

Table (03): Competencies Acquired by Learners that Promote Their Health Awareness from the Perspective of the Respondents (Teachers)

Percentage	Frequency	Response
38.57%	27	Acquiring competencies and sound health habits
11.42%	8	Exchanging ideas and good habits among learners
14.25%	10	Becoming acquainted with public facilities responsible for learners' health care



35.76%	25	Learning certain concepts about health and prevention
100%	70	Total

The table shows the competencies acquired by learners that promote their health awareness from the perspective of the respondents (teachers). The number of respondents who indicated “acquiring competencies and sound health habits” was 27 out of 70 (38.57%). Those who selected “exchanging ideas and good habits among learners” totaled 8 out of 70 (11.42%). Ten respondents (14.25%) chose “becoming acquainted with public facilities responsible for learners’ health care”, whereas 25 respondents (35.76%) indicated “learning certain concepts about health and prevention”.

On the basis of these findings, we conclude that most respondents agree that school health education equips learners with competencies related to health care and prevention through the practice of sound behaviours and habits. Learners are also introduced to public facilities responsible for their health care through lessons provided in the civic education curriculum and through certain school visits to these facilities.

General conclusions:

Most of the respondents (teachers) agreed that the primary areas of school health education are personal hygiene and healthy nutrition. The latter is both recognised and practised daily, as pupils attend the school canteen under educational supervision, where they learn the etiquette of healthy eating and the importance of nutrition. Before going to the canteen, the pupils wash their hands and practice turn-taking. The low percentage of responses

regarding physical activity is attributed to the limited time allocated to it, only once a week, for 60 minutes for full-time schedules and 45 minutes for part-time schedules, which is insufficient for acquiring all the competencies related to the importance and methods of practising sport. The low percentage of responses regarding disease prevention is due to the respondents' limited knowledge and experience concerning diseases, their types, and methods of prevention. This can be attributed to the infrequency of health team visits aimed at raising teachers' awareness, as well as the absence of presentations on learner health and related issues. Health team visits are generally limited to conducting examinations on learners, without informing teachers about the nature or importance of these visits. Thus, teachers' knowledge of diseases, their transmission, and prevention is based mainly on personal initiative.

Most respondents also agreed that school health education equips learners with competencies in health care and prevention through the practice of sound behaviours and habits. Learners also become acquainted with public facilities responsible for their health care through lessons provided in the civic education curriculum and through certain school visits to these facilities.

Conclusion:

The existence of effective school health education is among the objectives of education and an essential component in shaping the learner's personality in all intellectual, cognitive, and physical aspects. As an institutional and national project, school health education



promotes health awareness among learners by equipping them with competencies and healthy behaviours that enable them to care for themselves in terms of personal hygiene, healthy eating habits, participation in physical activity, contributing to a clean environment, recognising infectious diseases and preventing them, and learning basic first aid. School health education also fosters the exchange and dissemination of ideas within the school environment, serving the health of the individual. Accordingly, school health education functions to educate and familiarise individuals with the field of health by developing sound health principles and values through the promotion of health awareness, which is the essence of health education.

Sources and References

Books in Arabic:

1. Al-Ratib, Saud. *Al-Insan wa al-Bi'ah* [Man and the Environment]. Amman: Dar Al-Hamed for Publishing and Distribution, 2003.
2. Al-Ansari, Samia Lotfi, and Hassan, Ahlam Mahmoud. *Al-Sihha al-Nafsiyya wa 'Ilm al-Nafs al-Ijtima'i wa al-Tarbiyya al-Sihhiyya* [Mental Health, Social Psychology, and Health Education]. Cairo: Alexandria Book Centre, 2007.
3. Zaki, Ali Muhammad. *Al-Tarbiyya al-Sihhiyya bayn al-Nazariyya wa al-Tatbiq* [Health Education: Theory and Practice]. Kuwait: That Salasil Publications, 1983.
4. Salama, Baha' al-Din Ibrahim. *Al-Jawanib al-Sihhiyya fi al-Tarbiyya al-Riyadiyya* [Health Aspects in Physical Education]. Cairo: Dar Al-Fikr Al-Arabi, 2001.

5. Salama, Baha' al-Din Ibrahim. *Al-Sihha wa al-Tarbiyya al-Sihhiyya* [Health and Health Education]. Cairo: Dar Al-Fikr Al-Arabi, 2001.
6. Obaidat, et al. *Manhajiyyat al-Bahth al-'Ilmi: Al-Qawa'id wa al-Marahil wa al-Tatbiqat* [Methodology of Scientific Research: Principles, Stages, and Applications]. Amman: Dar Wael for Printing and Publishing, 1999.
7. Ayad, Ahmed. *Madkhal li Manhajiyyat al-Bahth al-Ijtima'i* [Introduction to the Methodology of Social Research]. Algiers: Diwan Al-Matbou'at Al-Jami'iyya, 2009.
8. Mahmoud, Ibrahim Wajih, et al. *Al-Sihha al-Madrasiyya wa al-Nafsiyya li al-Tifl* [School and Mental Health of the Child]. Cairo: Alexandria Book Centre, 2000.
9. Miftah, Abdelaziz. *Muqaddima fi 'Ilm Nafs Sihhi* [Introduction to Health Psychology]. 1st ed. Amman: Dar Wael for Publishing, 2010.
10. Kamash, Youssef. *Al-Sihha wa al-Tarbiyya al-Sihhiyya* [Health and Health Education]. Amman, Jordan: Dar Al-Khaleej, 2009.

Books in French:

1. Ahmed Aroua. *Santé et environnement*. Alger: Entreprise Nationale du Livre (E.N.A.L.), 1983.
2. Raimond Boudon et autres. *Dictionnaire de sociologie*. Paris: La Rousse, 2005.

Journals:

1. Al-Rashid, Jamil. "Al-Tarbiyya al-Sihhiyya al-Madrasiyya" [School Health Education]. *Scientific Journal of Physical and Sports Education*, 2004.



2. Al-Jarjawi, Ziyad, and Aghad, Muhammad. "Waqi' Tatbiq al-Tarbiyya al-Sihhiyya fi Madaris al-Ta'lim al-Hukumi bi Madinat Ghazza" [The Reality of Implementing Health Education in Public Schools in Gaza City]. *Al-Azhar University Journal - Human Sciences Series*, Gaza, 2011.

Websites:

1. Al-Shalhoob, Abdul Malik. "Dawr al-I'lam fi Tahqiq al-Wa'y al-Sihhi" [The Role of Media in Achieving Health Awareness].
<http://skinandallergy.org/wp>
2. Al-Qaddumi, Abdul Nasser. "Mustawa al-Wa'y al-Ghidha'i lada Talabat Takhasus al-Tarbiyya al-Riyadiyya fi al-Najah al-Wataniyya wa Jami'at Sultan Qaboos" [The Level of Nutritional Awareness among Physical Education Students at An-Najah National University and Sultan Qaboos University].
<http://blogs.najah.edu/staff/abdel-naser-qadoumi/article/article-38>