Parents in Front School-their Needs for Better Health Conditions for their Children

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Abstract *arents and the school are the main two groups which are the most interested, who think and work for the best of the children. All of them want the children to be successful at school. Working together they can help the children to have good results at school, but on the other hand the parents are not only interested for the educational part, but they tend to be interested even for their health. They want to have optimal conditions of work not only at home, but at school too. They want comfortable conditions for them, to have in their daily activities in and out of school. It is well known that the children spend the most of their time at school where they are exposed to different factors which effects directly and indirectly on their health. Heating, lighting, the right sitting position on the desk, the hygiene and safety in school and around it, the exposition of dangerous and unhealthy food, physical and emotional violence are some of the problems that effect directly to the health, psychomotor development of the children and also to the learning process. In this study we have used a questionnaire for the parents of the children to identify the needs and the information they have about the environment where their children are being educated. The analyze of it is done with Microsoft Office Excel method. he aim of this article is to identify the real situation and to give some recommendations to improve and to change their children's life style of living and working, because they effect directly at the school future, on the educational process and also on reducing on morbidity.*

Key words: *children, health, optimal conditions, safety, school*

1. Introduction

Nowadays, parents are more and more interested about the physical, psychological and social development of their children. They are also interested on their progress at school and they do not see the school only as a place where others, (teachers, headmasters and staff) to try the best for the children. The parents try to see the school not only in the educational point of view, but also as a place where their children can find help, support, care and protection, a place where they can learn not about the lessons and at the same time about their life. They want a long life learning and preparing their children to be able to their own lives. Parents are becoming very important stakeholders for the schools, by aiming to raise the objectives for a better quality of schools not only in the educational point of view, but also of better conditions, safer places, health care, good feeding, different activities and bigger possibilities for them. Recently, the school is also seen as a place where children will be part of different activities (sport, art, science, acting etc.) not only to see them as part of these activities, but also to construct their identity, their personality, their healthy life and hygienic conditions, lightening, the desks etc. So parents tend to be aware of health care, because it can affect the morbidity in the future life of their children as scoliosis, accidents, hearing problems, infection respiratory diseases, gastrointestinal infections, overweight, obesity, poor verbal communication and mental health problems. The road accidents are the main cause of mortality 5-14 year of children old in the low economics incomes countries of European region. Noise pollution effects on human health are a matter of great concern. Noise pollution can affect us in several vital organs. Noise can interrupt a good night's sleep, and when this occurs, the person feels extremely annoyed and uncomfortable. This can considerably decrease a person's ability to work efficiently. The air quality is connected with transport car, combustion of solid wastes and emission in environment air pollutants as: oxides of sulphur, nitrogen oxides, mono and carbon dioxide, hydrocarbons, lead, soot, dust and cancerous substances which are the main factors increasing the cases of respiratory infection. Obesity is one type of malnutrition and considered as an important risk of factor for the several chronic diseases such as cardiovascular and diabetes. Obesity is an important cause of morbidity, disability and premature death (WHO, 2004). These related to child factors, family dynamics, parenting, knowledge and beliefs, extra-familiar influences and resources and environment. (Ostrowska. L, et al. 2009. pg. 389-396).

2. Methodology

For this study is done a questionnaire with 154 parents of children who attend the public and non-public schools in the city of Shkodra (100 parents whose children attend public schools and 54 the non-public schools). These parents have given their opinions about the school conditions and they also have expressed their suggestions to improve these conditions. The aim of this questionnaire is to present the needs and the requirements of the parents for the public and non-public schools and to the Albanian system of education. The parents are selected occasionally. They have different ages, level of education and also their children follow different systems of education. All the data are analyzed by *Microsoft Office Excel method.*

3. Results of the study

The results of this study are presented graphically. The parents answered and gave their opinion about the school (public and non-public) conditions and their effects on their children in Shkodra city. The parents in this study were selected casually only trying to have a right proportion between public and non-public. For that reason we have chosen 4 public schools and 4 non-public schools in Shkodra city, from whom 2 are colleges (from class 1 to 9) and 2 high schools for each system of education. The parents who fulfilled the questionnaire were in the highest number from 30-40 years old, followed by 40-50 and the lowest number was 20-30 and over 50 years old. The parents were from both the city and the country (42% of the public schools and 19% from the non-public schools). That shows the interest of the parents to choose the best possibility they can effort. Females are in a higher number to be part of this study (82% of publics and 78% of the non-publics) which means that mothers are more involved in children school system.
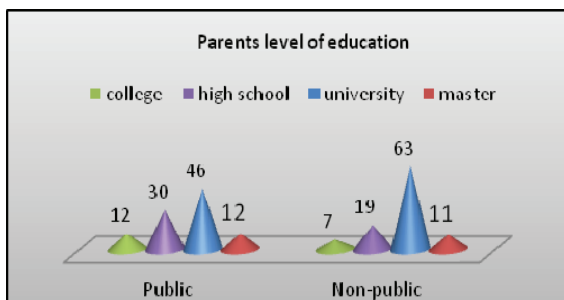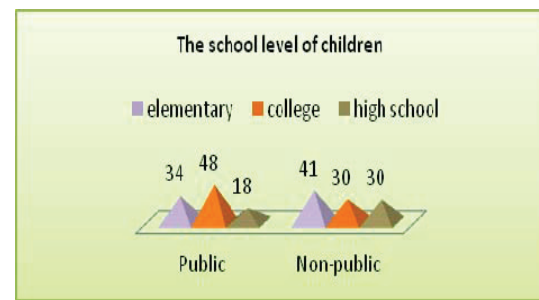

Figure 1

Figure 2

In this study, the parents selected have different levels of education from college to Master, the highest number of them is with a university degree. (Fig. 1.). Parental education is the most used indicator of associations with socioeconomic status, followed by occupation, income and area of residence. (Cattaneo, A, et al 2009, pg. 389–398). According to the level of education the children follow, they come from the elementary school to high school. The reason of this division was to compare all the levels, the presence of differences between levels and systems. As we can see through the graphics, the highest number of the children is from the college, followed by the elementary and the high school pupils. (Fig.2.)
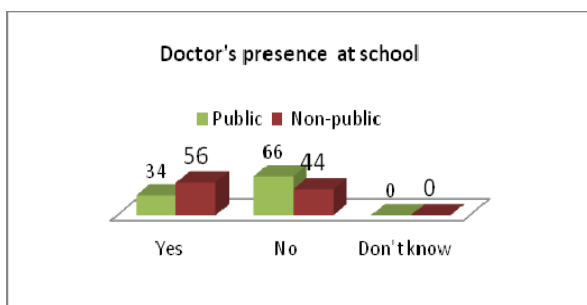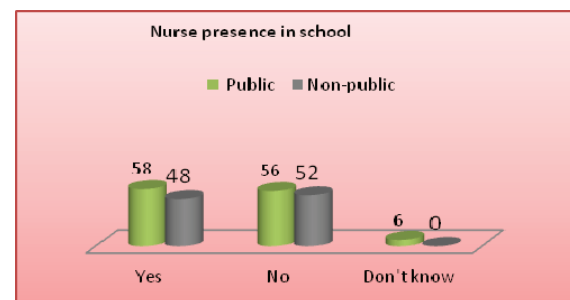

Figure 3

Figure 4

According to the presence of doctor in schools is shown that in the highest percentage the doctor is not part of the schools. (fig.3.). This is more evident in public schools than in non publics. In some non-public schools the doctot has necessary role meanwhile in public schools is only a nurse, whose role is neither evident,nor necessary. (fig.4.)
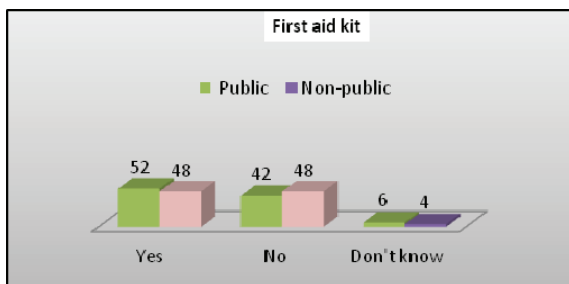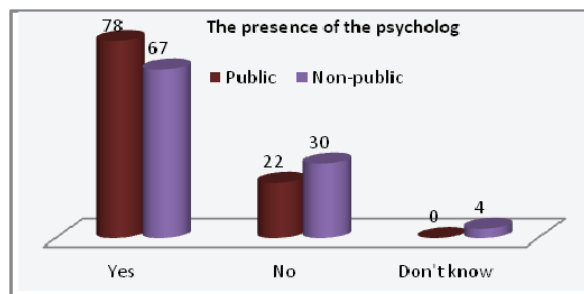
Figure 5

Figure 6

The first aid kit in the classrooms or in the school, is necessary to be present. Only, 10 % of the parents don't know or don't have information about it. (Fig.5.). On the other hand, about the presence of the psychologs in schools here we can see that both systems have the information about the psycholog, 78% for the publics and 67% for the non-publics, low is the number of the the non presence and only 45 of the parents who have their children in non–public schools don't know about this presence in these schools. (Fig. 6).
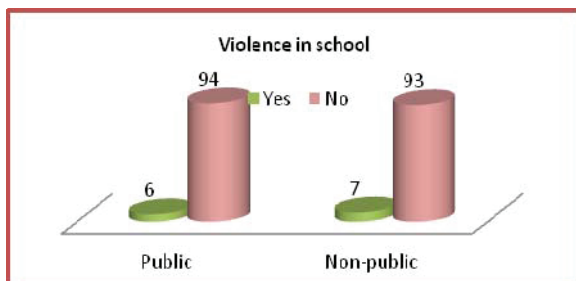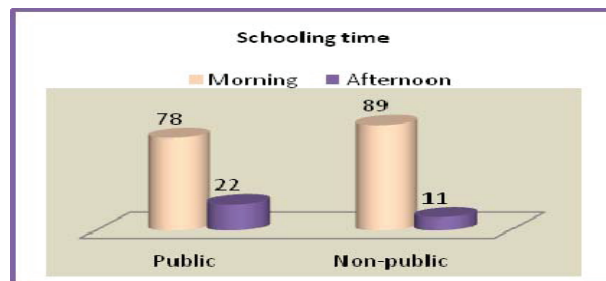

Figure 7

Figure 8

In general only 13% of the parents (public and non-public schools), admit the presence of the violence in schools. (Fig. 7). They admit that this violence shows rarely and that they don't see violence among their children, but in reality they are afraid or sometimes they don't know the different forms of violence except the physical one. But according to the information given in official ways and on Tv still are used forms of violence among the students in schools. So we can say that the parents are not informed or they don't want to accept it. On the graphic about their children schooling time, in the highest percentage they said that the studying period in schools isbefore noon and the lower percentage is in the afternoon. But as we can see, some non public schools last the studying time till afternoon and about this the parents are concerned because their children are exhausted and have lots of oark at home too. (Fig.8.). The same problem is seen in the public schools, where because of the big number of pupils, some elementary classroom levels have their lessons in the afternoon. The children have a different time of preparation and of learning that is not good enough for them and their parents.
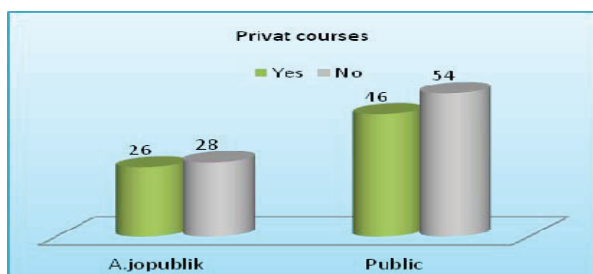

Figure 9

About the privat courses the children have after school, we see that in 72 % of both systems of education (26% non public and 46% public) they are part of the privat courses, that means that the schools don't offer the right level of teaching and the expectations they want from schools independently form the kind of system they follow. (Fig. 9.). As they agree, the most neccesary and important privat courses are: foreign languages (english, german), maths, chemistry,

arts (instruments as guitar or piano), painting and sports (basketball or football). These kind of courses take their free time. The children are passive, wait only these courses,but in general they are in the function of the basic subjects in school and not an enterteinment, a creative or a movemental time. As a result we can say that our system of education, independently public or non-public, it has gaps about what the parents wait from them in all the fields .
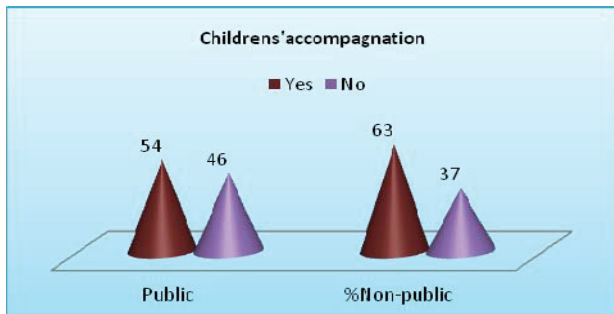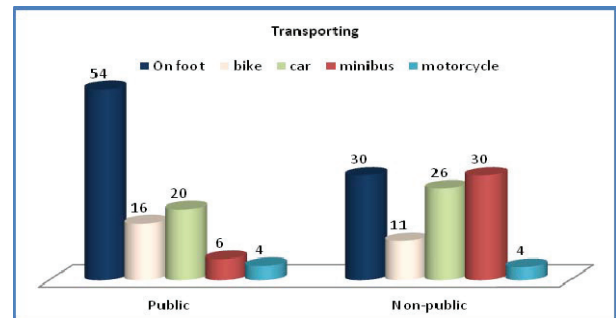

Figure 10

Figure 11

About the accompagnement of the children, the parents accept in the highest number that they are not sure about the safety on the streets and so they try to find ways to be safe. For that reason, according to the economical possibilities they have, they use different forms to accompaign their children at school. (Fig. 10.). As we can see from the figure 11, the highest number go on foot (accompaigned or alone), followed by them who goes by car which in general are personals and this is seen in the public and in the non-public scools, then we have children who go on school in a mini bus (6% in publics and 30% in non publics). This kind of transportation is provided by the parent themselves privately (for the public schools) or by the schools themselves (in non-public schools) also are students who go on a motorcycle or by bikes. It is important to underline that the parents try to accompaign the children to school, because of stradal safety and also to evitate the absences at school. Going to school on foot is considered as a positive aspect, such a physical activity for the children, and on the other side the transport of children by bike or by car is considered as a risk factor for accidents.
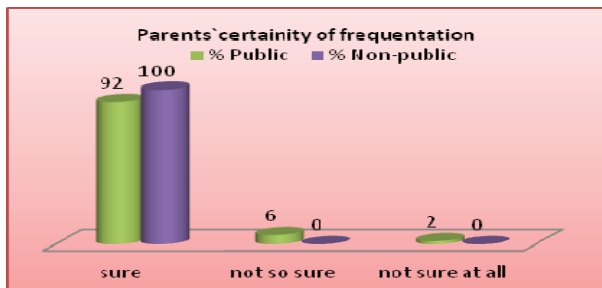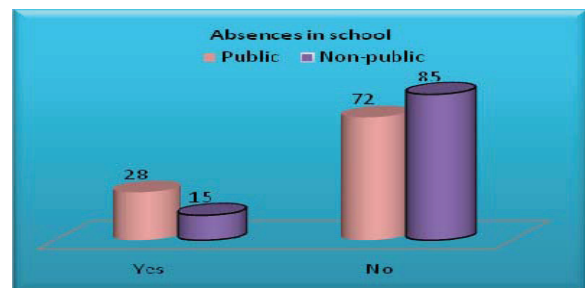

Figure 12

Figure 13

About the certainty of parents about their children's frequentation, they are sure in 100% of them in non-public schools, because the presence of their children in school is under control by the acccompaignment by their parents or teachers, because of the time of being in school and the communication with school by the parents or the school about the absences, if they are. (Fig. 12). But on the other hand we have the parents whosethe children attend public schools, which eventhought they accept only in 6% they are not sure and in only 2% that they are not sure at all and these numbers shown maybe a part of their problem, because they don't have enough time to control their children. Also they don't have frequent contacts with school or teachers and no one can say the reality about their children that's because they don't have the time and the possibility to contact and to have information about their children. About the absences in school, the parents admit that 28% of their children who attend the studies in public schools miss at school for healthth problems and only 15 % of non-public schools children, miss for the same problem. (Fig. 13.). As we can see, the parents accept that in general their children are not absent in schools, but about the absences they say that frequently the bad conditions especially in winter such as no heating of wet classrooms that effect in children's health and in their absences, but on the other hand the frecuent absences have dangerous behaviors behind. Cultural and societal norms frame acceptable standards for substance use as alcoholic drinks, smoking or other drugs, especially during adolescence which causes on psychopathology and influence on normal functioning. (Jenkins, R et al. 2003, pg. 654-662).
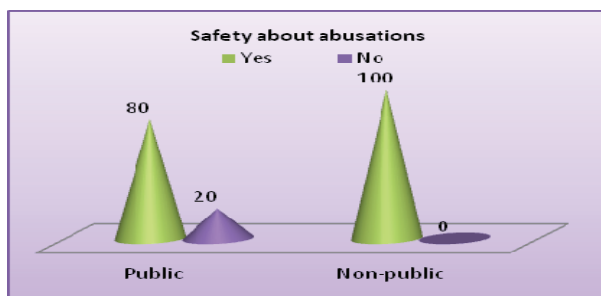
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Figure 14

About the violence used at school on their children, the parents in non-public schools are 100% sure about the absence of the violence in front of their children. (Fig.14.). On the other hand we have the public schools, on which of them we have 20% cases which say that they accept the presence of violence, but according to them this is rare among their children. But we can say that in general, the parents don't know the different forms of violation, they in general are known only with the physical violence as the only form of violence. The children are very sensible to violence. Beyond injuries, violence affects children psychologically and behaviourally; it may influence how they view the world and their place in it. Children can come to see the world as a dangerous and unpredictable place. This fear may thwart their exploration of the environment, which is essential to learning in childhood. Furthermore, high exposure to violence in children correlates with poorer performances in school, symptoms of anxiety and depression, and lower self-esteem. The early identification of physical, psychological or sexual abuse with children is very difficult to investigated but have serious and long consequences in their life. (Augustyn M. et al. 2003. pg. 121-122).
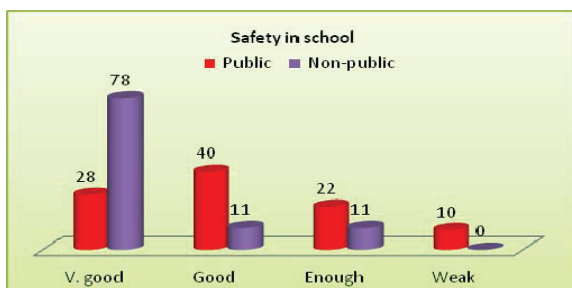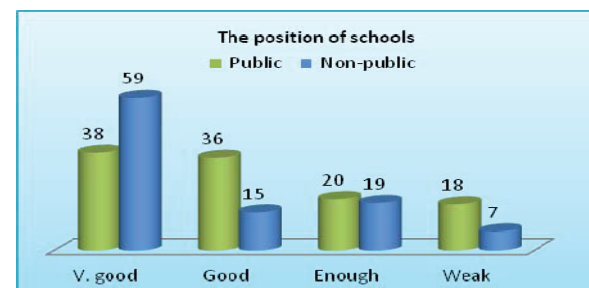

Figure 15

Figure 16

About the safety of school we can say that effects also the position of school from the road, the presence of school entourage, the presence of a guardian for the safety in the school, the air and noise pollution around the school. The parents who have their children in non-public schools admit that their children in 78% are in very good conditions of safety at school and only 28% in public schools, 40% say that the conditions are good in public schools and only 11% in non-public, it is enough in 22% in public schools and 11% the non-publics and only 10% of the parents in public schools see it weak. (Fig.15). As we can see, the parents generally are comfortable with the safety in school, but we have also complains from them, because in some cases they say that the school entourage is not safe or the distances from the car way   is too small, the guardians don't do their work and they think that because of this, their children can leave school or can be part of accidents (Fig.16). The trauma may have physicals and psychological consequences for a long time at the children and with the serious consequences for their health in the future. Injuries are the most common cause of death during childhood and adolescence in different countries. (Rivara, F. et. Al. 2003. pg. 257-258).).The exposure to loud sound can lead to elevated stress levels as well as stimulate violent behaviour, can interrupt a good night's sleep, at children. A constant noise in the vicinity of school can also trigger headaches, make children tense and anxious, and disturb emotional balance. The air quality in classroom and around the school must be controlled because the emission in environment of air pollutants as: mono and carbon dioxide are the main factors increasing the cases of respiratory infection.
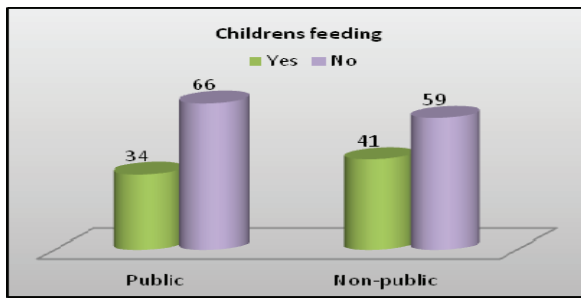
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Figure 17

Figure 18

We know that the children in schools have short breaks in public schools and long breaks or also lunch time in non-public schools. About the feeding, in 34% of children in public schools and 41% of children in non-public schools get some food prepared at home for them and the highest number (66% in public and 59% in non-public) who buy it. (Fig. 17,18.). In general they buy hamburgers, chocolates, chips and other thing which are not a real food for their age and the period of physical changes. Health and welfare of children's` are closely related with the feeding and with healthy life style. Preference for certain foods, children disliking new foods and being 'picky eaters' considered barriers to healthy eating. Some parents relied on 'fast foods' because they were concerned that their children would eat nothing else. Is very important to should start early in a child's life the strategies to promote healthy weight and to prevent childhood overweight and obesity. (Pocock. M, et al 2009. pg. 338-353). By the other hand the quality of hygienic condition of these foods is suspicious and the children are exposed to alimentation intoxication.
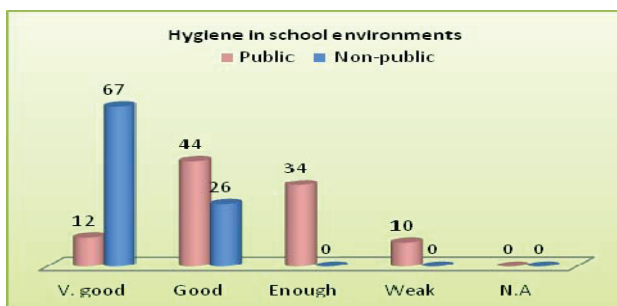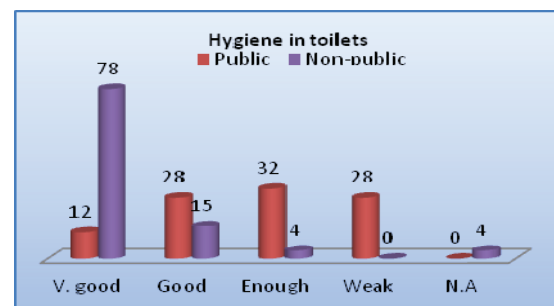

Figure 19

Figure 20

On the graphic about the hygiene in school environments we see that the non –public schools offer higher level of hygiene in their environments. Referring to the dates, we can say that for the non-public schools, the level of hygiene is in 67% very good and for 26% is good, but we see that this problem is higher in the public schools, they admit that in only 12% it is good, 44% is good and 34% is enough good and in 10% it is weak, so comparing the quality between two systems about the hygiene is different. (Fig. 19) We can say that the parents admit bad conditions in and around the school environments: classrooms, halls, yard, gym etc. The same problem we see also about the hygiene in toilets, the parents say that the conditions in 12% in public schools and 78% of non-public schools are very good, 28% in public and 15% in non-public says that these conditions are good, 32% in public and 4% in non-public are enough pleased with the toilets and 28 % in public schools admit that the conditions are weak according to their opinion. But we see that 4% of the parents don't know about the conditions in toilets. (Fig.20). The parents says that in the toilets is only cold water or no soap and nothing to dry the hand also they small bad fragrances in the classrooms near the toilets that make them to feel not comfortable and safe. In 22% of the schools (non-publics) , the hygienic kitchen conditions are very good and for only 7% it is good. They says that their children have almost the same menu and the food is not good in quality and quantity for their children. This is an other child`s growth problem because may cause the malnutrition and can help to influence in the acute or chronic diseases.
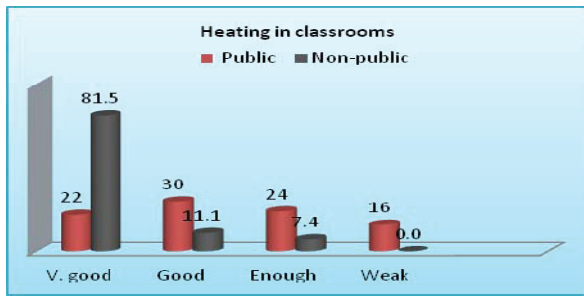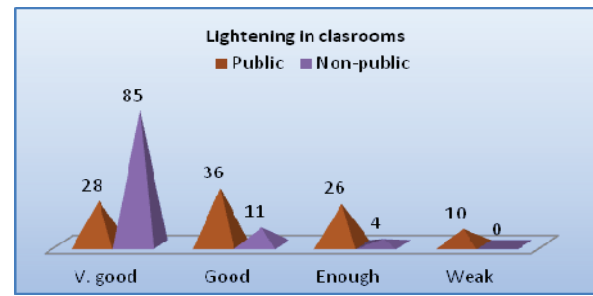
Figure 21

Figure 22

On the graphics, we can see that the heating system is very good in the non-public schools (81,5%) and only in 22% in public schools. It raises in the public schools in 30% it is good and 11.1% in non-publics, followed by 24% not so good in the public and 7.4% in non-publics and in only 16% weak in publics. About heating generly the parents of non-public schools are pleased with the heating systemin their children schools. (Fig. 21). They admit that they have central heating which is good for their children, but the part of them which complain about heating said that the heating is generaly by gas which can cause problems in their children health, such as: headache, cough, watering, breath problems or intoxication by gas. The air quality is connected emission in environment air pollutants as: mono and carbon dioxide which are the main factors increasing the cases of respiratory diseases. (Landrigan, Ph. et al. 2003, pg. 2354-2355.) In a low percentage they say that their children use wood or electricity and the 16% said about the absence of heating in the classrooms. (Fig 21). They say that the children sometimes have different health problems also from the cold and no heating in school. Some times, especially in low temperature they prohibite their children to go to school, because of the cold, flu etc they can have from these bad conditions.About the lightening condition in clasroom the parent says that is very good in the non-public school and for the public school are different opinions. As we can show in the figure 27, 85% of parents are expressed very good for non-public school and for the public school almost at the same percentual for all answers .
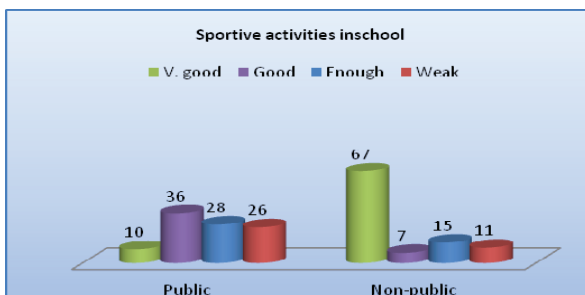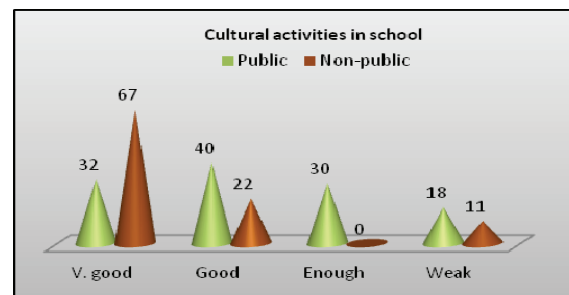

Figure23

Figure 24

Parents are not concerned only about the physical conditions of the school or classroom, but they are also interested about the quality of teaching and the other activities, which influence the qulity of life of their children. So the sportive activities in school are better in the non-public schools than the public ones. As we can see on the graphs, the quality and the frequency is higher in the non-public schools. (Fig. 23). They are evaluated 67% in non-publics and 10% in public schools, good in 36% in publics and 7% in non-publics; 28% enough in publics and 15% in non-publisc and only 26% weak in publics and 11% in non-publics. As we can understand we see that the parents are concerned and evaluate also the presence of sportif activities. As we know the sportif activities helt in a better physical health, fight overwheight but also they are good to know differently each other out of the classroom but it is also to raise friendship and to collaborate between them. But on the other hand we have the cultural activities, such as concerts, theatre, show, etc. which influence differently in children's education. These kinds of activities can make the children to find other parts of them which can influence the self esteem in some children or can find undiscovered parts of the child or can influence on making new friendship knowing each other and themselves too. (Fig. 24) On the graphics we can see that the parents are pleased to have their children in non-public schools where these activities are in 67% very good and only 32 % in public schools, followed by 40% in non-publics and 22 % in publics - good; 30% enough in publics and 18% in publics and 11 % in non-publics which are weak. As we can evaluate from the graphs, we can say that the non-public schools insist on producing also cultural activities for their pupil, the parents said that these activities vary according to the age, the schools or

teachers. In some cases they are not very pleased about these activities, because they see always the same pupils part of the shows or concerts and they are disappointed of the negligence or ignorance of the abilities of their children, they also complain of the variety of the activities, the places or the quality of them or in some case even the total absence of them, giving importance only to the lessons.
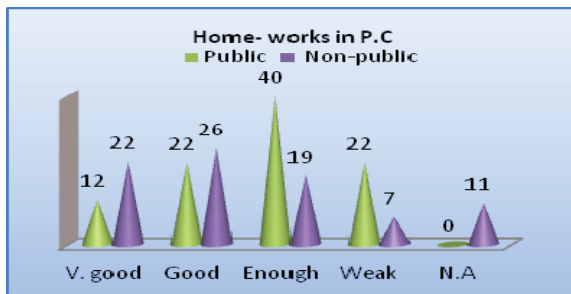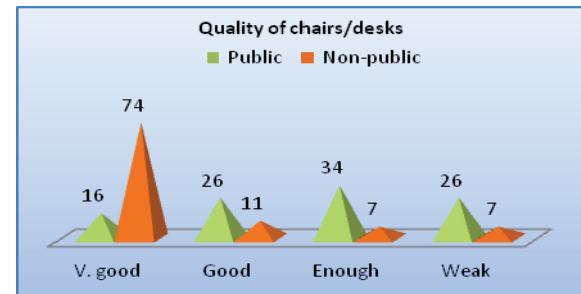

Figure 25

Figure 26

Last but not least in this study is also the kind of the home-works in computer. As we can see, (Fig. 25) the parents don't appreciate enough these kind of homeworks. Seen this in the health plain, these kind of homeworks take a long time to the children influencing the sight, because of the long time in front of the PC, problems in the backbone as scoliosis, backache, headache, eye problems, overweight etc Also we can see that these kind of homework don't have a long term to be prepared, are not creative and take a long time for searches. The children become passive and are not able to create or to be active, they just get the information and don't think over about it, to learn and to use this information. By the other hand, to spent long time in PC influence in the pasivity and for sedentary life of children and may be considered as a barrier to physical activity. The parents are also concerned about the quality of chairs and desks in their children classrooms (Fig. 26). As we can understand from the graphs, in non-public schools the parents says that they are in 74% very good comparing with the 16% of the public ones; 26% good in publics with 11% of the non-publics, followed by enough good in 34% in publics and 7% in non-publics and 26% weak in publics and 7% in non-publics, we can see the quality is not as the parents wished to be. They are concerned, because in some cases they admit that their children don't have a place where to put the bags so they put them behind and as a result they are not comfortable, they don't have enough space to work, so they complain about backache, sometimes scoliosis or neck ache. Standing discomfort for a long time in these chairs and desks can also affect the chest cage deformations and can cause chest and respiratory diseases during childhood and adolescence. As we can see the parents highlight lots of problems which affect them and their children too.

4. Conclusions

During the years the health care toward the children has changed, giving a priority to protection health care during school ages. This policy should be familiar to the community in order to make it effective at home or at school.
On the other hand the parents are raising their expectations toward school. They are being more focused on the physical conditions as to the educational level. So they are being more conscious about improving studying conditions and being more and more seekers toward school, for better and qualitative schooling time. They are conscious about the new lifestyle, the challenges they will face, because their children will live in different conditions and they want the best for them. So, the parents want to be learnt from schools and other groups to face and to avoid the future problems .They want to know about the others experiences and to learn how to avoid unpleasant problems with / of their children. For that we recommend:

- Traumas and injuries at children's may prevent. For the prevention of the road accidents should be promoted the health policies such as using helmets for bicycles, seat belt, resistant packaging and safe storage of foods to children to prevent poisons, playgrounds with large areas, windows and chairs appropriate to prevent falls in children, smoke detector to prevent intoxication, pedestrian skills training, water skills training, seatbelts in mini vans, bicycle helmets. (Rivara, F. et. Al. 2003. pg. 257-258). All these should be done by school programmes.
- Violence is often an evitable part of human life, but violence can be predicted and is a preventive health problem. There are strategies for intervention at the individual level, preschool education programs, training of parents by school and community intervention.
- Childhood obesity has adverse psychological, social and health consequences in childhood and later in life.

(Cattaneo, A, et al 2009 , pg. 389–398.). Trying to make their children's life more lively and more creative, collaborating with school, social worker, doctors, P.E trainers and other partners included to improve health life

- Better hygienic condition at school environments such as: classrooms, halls, yard, gym, kitchens, toilets, amelioration of heating systems and air quality will directly affect the welfare of children, their health and in the educational process. All these measures appear to be fast efficient to prevent and to reduce the morbidity and to promote a healthy life of our children, all with the help of school through special programs or through law.
- The challenge to the community and society is to create norms that decrease the likelihood of adverse health outcomes for adolescents and promote and facilitate opportunities for adolescents to choose healthier and safer options for experimentation.
- Changes in the policy toward children education in and out of school to have a safe and protected life and conditions in and out of school to prevent unpredictable disliked situations for their children.

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