



The Current Situation of School Health in China

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Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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ABSTRACT

China is socialist country, has the largest population in the world and the largest number of children in the world. As a socialist country, China has made many contributions to children's health care, especially children's school health, since liberation, great changes have taken place, and the government has invested a lot! This article reviews the government's investment, work and achievements in school health since China's liberation. The above all lead to physical health problems of a variety of reasons, on the whole, a society that during the rapid development and changing, some of the reasons is the inevitable. Outcome of the modern can't deserve it, such as living environment, transportation, family structure, such as cannot be restored to its previous state, but there are many reasons can be through the efforts of the society and human oneself to control or eliminate, such as unreasonable diet, unhealthy habits overweight study pressure, improper physical education, etc. In fact, of course, closely rely on the educational intervention is not enough, because the cause of adolescent physical health problems, its formation is a complex social background, has a long history, has a profound historical and cultural origins, some concomitant with the modernization, is facing the rapid advance of modernization, the entire Chinese society off guard, don't have enough ideas and material preparation. Therefore, to solve the current adolescent health problems is a long-term and difficult, we must mobilize the whole society to work together as a systematic project.

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1. INTRODUCTION

1.1 Importance of School Health Promotion and Recent Situation

Health promotion involves combinations of educational, political, and organizational supports for behavior and environmental changes that are conducive to health [1]. The smooth development of school hygiene and health work is an important key to promote the healthy growth of teenagers. Childhood is the most essential to the growth and development age, not only their health level relationship between individual healthy growth and happy life, but also the relationship between the future health of the whole nation's health service quality [2]. In the year 2019, the National Education Conference proposed the educational concept of "health first", which pointed out the direction of school hygiene and health education in the new era. National school hygiene and health education is an integral part of Chinese public health policy, and it is also an area that cannot be ignored. This paper aimed at the current situation of Chinese school health and the health promotion of school health that happened in China.

1. Demographic characteristics

According to the National Bureau of Statistics released data show that at the end of 2019, China population (including 31 provinces, autonomous regions, and municipalities directly under the central government and the Chinese people's liberation army (PLA) soldiers on active service, not including Hong Kong, Macao special administrative region and Taiwan as well as the number of overseas Chinese), 1.40005 billion, an increase of 4.67 million people, 2018 was born a population of 15.23 million people; 9.93 million deaths; The natural population growth rate is 3.81‰. In terms of age structure, the total population of the Chinese mainland in 2018 between the ages of 0 and 15 years old (including those under 16 years old) is 248.6 million, accounting for 17.8% of the total population [3,4]. The youth population also accounts for an important proportion in the total population, basically accounting for 30 ~ 40%. Among all the countries in the world, China has the largest youth population group. In 1982, the number of young people in China had exceeded 400 million, and then increased year by year, soared to 474 million in 1990, and reached 491

million in 2000, then decreased year by year, and decreased to 438 million in 2005. It can be seen that the youth population plays a decisive role in the country's economic and social development [5].

Beginning in 1985, China conducted a national youth physical health survey, according to the survey, Chinese youth's physique in physical deterioration, on August 19, 2006, at the first China youth physical health on the BBS, present a set of data: the national youth physical health survey showed that students obesity rate increased rapidly a quarter of the city, the boy is fat, the proportion of eye myopia, close to sixty percent in junior high school students, high school students is seventy-six percent. The detection rate of obesity and myopia among children and adolescents remains high [6,7]. School infectious diseases and public health emergencies occur from time to time, which not only affect the physical health of children and adolescents but also constitutes an important problem facing China's public health.

The report "Chinese adolescent and children health study" in 2005 shows some new problem becoming the main problem of Chinese school health work.

1 Repertoire function indicators remain low

Vital capacity/body mass index can reflect a person's lung function to a certain extent. The "Physical Fitness Survey" shows that from 1985 to 2005, vital capacity and vital capacity/body mass index showed an overall downward trend in 20 years. shows that the vital capacity/body mass index distribution of students in 2008, the excellent rate was 15.62%, the good rate was 22.59%, the passing rate was 39.24%, and the failure rate was 22.54%. However, the overall level of lung function is still at a low level.

2 Overweight and obesity are serious

In 2008, the detection rate of different nutritional status among students was undernutrition 8.58%, underweight 42.21%, standard weight 37.01%, overweight 4.55%, and obesity 7.66%. Statistics in 2010 showed that overweight and obesity increased to 5.05% and 9.41% respectively, indicating that obesity and overweight conditions caused by overnutrition continued to deteriorate.

3 The incidence of myopia continues to increase

The report showed that the incidence of poor eyesight among Chinese students continued to increase from 1979 to 2005. In 1985, the average rate of poor eyesight among Han students aged 7-22 years was 34.26%. However, since then, the rate of poor eyesight has continued to increase rapidly. In 1999, the incidence of myopia among adolescents rose to second place in the world, second only to Japan, which was "the largest country of myopia" that year.

4 The growth of speed and strength tends to stagnate

Speed, explosive power, and strength qualities are the important foundations of human movement ability. The "Physical Fitness Survey" shows that from 1995 to 2005, students' physical fitness in the 50-meter run performance of reaction speed quality, standing long jump performance which reflects explosive power quality, and pull-ups, diagonal pull-ups, and sit-ups performance of response power quality. Except for a small decrease in speed quality, other qualities have dropped significantly [8].

2. PRESENT SITUATION AND REASON ANALYSIS OF SCHOOL HEALTH

Schools are social tools that serve as an overview and mechanism of health education, as they got helped form the opinions of children, adolescents, their families and educates citizens to be conscious and responsible for their behaviors and choices [9]. The United Nation's Sustainable Development Goal No. 3 aims to ensure healthy lives and the promotion of well-being at all ages. This includes children and adolescents which constitutes a big chunk of the world's population [10]. Adolescents spend most of their time in school and school hygiene has a significant impact on their overall health. At present the main problem is the lifestyle of the current children increasing generalization, many chronic non-communicable diseases are rising their rates and advancing their onset time. So looking for an early prevention path in the child and adolescent period is becoming an important task of school health promotion work, and school health management for further refinement of school health work has a vital significance.

Reason analysis:

1. The major changes in the living environment and diet way, lead to students' physical activity

decreased significantly, accelerate the degradation of body function and physical health level of teenagers also drops, second is characterized by excessive protection of every generation of parenting deprives necessary to promote the natural growth of youngsters' and children's sports, the last of the Internet era is characterized by sedentary static leisure also hindered the movement of teenagers get lasting enough fun, and on this basis, the regular physical exercise behavior habits.

2. Teenagers are under great pressure of examination and entering school, which directly leads to serious lack of sleep, prolonged study time, and reduced time for physical exercise.

3. Physical fitness, commonly consisting of cardiorespiratory endurance, muscle strength endurance, flexibility, and body composition is an important health marker [11] and is a critical part of the overall physical and mental health and growth in school-aged children [12]. Physical fitness is positively associated with cognition, [12,13] weight status,4 psychological well-being,5 academic achievement scores, [12,14,15] and performance of real-world tasks [16]. Low physical activity or fitness, in contrast, can lead to the development of cardiovascular disease risks and an increased prevalence of cardiovascular disease risk factors in childhood,9 which can, in turn, track into adulthood [11]. Physical education cannot be strictly implemented following national regulations, failing students to complete physical education courses, and the occupation of students' normal physical activity time. From 1985 to 2005, five large-scale student physique and health survey in China, the Chinese young students in body shape, physical function and physical quality of multiple indicators show varying degrees of decline, some indexes of the accelerating trend decline tendency, analysis report, since 2008, the physical health of students decline to get a degree, but reflected in the overall index is still worrying.

3. COUNTERMEASURES AND SUGGESTIONS

3.1 Increase in Publicity and Awareness

The health of a school and the health education work, in addition to the restriction of the economic development on the whole, more importantly, depends on the leaders at all levels and the social attention and people's

understanding of school health work, therefore, only intensify propaganda, improve the administrative department of education, school leaders and teachers and parents to correctly identify the school of health and health education, to form a good atmosphere of education, has never been to gradually standardize the teaching of the school of health and health education

3.2 Complete the Construction of Curriculum and Teaching Materials and Establish a School Hygiene and Health Education Teaching Material System that is Compatible with the Quality Education in Primary and Secondary Schools

The modern school of health and health education materials construction must be built under the ideology of health first, which adolescent growth and development regularity of cognitive law points, with quality education as the core, for the sustainable development of the students as the starting point, to build a complete, scientific, education of primary and secondary schools of corresponding health education teaching material system. Through the school of health and health education teaching material systems, make teenagers have a strong physique, mental health, good habits, optimistic attitude toward life, and strong ability of social adaptation.

3.3 Strengthen the Collective Prevention and Control of Common Local Diseases and Infectious Diseases

Through all levels of government and health workers of hard struggle, some infectious diseases, embodied in our country has vanished, various intractable diseases has been breached, but in recent years, with the global climate warming, the worsening of the natural environment, the overall living standards improve and the changes in eating habits, some places and seems to breed new infectious diseases, often be ferocious, great harm, in order to attract the attention of the people around the world, therefore, schools of all types and at all levels shall, in strict accordance with the "plan for the prevention and control of the national students' common diseases" regulation requirement to strengthen the construction of the school hospital, give full play to the role of school health personnel, Active publicity and education to

mobilize the participation of parents, organized and planned to take comprehensive prevention and prevention means, reduce the incidence of various common diseases and infectious diseases among students.

3.4 To Establish a High Level of School Health and Health Education Teaching Staff

All kinds of normal colleges and universities should take school hygiene and health education as compulsory courses, which can not only meet the needs of students themselves but also make up for the shortage of professionals, which is beneficial to both oneself and the society.

4.CONCLUSION

The above all lead to physical health problems of a variety of reasons, on the whole, a society that during the rapid development and changing, some of the reasons is the inevitable. Outcome of the modern can't deserve it, such as living environment, transportation, family structure, such as cannot be restored to its previous state, but there are many reasons can be through the efforts of the society and human oneself to control or eliminate, such as unreasonable diet, unhealthy habits overweight study pressure, improper physical education, etc. In fact, of course, closely rely on the educational intervention is not enough, because the cause of adolescent physical health problems, its formation is a complex social background, has a long history, has a profound historical and cultural origins, some concomitant with the modernization, is facing the rapid advance of modernization, the entire Chinese society off guard, don't have enough ideas and material preparation. Therefore, to solve the current adolescent health problems is a long-term and difficult, we must mobilize the whole society to work together as a systematic project.

CONSENT

It is not applicable.

ETHICAL APPROVAL

It is not applicable.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

REFERENCES

1. Green LW, Kreuter MW. Health promotion planning: An educational and ecological approach. New York, NY: McGraw-Hill Professional; 2005.
2. The main task of current school health work is to implement ---the No. 7 document of the central government and comprehensively promote school health work [J]. Chinese School Health, 2008;29(1):1-3.
3. Xu S, Ren J, Li F, Wang L, Wang S. School bullying among vocational school students in China: prevalence and associations with personal, relational, and school factors. Journal of interpersonal violence. 2022;37(1-2):NP104-24.
4. Yang W, Wu B, Tan SY, Li B, Lou VW, Chen Z, Chen X, Fletcher JR, Carrino L, Hu B, Zhang A. Understanding health and social challenges for aging and long-term care in China. Research on Aging. 2021 Mar;43(3-4):127-35.
5. Wenke Liao. 30 years of The development process and trend of China's youth population_ Jiawei Hou.
6. Shang X, Liu A, Li Y, Hu X, Du L, Ma J, et al. The association of weight status with physical fitness among Chinese children. Int J Pediatr. 2010;515414:2010. DOI: 10.1155/2010/515414
7. LaVigne T, Hoza B, Smith A, Shoulberg EK, Bukowski W. Associations between physical fitness and children's psychological well-being. J Clin Sport Psych. 2016;10:32-47.
8. Report on the Physical and Healthy Development of Chinese's Adolescents.--- Chinese Academy of Educational Sciences
9. Ministério da Saúde (BR). Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Saúde na escola. Brasília, DF: Ministério da Saúde; 2009. [Cited: 2018 July 20]. Available:http://189.28.128.100/dab/docs/publicacoes/cadernos_ab/abcad24.pdf
10. School Health Promotion in Southeast Asia by Japan and Partners.
11. Ortega FB, Ruiz JR, Castillo MJ, Sjostrom M. Physical fitness in childhood and adolescence: A powerful marker of health. Int J Obes. 2008;32:1-11.
12. Donnelly JE, Castelli D, Hillman CH, Castelli D, Etnier JL, Lee S, et al. Physical activity, fitness, cognitive function, and academic achievement in children: a systematic review. Med Sci Sports Exerc. 2016;48:1223-4.
13. Chaddock L, Hillman CH, Pontifex MB, Johnson CR, Raine LB, Karter AF. Childhood aerobic fitness predicts cognitive performance one year later. J Sports Sci. 2012;30:421-30.
14. Cottrell LA, Northrup K, Wittberg R. The extended relationship between child cardiovascular risks and academic performance measures. Obesity (Silver Spring). 2007;15:3170-7.
15. Davis CL, Cooper S. Fitness, fatness, cognition, behavior, and academic achievement among overweight children: do cross-sectional associations correspond to exercise trial outcomes? Pre Med. 2011;52(Suppl. 1):S65-9.
16. Chaddock L, Neider MB, Lutz A, Hillman CH, Karter AF. Role of childhood aerobic fitness in successful street crossing. Med Sci Sports Exerc. 2012;44:749-53.

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