

FIFTH EDITION



HEALTH in elementary schools

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HEALTH
in elementary schools

A CONCEPT OF HEALTH

Health is personal; it is individual and variable in its nature.

Health is complex; it relates to the total person and involves physical, psychological, social, and spiritual components.

Health is dependent on self-actualization; it necessitates internalization by the individual.

Health is the result of personal decisions; it involves selection from positive and negative alternatives, the assessment of consequences, and risk taking.

Health is a frequently changing phenomenon; it is the result of the interaction of the individual with a multiplicity of experiences in the environment.

Health is necessary for effective learning and living; it is a means to an end.

Preface

Since the first edition of this book there have been a number of important changes in the health sciences, elementary education, and health education. We have seen a long overdue heightened interest in health education in the nation's schools. With the mounting evidence clearly demonstrating the human and financial values of prevention—above and beyond the restorative contributions of hospital and medical care—educators, health professionals, health insurers, and the general public increasingly support health education as an essential part of general education. Nowhere is this more significantly applicable than in the education of children in the elementary school.

One reflection of this favorable attitude and increased awareness is seen in the growing national trend toward state legislation calling for comprehensive health education for all students, K through 12.

Such authoritative and influential professional organizations as the National Education Association, the American Medical Association, the American Academy of Pediatrics, the American Public Health Association, the National Association of Elementary School Principals, the American Association of School Administrators, and most voluntary health agencies continue to urge that quality programs of health education be available to all elementary school children.

Since good health is more and more recognized as an essential thread in the fabric of quality living, it follows that teachers—especially at the elementary level—need an

understanding and appreciation of the values inherent in sound, forward-looking school health programs.

Hence, as in previous editions, this revision is designed to help meet present and future demands for elementary classroom teachers and supervisors who are prepared to take advantage of the many opportunities to protect, maintain, and improve the health of young children. To this end the book continues to deal with the basic aspects of school *health education*—curriculum, values, methods and strategies, human and material resources—*health services*, and *healthful school environment*.

While the book is designed primarily for prospective and in-service teachers, it should also be of interest and value to school health coordinators, curriculum coordinators, principals, superintendents, school board members, and health specialists now serving or working with elementary schools. Public health workers should find the book helpful in clarifying certain problems of educational organization, objectives, curriculum development, supervision, and teaching methods and materials as they relate to the elementary school health program.

The book has three broad purposes: (1) it seeks to help elementary school teachers recognize more clearly their responsibilities and their many opportunities for protecting and improving the health of their pupils; (2) it provides the information that teachers want and need to improve their contribution to the health service program in raising the

level of healthful school living in those elementary schools in which they serve; and (3) it is concerned with developing understanding and skill in curriculum development, teaching methods, and source materials that will help classroom teachers make a major contribution to the improvement of health in youngsters by doing a better job of health education.

Every effort has been made to present the latest and best in research, practice, and pioneer thinking in school health in light of what is feasible and practical in most elementary schools throughout the nation. While keeping documentation at a minimum for better readability and conceptual clarity, we have attempted to provide a synthesis of those fundamental principles of health education, health services and guidance, and healthful environment that research and experience indicate are best for elementary schools. The book is divided into six parts.

Part One is concerned with fundamental concepts of the elementary school health program, including orientation, and the classroom teacher's role in health instruction, health services, and healthful environment.

Part Two deals with the physical and emotional aspects of a healthful elementary school environment. Attention is focused on the influence of the school environment on the child's total health and safety.

Part Three emphasizes the importance of school health services, including health appraisals, counseling and guidance, safety, and mental health in protecting and improving the health of pupils.

Part Four highlights the increasing need for health education, its place in the modern curriculum, administrative problems, and organizing for health teaching.

Part Five elaborates on the methods and materials useful in health teaching—behavior modification, the principles of learning, the application of methods, over 1,200 teacher-tested techniques categorized into 17 health areas, and up-to-date materials and resources for better health education. Specific sources of health teaching materials are provided.

Part Six concentrates on the place of evalu-

ation and measurement in the school health program.

The Appendices provide a handy communicable disease summary for teachers, the compulsory immunization law requirements by states, and a device for evolving the total school health program.

Throughout the book we have pointed up the importance of cooperative effort on the part of teachers, parents, community health agencies, physicians, nurses, dentists, eye specialists, and others concerned with child health and safety. These mutually favorable reciprocal relationships are essential in translating good elementary school health program theory into actual practice. Our underlying belief is that anything as fundamental as the health of children calls for the highest possible level of partnership among school, home, and community.

The book provides the specific competencies needed by teachers to carry out their responsibilities in health education, health services, and the healthful school environment. It gives appropriate attention to problems and possible solutions of the deprived, the poor, and the ghetto children of different racial and ethnic backgrounds, such continuing needs of young people as venereal disease, drugs, sickle cell anemia, epilepsy, nutrition, safety on buses, learning disabilities or perceptual problems, drug counselors, and nurse practitioners.

The text continues to include the new concept of health (wholistic or holistic health) and adds a spiritual dimension (values, moral issues, and humanism) to the usual physical, social, and psychologic aspects. This concept has received specific application to eleven illustrative partial units (Chapter 9). These units, together with Chapters 10 and 11 on behavior modification and methods and techniques in health teaching, provide curriculum guidelines that will enable teachers to plan and organize for health instruction in their individual classrooms.

New and updated material has been introduced in each of the areas of school health. Recent developments and trends in child health and education have focused attention

on humanistic education—especially values clarification and decision making, parent education and involvement, school-community relations, preventive medicine and health self-care, new state immunization requirements for pupils, health problems of minority and poor children, battered children, child alcoholism and other drug abuse, mental health—suicide and death education, and related issues and problems in educating for better health.

Several additional features found in the fifth edition of the text include an emphasis on informal health education (Chapter 5 especially), curriculum material for use in special education, Head Start, and fire safety programs (a nationwide development of the National Fire Protection Association), change of Chapter 10 from “The Learning Process in Health Education” to “Behavior Modification in Health Education,” combining of former Chapters 11 and 12 into one chapter entitled, “Methods and Techniques in Health Teaching,” and updating of Chapter 12, “Material Aids in Health Teaching.”

It has been our task to design a text that not only identifies the known principles and practices for health in elementary schools but also makes them operational and functional

for school personnel use. It remains for teachers, administrators, and other concerned persons to implement these measures in schools throughout the country.

If we help bring about just one favorable change in the health program of one elementary school, if we lead one classroom teacher to recognize the powerful potential influence she has for child health, if we provoke one principal to take a critical look at his school's health program, if we but touch the conscience of one superintendent or school board member, if we pique the curiosity of a health department or a voluntary agency, or—above all—if we in some way indirectly enrich the life of an elementary school boy or girl, this will be reward enough.

Finally, we are grateful to all those people and organizations who have helped us to make this edition of *Health in Elementary Schools* a better book. We are especially indebted to those classroom teachers and our students who offered stimulating and useful suggestions.

Harold J. Cornacchia
Wesley M. Staton

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PART ONE

The elementary school health program

Improved school health programs will be a key element in the comprehensive national child health policy which I will ask the Public Health Service to develop for the Department. . . . Effective health education early in life can help to prevent the major diseases of adulthood. . . . As children grow older we must teach them how to become responsible informed consumers of health care. I recognize that interest in improving school health programs has been spotty over the years. . . . I believe that the time has come again to forge ahead in expanding and improving these programs.

JOSEPH A. CALIFANO, Jr.,
SECRETARY OF THE U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
NATIONAL SCHOOL HEALTH CONFERENCE,
MINNEAPOLIS, MINN., MAY 12-13, 1977

1 School health

ITS NATURE AND PURPOSE

After many years of struggle and growing support it now appears that both the educational community and the general public are aware of the vital significance of *prevention* in the protection, maintenance, and improvement of the nation's health. Although debate and controversy continue over whether health care programs should be financed by government or by individuals and families through private insurance, one basic fact has become increasingly clear: most of the costs of medical and hospital care can be avoided, minimized, or postponed by better *health education*. More important, we now realize that health and the quality of life depend mainly on one's life-style, behavior, and environment rather than on medical science and hospital care.* Nowhere is this more apparent than in the realm of child and adolescent health and safety.

If we can bring to our schools and our students the best of what we now know about personal, family, and community health and safety, we will lengthen the strides already taken to make major positive changes in the lives of children, youth, and adults.

Authorities agree that the best time for building the foundations for better health is early in life. It follows then that one of society's largest—and potentially most influential—organizations offers vast opportunities for raising the health of the individual, the family, and the community. Obviously, we speak here of the 80,000 elementary schools dotting the cities, suburbs, towns, and countryside of America. We think too of the almost limitless ways in which elemen-

tary teachers and school administrators—with the help of health specialists *and* the support of the community—can favorably affect the health of 30 million boys and girls in schools across the land. This is through enlightened *health teaching*, *health services*, and a *healthful school environment*. Fig. 1-1 outlines the main activities of the entire school health program.

But our schools are in trouble. Teachers, prospective teachers, educational administrators, legislators, parents, education faculty in colleges and universities, taxpayers, and the news media have all become increasingly concerned about our schools. As problems continue to pile up, cluttering the road to quality education for all children, it is plain that bold measures must be taken if we are to give more than lip service to repeated statements of lofty objectives and high ideals for America's schools.

Our schools and our society are beset with the harsh reality of economic, political, and other social problems that affect the quality of life. The question of tax sources for the equitable and adequate support of our schools has become a critical one. Piled atop the money problems are the tangled issues of busing, collective negotiations between teachers and school boards, health and safety conditions for pupils and teachers, selection and purchase of up-to-date quality textbooks, lock-step versus performance pay raises, certification standards for teachers, school lunches for all pupils, state legislatures and their influence on school policies and practices, employment opportunities and educational goals, conflicts in administrative and learning theories, and "accountability" procedures for both pupils and teachers.

However, since this is a book about ele-

*America's doctors: a profession in trouble, U.S. News and World Report 83: Oct. 17, 1977.

4 The elementary school health program

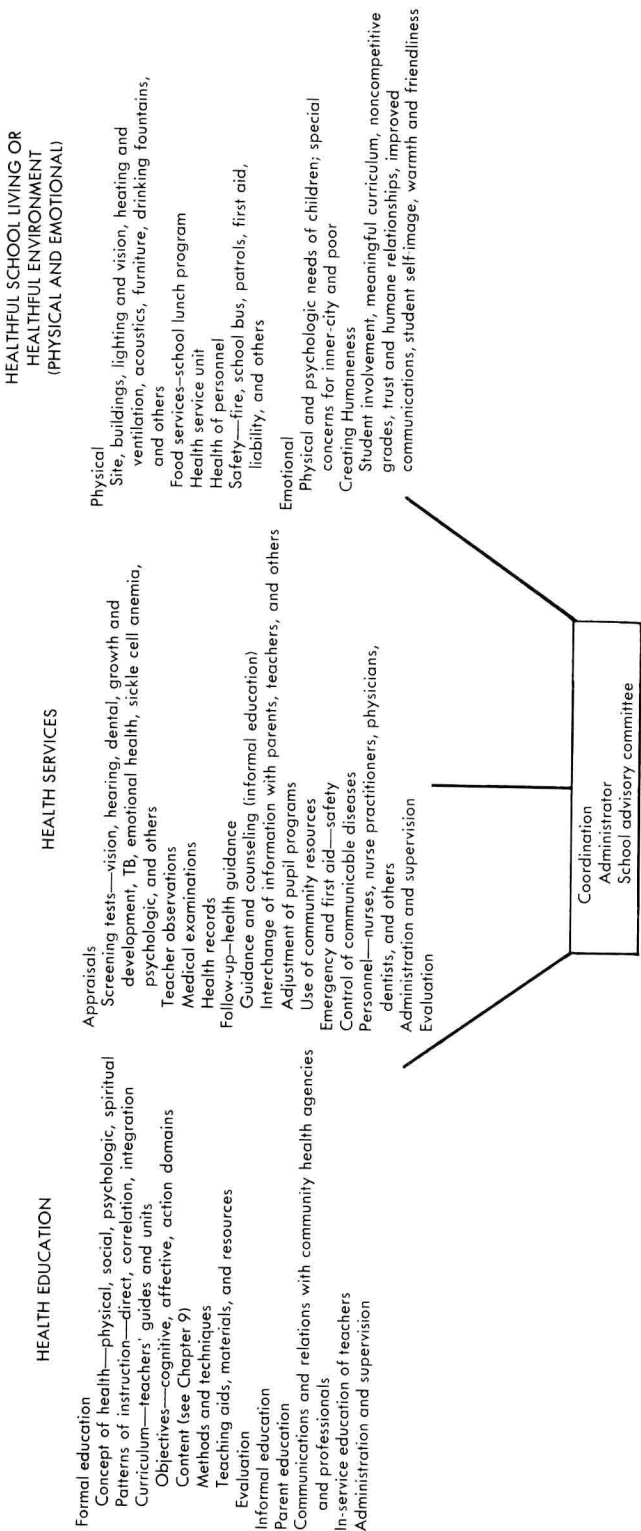


Fig. 1-1. Elementary school health program.

mentary schools and their health programs, we cannot properly analyze all those forces that tend to shape our culture and our schools. Nevertheless, the need for *preventive* health care has never been more critical, and its advocacy is increasing substantially each year. Authorities are beginning to realize that it is not only necessary but also economically more feasible and desirable to reduce the incidence of health problems. The schools have a vital role to play in such action.

Yet, school health does not exist in a vacuum. The school health program is part of the lifeblood of America's better schools, and like all aspects of good schools, it is sensitive to significant thinking and events in the community in which it thrives. In a very real sense the school reflects the character of its community—local, state, and national. Health instruction must be closely related to day-to-day problems of health and safety; school health services depend in large measure on the community's health resources; and the healthful school environment is in itself part of the community.

It is the basic thesis of education that the thinking and the behavior of people can be changed for the better. We assume with the confidence that grows out of research and experience that good teaching in a favorable setting will raise the quality of living for pupils. By enriching the lives of millions of children, elementary education cannot help but contribute to forming a better society.

This "better society" and "the good life" have challenged man for thousands of years. Along with the family, the church and temple, and the community in general, schools have continuously sought to help people live better individually and in groups. Although there have been shifts in philosophy from time to time, the ultimate purpose of our schools has remained constant. From the log cabin of colonial times to the ultramodern structures of contemporary suburbia, the nation's schools have always been concerned with helping boys and girls to live better lives.

In the old days the Three R's made up

the curriculum. Teaching methods were characterized by the "boss teacher" and his history stick. In sharp contrast today's pupils enjoy the advantages and opportunities of a broad curriculum that includes the Three R's *plus*. Modern elementary school teaching stresses working *with* children to help them learn and want to learn those things that are necessary for a happy useful life in our modern democratic society.

Of course there are poor, unimaginative teachers today just as there were at the turn of the century. Not all school buildings are of modern design with safe and functional facilities, nor are they all set in spacious, pleasant surroundings; children still strive to learn in small frame structures in the country and in dark ancient buildings in the inner city.

Yet, like business and industry, science, the military, and government, education has sharpened its tools and streamlined its techniques to keep in step with a dynamic society. As with these other fields of human interests and effort, education has not always found the road to improvement a smooth one. There are still areas of honest controversy in curriculum; much remains to be found out about how pupils learn; democratic administration and supervision are not always practiced; many schools are overcrowded and understaffed; too many children spend their school days in buildings that must frankly be considered firetraps, and perhaps above all, really good teachers are hard to find and harder to keep in communities where money for schools is limited.

In the main, however, progress in education has outrun its problems. Elementary school pupils today have a better chance than ever before to prepare to "live most and serve best."

The curriculum now includes substantially more than the Three R's. This does not mean that such basic subjects as reading, writing, spelling, arithmetic, social studies, and science are being neglected. It simply reflects the concern of elementary school administrators and teachers as well as most parents for such important areas of learning as health