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# **Health Education**

Foundations for the Future

**Laurna Rubinson**  
**Wesley F. Alles**

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To  
My parents, Fred and Sylvia Goldberg

L.R.

To  
My family, whose encouragement  
and love enabled me to contribute  
to this project.

W.A.

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# Preface

This book is designed to provide a generic introduction for students enrolled in programs of professional preparation in health education. From the beginning of the project we had three major purposes. First, we wanted to spark an appreciation for the heritage of past efforts and for the challenges that remain ahead of us. Second, we wanted to provide a text that students would find helpful as they embark on a career in health education. Finally, we wanted to engender a feeling on the part of the reader that there is an underlying philosophy and set of competencies unique to health education that are shared by many others who have chosen a career in this emerging profession.

Regardless of a person's areas of specialization, there are commonalities shared by all of us because we are health educators. Throughout our presentation we explore the various health settings: the community, the school, the hospital, and the worksite. As offspring of more established professions, notably education, medicine, and the behavioral sciences, it is not always easy to envision the specific qualities of our own field. Nor is it easy to feel a part of a profession when there are so many career paths available to those who share the title of health educator. But a sense of identity is important because it is the collective abilities of those who are now studying health education that will shape the future of the profession. They should be proud of their title and be prepared to assume positions of leadership in order to advance the profession. It is hoped that this textbook presents something of the nature of health education by considering its history, philosophy, current and future issues, and competencies related to program planning, teaching, research, evaluation, and advocacy.

## **Major Features**

There have been other books whose purposes were similar to ours. However, this book contains several important pedagogical features that will enhance the teaching-learning process. The most significant feature is that

the book is composed of chapters that were written by leading health educators from across the country. Each person contributed in an area of personal interest and each is considered to be an expert in that particular aspect of health education. This contributing author concept brings greater breadth of perspective than could have been presented by any one author.

Several helpful *learning aids* included throughout the text will enhance students' understanding of the content. Each chapter contains an *introduction* to help focus the reader's attention on important ideas. The *chapter summary* helps to clarify these concepts through a brief reiteration. To add perspective, the editors provide *end-of-chapter analysis* of issues considered to be of prime importance to the practitioner. *Discussion questions* are presented at the end of each chapter to facilitate dialogue among students. The questions encourage students to consider the personal meaning of each chapter, and as such make interesting out-of-class assignments for in-class discussion. Additional *suggested readings* from the current literature have been selected by the editors. The readings will add even more perspective to the concepts presented in this textbook. A *glossary* of key terms is provided to assist students in interpreting major concepts. Numerous *appendixes* supplement the content by providing useful and detailed information. The appendixes include:

- Promoting health-preventing disease: objectives for the nation
- Government-sponsored health promotion programs
- Protection, prevention, and health promotion
- Federal health information clearinghouses
- Sample worksite health promotion programs
- Employee health promotion resource lists
- Educational materials available from three voluntary health agencies

This work will be appreciated by students and teachers who prefer a textbook that stimulates learning through introspection, discussion, and reflection rather than by trying to convey the impression that, having read the book, the student has nothing left to do but take the test and pass the course. Learning is not limited to the words contained on the pages between the covers. A good textbook can never replace a good teacher. A college course should never be recalled in the student's mind by the textbook that was used in the course. The purposes of a textbook are to stimulate thinking and to facilitate an exchange of ideas. We think *Health Education: Foundation for the Future* will achieve these purposes.

### **Acknowledgments**

Many people have enabled us to develop this textbook from its conception to its completion. Our first debt of gratitude is to Chuck Hirsch,



who believed in the concept and encouraged us with the project. Nancy Roberson, our editor, who ably completed the project, has provided both insight and forethought. Nancy's assistant, Michelle Turenne, has kept the text moving on schedule and has graciously dealt with the many details of publication. Mark Spann did an excellent job of editing the manuscript.

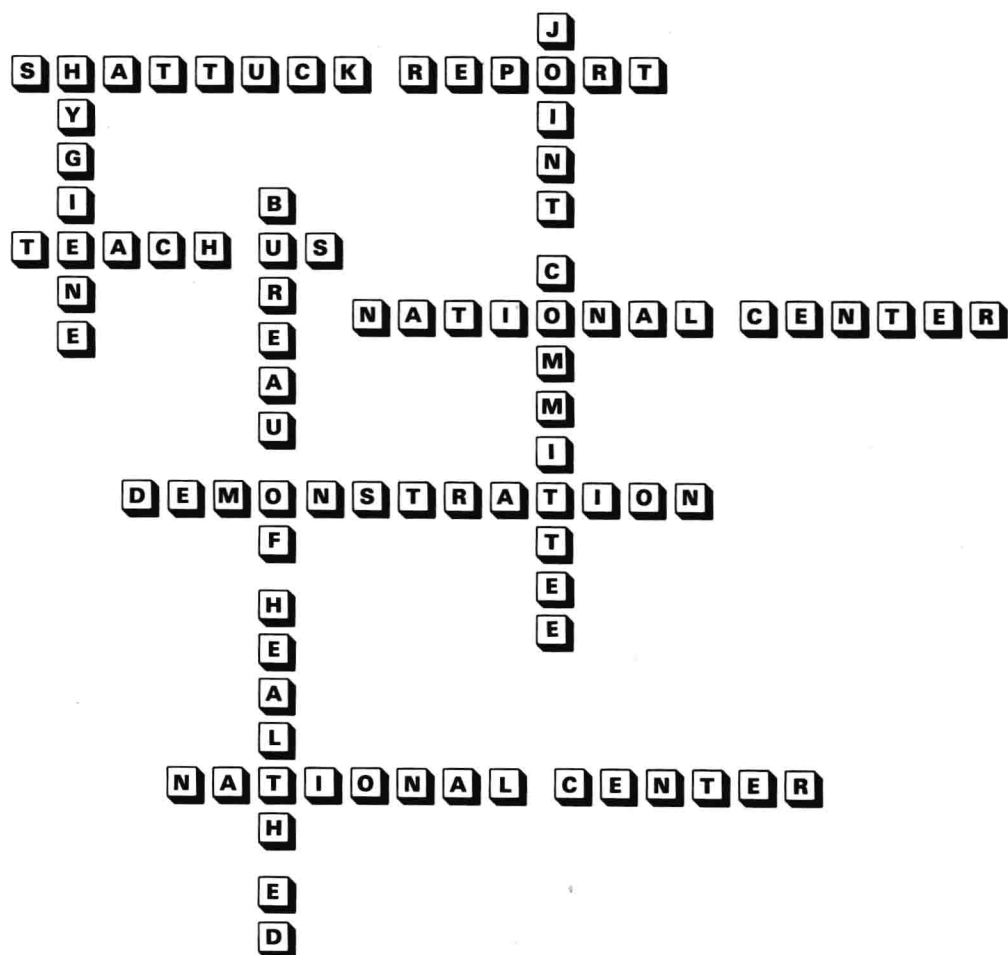
This text would never have been possible without the contributors. They all are provocative writers, excellent scholars, and humanitarians. We do appreciate their patience and understanding in the arduous process of manuscript preparation.

For their thoughtful suggestions and constructive criticisms, we would also like to thank the reviewers who received the many drafts of the manuscript: Marian V. Hamburg, Ed.D., New York University; Altha M. Crouch, Ed.D., and Linda Sue King, Ph.D., both of the University of New Mexico; James H. Dotson, Jr., University of Maryland; Stuart W. Fors, Ph.D., University of Georgia; Debra L. Sutton, University of Northern Colorado; Mal Goldsmith, Ph.D., Southern Illinois University at Edwardsville; and Alice Ennis, State University of New York College at Brockport.

Finally, we would like to note our appreciation to our students and colleagues, for without their influence on our careers this text would never have been possible.

**Laurina Robinson**  
**Wesley F. Alles**

**Health Education**  
**Foundations for the Future**



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# 1 History of Health Education

## Introduction

This textbook appropriately begins with a look through history at the people and events that have helped shape our profession. It has been a long, winding road from ancient superstitions and formal codes of health to the contemporary role of health education in the 1980s. Professor Lussier describes how our profession emerged from the European traditions of education and physical education, the public health movement at the turn of this century, and the development of twentieth century medicine. Gradually the "blood and bones" study of hygiene gave way to a more exciting, relevant, and educationally prudent approach to the study of individual health behavior. The struggle for professional identity that has persisted for decades (also discussed in Chapter 4) is nearly over, and health education stands on the threshold of a great future. As health educators of the future you are about to make your own contributions to the profession. This chapter is a tribute to those pioneering health educators who have created the opportunity that lies ahead.

Professor Lussier offers a chronology of important events in the evolution of health education. The following is a brief calender of events to help guide your reading of this chapter.

- |           |   |
|-----------|---|
| 1837      | The first of Horace Mann's <i>Annual Reports</i> campaigned for mandatory programs of hygiene.  |
| 1850      | <i>Report of the Sanitary Commission of Massachusetts</i> , better known as the Shattuck Report, called for public health reforms and mandatory hygiene education.  |
| 1850-1900 | The creation of voluntary agencies and professional associations to promote health, education, and professional preparation.  |
| 1901      | Thomas D. Wood, M.D., who has been called the father of health education, established a program of professional preparation in hygiene at Columbia University.      |
| 1901      | The first of many White House conferences on the health of children.  |
| 1911      | Creation of the Joint Committee on Health Problems in Education (NEA and AMA), a forum for the study of innovative ideas.   |
| 1918      | Establishment of the American Child Health Association to protect and improve the health of children.   |
| 1921      | The Summerville and Malden Studies were conducted by Clair Turner to clarify the status and role of health education.   |
| 1931      | The Cattagaus Study, directed by Ruth Grout, studied the impact of health education and the competency of health teachers.  |
| 1934      | Mary Spencer, the first student to complete all three degree programs in health education, was awarded a Ph.D. by Columbia University.                              |
| 1936      | The Astoria Study was directed by Dorothy Nyswander. Although the focus was on school health services it had an impact on all aspects of the school health program. |

- 1943 The School Community Health Project in Michigan demonstrated the effectiveness of a comprehensive school-community health program.
- 1944 The School Community Health Project in California demonstrated the effectiveness of a comprehensive school-community health program.
- 1945 The Denver Interest Study, a needs assessment for the development of curriculum, was conducted.
- 1948 National Conference on Undergraduate Professional Preparation in Health, Physical Education and Recreation identified competencies needed by the health educator.
- 1949 The first U.S. Office of Education Conference on Undergraduate Professional Preparation of Students majoring in health education was directed by H.F. Kilander.
- 1950 The National Conference on Graduate Study in Health, Physical Education and Recreation established guidelines for graduate education.
- 1950 The official beginning of the Society of Public Health Educators (SOPHE).
- 1950 Mid-Century White House Conference on Children and Youth recommended greater emphasis of health education in the school curriculum and quality instruction achieved through adequately prepared teachers.
- 1953 Creation of the U.S. Department of Health, Education, and Welfare.
- 1954 The School Health Education Evaluation Study in Los Angeles examined the effects of comprehensive school health education.
- 1956 Two College Health conferences were chaired by Edward B. Johns; the first one analyzed health content and methodology and the second one studied the professional preparation of school health educators.
- 1958 The Inter-Agency Conference on School Health Education recommended effective communication among the various elements involved in health education.
- 1959 The Highland Park Conference established commissions to study specific issues; committee Chairs included Delbert Oberterfer on philosophy, Sarah Louise Smith and Edward B. Johns on health instruction, Fred Hein on research, Charlotte Leach on intergroup relationships, and William Creswell on accreditation.
- 1961 The School Health Education Study (SHES) surveyed nearly 1 million students nationwide and initiated the writing of a K-12 curriculum guide.
- 1966 The Committee on Graduate Curriculum in Health Education offered recommendations for a core curriculum that included health science, behavioral science, education, and research.
- 1969 Teach Us What We Want to Know, a needs and interest survey of 5000 Connecticut students, was directed by Ruth Byler.
- 1971 Coalition of National Health Organizations was formed to mobilize the resources of the profession.
- 1971 President's Committee on Health Education was established.
- 1974 Bureau of Health Education within the Centers for Disease Control.
- 1976 Office of Health Information, Health Promotion, Physical Fitness and Sports Medicine created by PL 94-317.
- 1978 National Center for Health Education facilitated the Role Delineation Project.
- 1978 Office of Comprehensive School Health within the Department of Education created by PL 95-561.
- 1978 Conference on the Commonalities and Differences in the Preparation and Practice of Health Educators held in Bethesda, Md.; it led to the National Task Force on the Preparation and Practice of Health Educators.
- 1980 The *Initial Role Delineation for Health Education, Final Report* published.



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|-----------|--|
| 1980-1982 | Further national efforts halted as a result of cutbacks in federal funding.  |
| 1981      | National Conference for Institutions Preparing Health Educators Role Delineation Conference held in Birmingham, Alabama. |
- 

## **The Beginnings**

Health education has an ancient and complex history. Its beginnings can be located within the very foundation of civilization. Much of the early history of the profession closely parallels that of medicine and its associated sciences. In later times, particularly since 1800, the history of health education has taken on a richness and character uniquely its own.

Let us go back to the distant past, to that time when history begins to fade into speculation, and examine the genesis of health education. When the earliest societies emerged from independent families into gatherer-hunter communities people began to examine the forces that were shaping their lives. Two forces that they were able to identify were illness and death. Although unable to identify the specific cause and effect relationship that led to illness and death, they were nevertheless able to determine that disease had some relationship to illness and death and therefore should be avoided. They also recognized that some members of the community lived longer than others. It was believed that people with great longevity must have had some special knowledge that enabled them to remain healthy and alive. This belief is still reflected in the fact that people who survive into their 80s and beyond are frequently asked to reveal their secret of longevity. In primitive civilizations the survivors were respected and revered. Eventually the status of such survivors evolved to that of headmen or shamans whose role was to define and enforce the taboos of the culture. Compliance with taboos was believed to result in a longer and healthier life.

Superstition evolved through taboos and mores to become laws that shaped public policy. The headmen gradually emerged as leaders who ultimately became the institutional heads. The evolution of superstition into scientific fact and the role of shamans into what we call teachers, doctors, and other health specialists comprises the history of health education. Although much of this history lies outside the purview of this book, it is nevertheless important for the sake of continuity to identify some of the people and events that constitute landmarks in this long and eventful history.

The earliest traces of the history of health are found among paleontologic relics. They are composed of wall paintings, artifacts, and trephined skulls. The oldest written documents related to health are the Smith Papyri dating from 1600 BC, which describe various surgical techniques.