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ABSTRACT

This document is divided into two parts. Part 1, entitled "Undergraduate Preparation in Safety Education," contains in outline form statements on the following topics: basic curricula in safety education (including suggested competencies); faculty for basic programs; students in basic programs (including admission criteria); resources and facilities for basic programs; and evaluation, program review, and planning. Part 2 is a report on school health education and contains two divisions: Recommended Standards for the Accreditation of Teachers of Health Education and Competencies of the Health Educator. This last division breaks the competencies into headings of environmental health, mental health, tobacco, alcohol and other drugs, nutrition, communicable and noncommunicable diseases, human sexuality, dental health, physical fitness, consumer health, community health, accident prevention, and philosophy of health and health education. (JA)

PROFESSIONAL PREPARATION IN SAFETY EDUCATION AND SCHOOL HEALTH EDUCATION

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
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FOREWORD

The 1962 National Conference on Undergraduate Professional Preparation in Health Education, Physical Education, and Recreation not only produced guidelines for teacher education programs, but also formed the Professional Preparation Panel to implement the guidelines and give attention to improving existing programs. One of the panel's responsibilities was to review the guidelines constantly and keep them current. Because many new developments took place in teacher education during the 1960s, the panel recommended in the Fall of 1967 that the guidelines which appeared in the 1962 Conference Report be revised. It was hoped that the revision could be accomplished by task forces established within each of AAHPER's eight divisions, but the revisions were so extensive that it was necessary to schedule another national conference to restudy the entire teacher preparation procedure.

A committee of division and panel members was established to plan and conduct the conference. Each division appointed a member to serve on the planning committee and the panel designated one of its members to serve as the chairman. Coordinating the efforts to secure approval of the conference by the eight divisions and providing a time schedule for needed pre-conference task force work proved to be a major task. It was not accomplished until the fall of 1971 when final approval was given by AAHPER's Board of Directors and the eight divisions, and the committee was directed to proceed with the conference. In 1972 the pre-conference work was completed and materials were mailed to the pre-registered delegates as working papers for the conference. During the planning and working period that preceded the conference many members were involved and they, together with the 500 members who registered at the New Orleans Conference, represent a major membership involvement in an important Association program. This publication is an extract (with additions on pages 12-13) from *Professional Preparation in Dance, Physical Education, Recreation Education, Safety Education, and School Health Education* (AAHPER, 1974), which is the final product of their work.

George Anderson
Associate Executive Secretary
AAHPER

CONTENTS

SAFETY EDUCATION

- 1 Introduction
- 2 Undergraduate Preparation in Safety Education
- 10 Task Force

SCHOOL HEALTH EDUCATION

- 12 Introduction
- 15 Part I. Recommended Standards for the Accreditation of Teachers of Health Education
- 20 Part II. Competencies of the Health Educator
- 38 Task Force

SAFETY EDUCATION

INTRODUCTION

Enactment by the U.S. Congress of the Highway Safety Act of 1966 and the Occupational Safety and Health Act of 1970 has accentuated a long existing need of individuals who have extensive training in safety education and accident prevention. In recognition of the increasing importance of these areas, the AAHPER Division of Safety Education appointed a five-member Task Force to prepare a preliminary report on basic curricular requirements for undergraduate preparation in safety education for the 1973 Conference on Professional Preparation. The task force met twice in preliminary work sessions — the first in Chicago on December 2-3, 1971, and the second in Champaign, Illinois, September 29-30, 1972.

UNDERGRADUATE PREPARATION IN SAFETY EDUCATION

1.0 BASIC CURRICULA IN SAFETY EDUCATION

Curricula for teacher education are designed to achieve explicitly stated objectives. These objectives are determined in relation to both the professional roles for which the preparation programs are designed and the behavioral outcomes sought. It is assumed that the design of each curriculum for the preparation of teachers adopted by the institution reflects the judgment of appropriate members of the faculty and staff, of students, of graduates and of the profession as a whole. It is also assumed that these curricula reflect an awareness of research and development in teacher education.¹

1.0.1 Definition of Terms

A. Accident

1. "That occurrence in a sequence of events which usually produces unintended injury, death or property damage."²
2. An unplanned, unwanted and unexpected event which may produce injury, death, or property damage.
3. An incident due to error in performance by man and/or machine in a particular environment which results in contact with one or more forces that interfere with normal body processes or which exceeds the threshold limit of the entire human body or of specific objects involved, sustained because of ineffective adjustment to hazards, manifested by losses incurred, and observable in the form of symptoms such as pain, injury, damage, destruction and interruption of mission.

B. Safety

1. That discipline which deals with (a) causation and prevention of accidents, (b) mitigation of accident consequences, (c) care of injured persons, (d) salvage of damaged property and (e) protection of the accident site.
2. A system of science-based, action-oriented components designed to affect optimal achievement of error-free and, therefore, accident-free task performances which involve man-machine-environment relationships.

C. Safety Education

1. That area of instruction and experience through which persons learn to make wise decisions in daily living.
2. The process and methodology employed in conveying safety science subject matter to individuals through effective utilization of learning experiences designed to favorably influence decision making competencies related to cognitive, affective, and psychomotor behavior de-

¹ National Council for Accreditation of Teacher Education, *Standards for the Accreditation of Teacher Education* (Washington, D.C.: NCATE, 1970), p. 3.

² *Accident Facts* (Chicago: National Safety Council, 1972), p. 97.

manded for accident-free performances in tasks involving man-machine-environment relationships.

Accidents grow out of deficiencies in the cognitive, affective, or psychomotor domains. It is therefore the function of safety education to provide the student with the knowledge, feelings, and skills which will enable him to: (a) prevent accidents, (b) mitigate accident consequences, (c) care for injured persons, (d) salvage damaged property and (e) protect the accident site.

1.0.2 Suggested Competencies

A. Cognitive Domain (Knowledge)

1. Demonstrates familiarity with a variety of methods and techniques for determining safety needs and problems.
2. Identifies the significant present and emerging safety related problems and issues in the school, the community, and society at large.
3. Exhibits a knowledge of the influences of political, social, and economic factors on the safety of individuals.
4. Exhibits a knowledge of the problems facing people in living safely and demonstrates ability to aid in the solution of these problems.
5. Interprets legislation relating to safety programs.
6. Identifies information, services and other resources for safety programs.
7. Describes the relationship of the biological, social and behavioral sciences to the causes, prevention and/or solution of problems of safe living.
8. Exhibits a knowledge of the various components of the school safety program as set forth by particular state governing agencies.
9. Exhibits knowledge of the impact of the emotional and physical climate of the school on the safety of students.
10. Identifies symptomatic changes in student appearance and behavior which may indicate the presence of problems that could affect safe living.
11. Demonstrates ability to use a variety of media and methods in planning and implementing safety curricula.
12. Identifies a variety of safety teaching-learning opportunities.
13. Demonstrates application of measurement and evaluation techniques to safety problems and programs.
14. Displays an understanding of both traditional and contemporary subject matter content of the safety education discipline.
15. Identifies and expands on the different areas of a total safety program.
16. Demonstrates ability to make specific application of competencies existing in the cognitive domain to the student in all aspects of school and community life.

B. Affective Domain (Emotions, feelings, attitudes)

1. Displays regard for personal and environmental safety as a state of being rather than as a subject to be taught.

2. Exhibits a sustained interest in rapidly changing scientific knowledge concerning safety.
3. Declares a commitment to continued and constant study in safety education and related fields.
4. Promotes value of the total community, in particular the home and school, having unique responsibility in matters affecting the safety of individuals.
5. Defends the value of articulating safety education at various levels among and between program offering agencies.
6. Conveys beliefs that safety is a positive force in everyday living.
7. Exhibits responsiveness to the changing patterns of behavior and their effect on safe living.
8. Subscribes to the belief that example and precept contribute to the teaching-learning process of safety.
9. Defends belief that a positive self-image contributes to safe behavior.
10. Displays a genuine interest in and enthusiasm for assignments in accident prevention and injury control.
11. Encourages others to consider career commitments in accident prevention.
12. Develops safety awareness programs through a positive rather than a negative approach.

C. Psychomotor Domain (Action)

1. Communicates effectively with the publics concerned with safety.
2. Participates actively as a member of professional organizations promoting safety.
3. Works cooperatively with other personnel in safety.
4. Demonstrates leadership in safety planning and evaluation.
5. Displays initiative in encouraging expansion of safety activities.
6. Encourages individuals to accept responsibility for their safety and the safety of others.
7. Keeps accurate records of accidents and follow-up actions.
8. Develops instructional guides, unit plans and lessons suitable for use in safety education.
9. Structures teaching-learning environments and experiences conducive to effective safety instruction.
10. Masters utilization of technological delivery systems relative to safety communication.
11. Assigns individuals to activities, particularly those with hazard potential, on the basis of health records, accident experience and other available information.

1.1 Design of Curricula

The curricula for safety education should be based on objectives reflecting the institution's conception of the educator's role, and organized to include: (a) general studies, (b) content for the specialty, (c) humanistic and behavioral studies and (d) teaching and learning theory utilizing laboratory clinical experience and practicum techniques.

1.2 General Studies Component

The general studies component of a prospective undergraduate safety program should require that a minimum of one-third of the time be devoted to the humanities and basic natural sciences.

- 1.2.1 The following areas should be included in the general studies program for safety educators: humanities, natural and behavioral sciences and social sciences. (Particular attention should be given to human psychology and sociology. Note possible examples: ergonomics, human ecology, anatomy, population biology, physiology, epidemiology.)
- 1.2.2 Competencies in the general studies program should be provided through formal courses, workshops, field experiences, and seminars.
- 1.2.3 The general studies program should meet the institution's requirements.
- 1.2.4 The level of the general studies program should be based on the individual needs of the student.
- 1.2.5 The individual needs of the student should be assessed through regular institutional evaluation instruments (tests, transcripts, interviews).
- 1.2.6 The content of the general studies component should be flexible and determined by safety education faculty cooperating with the appropriate academic departments.

1.3 Professional Studies Component

1.3.1 Content for the Teaching Specialty

Content in safety education should include the appropriate subject matter required for the initial preparation of the safety educator. Safety educators should be prepared to teach accident prevention and injury control as teachers in educational institutions or as specialists in other professional, private, and community agencies.

The safety educator should have a comprehensive body of knowledge in safety which includes the study of the content to be taught. This should include specialized study in the fundamentals of safety to create a greater public awareness of the fact that people must learn to differentiate between high-risk and low-risk action.

Content of the specialized program should include all areas of safety as reflected by the needs and demands of our society. Both foundation and application areas should be included. The foundation area includes content which emphasizes fundamentals and concepts pertinent to safety without general applications. The application area includes content which emphasizes primarily problems and issues in traditional areas. The following areas represent both traditional and contemporary thoughts.

- A. Foundation areas of Safety Education: content which emphasizes fundamentals and concepts pertinent to safety without general applications.
 1. Trends in accident prevention and control
 2. Safety analysis of human and machine tasks
 3. Hazard identification and control countermeasures
 4. Human and environmental safety factors

5. Safety legislation (standards and compliance)
6. History, philosophy, and psychology of safety
7. Legal and liability aspects of safety
8. Disaster and emergency preparedness
9. Fire protection and prevention
10. Safety Research, measurement and evaluation.

B. Application Areas of Safety Education: content which emphasizes, primarily, safety problems and issues in traditional categories (of human activities).

1. Home and family safety
2. Driver and traffic safety
3. Outdoor and recreational safety
4. Safety in aquatic pursuits
5. Safety in physical education and athletics
6. Community safety and support organizations
7. Commercialized transportation safety
9. School safety (instruction, services, environment)
10. Safety programs (organization, administration, supervision).

1.3.2 Humanistic and Behavioral Studies

An integral part of the preparation for safety education should include studies in such areas as philosophy, educational philosophy, educational sociology, foundations and problems of education and psychological concepts of human behavior.

1.3.3 Teaching and Learning Theory with Laboratory and Clinical Experiences

Professional preparation in safety education should include the systematic study of teaching and learning theory with appropriate laboratory and clinical experiences.

Some of the courses, seminars, and other experiences which may be made available are: analysis of teaching, microteaching, programmed learning, instructional strategies, theory and evaluation of safety teaching and learning, and theory and research in human learning and behavior modification.

Professional preparation in safety education should provide students with opportunities for comprehensive and varied "real-world" experiences. Most of the pre-service laboratory safety experiences should be practitioner oriented, should be under the guidance or coordination of a qualified safety teacher and/or practitioner, and should commence early in the student's program.

1.3.4 Practicum

To qualify for certification in safety education, the undergraduate candidate should have devoted a major portion of his practicum experience directly to safety teaching or extended field practice. The practicum in safety instruction should be coordinated by a qualified safety educator and/or practitioner.

Experienced field faculty should be used for assistance during this practicum.

2.0 FACULTY FOR BASIC PROGRAMS

2.1 Competence and Utilization of Faculty

There should be a full-time faculty whose major responsibility is safety instruction, research and service. Each faculty member should possess at least a master's degree and/or demonstrated professional competence. Allied and related areas should be taught by persons who meet the minimum requirements of the full-time safety faculty. Faculty should not be assigned to teach a safety subject for which they are not qualified and/or certified.

The safety faculty should have written policies outlining the means by which the effectiveness of safety instruction will be evaluated.

2.2 Faculty Involvement With Schools

Faculty members in safety should cooperate with other agencies in planning, developing and implementing elementary and secondary school and community safety programs. They should also be involved in professional safety preparation matters of concern to other teacher education institutions. A systematic procedure for identifying special needs of the schools and agencies mentioned above should be devised.

2.3 Conditions for Faculty Service

The safety faculty should be expected to actively participate in safety professional activities. Continued improvement in formal and informal safety experiences should be a condition for continued employment.

2.4 Part-time Faculty

Part-time faculty should meet the conditions of employment required of full-time faculty. Exceptions might occur when a highly specialized subject area would best be served by a part-time staff member uniquely competent in the special area even though he may not meet usual staff requirements.

Since there may be several opportunities to use part-time safety faculty, specific policies regarding minimum qualifications and load for part-time safety faculty should be formulated and utilized.

Part-time staff should be provided opportunities for comprehensive and continued involvement in the program of professional preparation.

3.0 STUDENTS IN BASIC PROGRAMS

3.1 Admission to Basic Programs

Students admitted to the professional preparation program in safety education should meet the same standards required of those entering other professional preparation programs.

3.2 Retention of Students

Students should be required to maintain a scholastic performance comparable to students in other specialized teacher education programs. Students must be able to demonstrate their ability to communicate with people of varied backgrounds. Students should be cognizant of the characteristics of hazardous environments and be able to illustrate capabilities for handling problem solving responsibilities. Dedication to the program, desire for continued education, and good physical and mental health are prerequisites for retention in the program. Appropriate criteria should be used for evaluating students' qualities.

3.3 Counseling and Advising for Students

The professional safety faculty should provide guidance and counseling to students throughout their professional preparation. Job placement possibilities, career opportunities, the role of professional organizations, and other counseling services should be an essential part of the advisement program. Adequate follow-up procedures and contact with graduates should be a part of this program.

3.4 Student Participation in Program Evaluation and Long-Range Planning

Provision should be made for student participation in professional preparation program evaluation and long-range planning.

4.0 RESOURCES AND FACILITIES FOR BASIC PROGRAMS

4.1 Library

The institutional library should be a principal information storage and retrieval center. The library holdings should be adequate to support the instruction, research and services necessary for the program. The library holdings should be sufficient in number for the students and faculty and pertinent to the types and levels of programs offered.

4.2 Materials and Instructional Media Center

Modern media and materials are essential elements in the communication systems of contemporary society. For this reason teachers should understand the technologies and possess the skills necessary to use such media and materials in their teaching. The institution should make available to students and faculty the appropriate teaching-learning materials and instructional media and prospective teachers should receive instruction in the development and use of appropriate technological delivery systems.

4.3 Physical Facilities and Other Resources

Adequate provision should be made in such specific areas as aquatics, driver education, gymnastics, industrial studies and others for the unique facilities and equipment necessary for both operational and instructional safety because of the recognized presence of greater potential hazards involved.

5.0 EVALUATION, PROGRAM REVIEW AND PLANNING

5.1 Evaluation of Graduates

The performance of the graduates should be a means of evaluating safety education preparation programs. Therefore it is important that institutions maintain liaison with graduates for that purpose.

5.2 Use of Evaluation Results to Improve Basic Programs

Student feedback collected systematically during the program and after graduation, as well as employer analysis of individual on-the-job performance, should be regularly analyzed to identify program strengths and weaknesses. The application of program evaluation findings provides for rapid growth program modification to keep current with changing conditions and needs.

5.3 Long-Range Planning

Plans for future development should be based on three general inputs: (1) feedback from students and employers; (2) research studies, including surveys and reports from periodicals and journals; and (3) exchange of information with professional colleagues and official agencies. These three sources should reveal trends and directions in safety education and provide the basis for rational long-range program planning.

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SCHOOL HEALTH EDUCATION

INTRODUCTION

This report represents the work of more than 60 health educators who participated in the School Health Division sessions of the AAHPER National Conference on Undergraduate Professional Preparation in New Orleans, January 24-27, 1973. The purpose of the Conference was to identify guidelines for undergraduate teacher preparation programs and define recommended competencies and behavioral objectives for prospective school health educators.

Several months prior to the Conference, members of the Teacher Preparation Commission of the School Health Division, AAHPER, were asked to develop pre-Conference working materials. The Commission referred to the recommendations made at the 1968 AAHPER Conference on Teacher Preparation in Health Education, reviewed the recommendations developed by the Teacher Preparation Commission between 1968 and 1972, and generally followed the statements of competencies as established by the National Council for the Accreditation of Teacher Education (NCATE). Tentative materials were distributed to prospective conferees approximately one month prior to the New Orleans Conference for their study and recommendations.

Participants in the working sessions of the Conference were professional health educators in schools, colleges and universities, in state and federal health agencies, and in nongovernmental health organizations. Five working groups were established, and each participant worked in a specific group throughout the Conference. Each group was asked to develop statements of recommended teacher competencies and behavioral objectives for a designated area of teacher preparation. Following the Conference, a draft of the statements resulting from the Conference was sent to both the conferees and professionals not attending the Conference. Their ideas were reviewed and resulted in further revisions which were incorporated into this final report.

Format of the Report

Part I of the report follows the NCATE Standards, as applied specifically to teacher preparation in health education at the undergraduate level. Part II presents an interpretation of the NCATE Standards in terms of recommended teacher competencies and suggested behavioral objectives. It should be noted that the

recommendations break with the traditional prescriptive pattern of teacher education stated in terms of credits, hours or courses. Instead its value will be found as a guide for the development of innovative teacher preparation programs concerned with competencies and specific behaviors that might be expected of students in progressing toward the attainment of the recommended competencies.

Utilization of the Report

The report may be used in a variety of ways as indicated below:

1. It may serve as a guide to colleges and universities in evaluating existing teacher education programs. Institutions may wish to pose such questions as: Are adequate opportunities being provided for our students to develop the recommended competencies? What additional competencies does our institution want to recommend? Are some areas in our teacher education program being neglected while others are overemphasized? Each institution should supplement the report's recommendations in accordance with its educational philosophy.
2. The report may serve as a guide for institutions developing professional programs in school health education. In such cases, the recommended standards should be considered as minimal, and adequate opportunities should be provided for student to develop the suggested competencies.
3. It may be utilized by state and regional accrediting agencies to evaluate teacher education programs, and for purposes of teacher certification.
4. With appropriate interpretation and individual counseling, the report may be used with students in evaluating their own professional competencies and future needs. Alternative ways of attaining competencies could be explored, and program flexibility can be demonstrated.
5. With proper guidance and counseling, the recommendations may be utilized by teacher education institutions in a follow-up of beginning teachers through the early years of classroom experience.

This report is designed to be used as a guide in competency-based programs of teacher education rather than in traditional programs of required courses or credit hours. It allows for innovative programs of professional preparation, both in respect to basic preparation and in the practicum phase of the program. A need exists, however, for continuous evaluation of all teacher preparation programs in light of changing social needs and new emphases in teacher education.

Note: In Part II, the recommended competencies in each area of preparation are indicated by the use of Arabic numerals, while specific behaviors (behavioral objectives) are indicated by lower case letters. The behavioral objectives are stated as examples, and are not intended to be all-inclusive. Any institution may supplement the lists of both competencies and behavioral objectives as it deems advisable.

Terminology

There are key terms throughout this report which have appeared both in professional literature and in common usage. While these are familiar terms, they are often perceived differently. In addition, each term acquires new and different meanings over a period of time. To clarify their intent for the reader, the following definitions are presented.

HEALTH. A state of physical, mental and social well-being and dependent upon the interaction of these dimensions — a dynamic, ever-changing state.¹

HEALTH EDUCATION. A process with intellectual, psychological and social dimensions relating to activities which increase the abilities of people to make informed decisions affecting their personal, family and community well-being. This process, based on scientific principles, facilitates learning and behavioral change in both personnel and consumers, including children and youth.²

HEALTH INSTRUCTION. The process of providing a sequence of planned and spontaneously originated learning opportunities comprising the organized aspects of health education in the school and community.²

SCHOOL HEALTH EDUCATION. The health education process associated with health activities planned and conducted under the supervision of school personnel with involvement of appropriate community health personnel and utilization of appropriate community resources.²

SCHOOL HEALTH EDUCATOR. An individual with professional preparation in health education or health science who is qualified for certification as a health teacher and for participation in the development, improvement and coordination of school and community health education programs.²

SCHOOL HEALTH PROGRAM. The composite of procedures and activities designed to protect and promote the well-being of students and school personnel. These procedures and activities include those organized in school health services, provision of a healthful environment, and health education.²

COMPETENCY. The possession of skills, knowledge and understandings to the degree they can be demonstrated. Competency statements are broad and include a performance word.³

SPECIFIC BEHAVIOR. Maximal or minimal characteristics which must be evidenced in the process or product. They are criteria used to measure the attainment of a competency, and in other cases may be referred to as performance objectives, performance indicators or behavioral objectives.³

¹ Developed by the Curriculum Commission, School Health Division, AAHPER.

² *Report of the Joint Committee on Health Education Terminology*, March 15, 1973.

³ Developed by the Teacher Preparation Commission, School Health Division, AAHPER.

PART I

RECOMMENDED STANDARDS FOR THE ACCREDITATION OF TEACHERS OF HEALTH EDUCATION

I. Basic Program in Health Education

A. Design of Curriculum

B. General Studies Component

The general studies component of the program for prospective health education teachers should require that a minimum of one-third of the time be devoted to studies in the symbolics of information, basic natural sciences and the humanities.

1. The general studies program should include: general biology, general chemistry, communication skills, sociology and human psychology.
2. Institutional patterns should provide for distribution of courses, seminars, readings, field work, etc. in the general studies.
3. The general studies program should also meet the institution's general studies requirement.
4. State and regional accreditation reports, and reports of student achievement should reflect the quality of the general studies program.
5. Institutional evaluative instruments and procedures may be used in assessing the level of the general education background of each student and programs of study individualized accordingly.
6. Content of the general studies should be determined cooperatively by the academic departmental staffs and the health education faculty.

C. Professional Studies Component

The professional studies portion of the curriculum should be devoted to the areas listed below, with the approximate percentages of time indicated:

Professional areas in health education:

Content to be taught to pupils 30%

Supplementary knowledge from the subject matter of health education
and from allied fields 20%

Humanistic and behavioral studies 10%

Teaching and learning theory with laboratory and clinical experi-
ences 30%

Electives 10%

1. Content for the teaching specialty

Two types of knowledge are required of the school health educator beyond the general studies program — knowledge presented to the student and knowledge concerned with the background for the teacher performing the task.

- a. The health education teacher should have professional preparation in the following:
- 1) Understanding of man's ecology and interaction with society. Background studies in such fields as the biological and behavioral sciences should be utilized in this area.
 - a) environmental health concerns (including air, water, and noise pollution; radiation; population dynamics)
 - 2) Understanding of health issues and health problems of the individual in society, with identification of leading health problems, and the development of knowledge and understanding in this area
 - a) emotional and social health
 - b) alcohol, tobacco and other drugs
 - c) nutrition (including knowledge of basic nutrients, wise selection and uses of foods, obesity and weight control, food faddism and controversial food topics)
 - d) communicable and noncommunicable diseases
 - 3) Human growth and development and its relationship to health; the principles of growth and development and the ability to relate these to the health instruction program
 - a) family life education (including human sexuality and the psychosocial and cultural factors promoting successful marriage and family relations)
 - b) appraisal of health status of the individual in relation to dental health, the special senses, and cardiovascular and other aspects of fitness
 - 4) evaluation of the validity and reliability of health information and resources, and the identification of emerging health problems and issues
 - a) consumer health (including intelligent selection of health products and health services, consumer protection agencies, health misconceptions and superstitions, health insurance plans and delivery systems)
 - 5) understanding of public health principles and the individual's responsibility in maintaining high level public health conditions
 - a) official, voluntary and professional health agencies and organizations; health careers
 - b) urban health problems
 - c) disease prevention and control
 - 6) an understanding of the dynamics of accidents (including the causes and prevention of accidents and

the treatment of accident victims) as well as the conditions conducive to safe living

a) emergency care, including first aid procedures

b. Supplementary knowledge from the subject matter of health education and from allied health fields will include approximately 20% of the professional studies component in related biological and behavioral sciences with implications for health education, such as:

- | | |
|---------------------------|---------------------------------|
| 1) anatomy and physiology | 4) human growth and development |
| 2) anthropology | 5) microbiology |
| 3) human ecology | 6) psychology |
| | 7) sociology |

2. Humanistic and behavioral studies

Study in the humanistic and behavioral studies component in the preparation of health educators is an integral part of the total undergraduate program. Such study includes a review of functions, concerns and problems related to the entire process of education and their significance in health education. This area also includes a review of related disciplines and their approach to meeting the problems of education.

3. Teaching and learning theory with laboratory and clinical experience

Professional preparation should provide opportunities for study in the principles and application of behavior modification and reinforcement, and in applying learning opportunities that may favorably affect health behavior. Study should include preparation in the teaching process in health education, including curriculum development and organization of health content; development and utilization of effective learning opportunities (methods, materials, techniques); and evaluation of all aspects of the teaching learning process.

Professional preparation in health education should provide opportunities for broad and varied field and clinical experiences.

4. The practicum

To be eligible for certification in health education, the individual should have devoted a substantive portion of his practicum experience directly to health instruction over an extended period of time. Supervision of the practicum should be under qualified health education personnel.

5. Organization and administration – Special responsibilities

The health educator performs other essential tasks beyond the responsibility of health instruction. These include organization and administration of the school health program and the performance of health-related services.

The health educator often coordinates and supervises the instructional part of the program, the health services performed by the

school and aspects of the program which have direct implications for health. This can be identified as the "school health program." In some cases, the health educator assists or counsels in the administration of this total program.

6. Furthermore, the health educator performs several functions in the community. These include making public relations appearances before students, teachers, administrators and parents and educating the public about health.

D. Use of Guidelines Developed by Professional Association

In developing a curriculum in health education, the institution should give consideration to the guidelines developed by the School Health Division of the American Association for Health, Physical Education, and Recreation.

E. Control of Basic Programs

The health education faculty should be represented on the administrative body which is responsible for the teacher education program within the institution.

II. Faculty

A. Competence and Utilization of Faculty

There should be a full time faculty whose major responsibility is health education. Each faculty member should have a post-master's degree and/or demonstrated scholarly competence, as well as specialization in such areas as curriculum development and administration and supervision.

B. Faculty Involvement with Schools

Members of the health education faculty should have continuous association and involvement with elementary and secondary schools and with school-related community health agencies and programs.

C. Conditions for Faculty Service

The health education faculty should be encouraged to participate in various phases of professional activities, and competency in one area should not preclude involvement in other areas.

D. Part-time Faculty

Part-time faculty members should be employed only if they meet the same academic preparation standards as the full-time faculty. The two situations which would call for part-time faculty would be in the case of need for special competence not presented on the faculty, and for additional service in an area of competence already represented on the faculty.

III. Students

A. Admission

Students admitted into the professional preparation program in health education should be expected to meet the same basic requirements as in other teacher education programs. Screening of potential candidates for the undergraduate professional program and appropriate guidance and counseling at the time of admission are considered essential.

B. Retention of students

Teachers of health must be able to handle a variety of task responsibilities in meeting the challenges of society. These responsibilities require such personal qualities as self-direction, the ability to communicate with people of varied backgrounds, optimal personal health, enthusiasm, and a concern for and acceptance of other people. Appraisal techniques should be established to evaluate students with respect to these and other pertinent qualities.

C. Counseling and Advising for Students

Students preparing to teach in this area should have the opportunity for counseling and guidance by professional health personnel throughout the undergraduate program. This service should be provided in regard to career opportunities, the role of professional organizations, and in teacher placement.

D. Student Participation in Program Evaluation and Development

Students should be given an opportunity to participate in long-range planning in teacher education programs in health education. There should also be opportunities for continuous student input concerning the effectiveness of the program and the faculty in the undergraduate professional preparation program in health education.

PART II COMPETENCIES OF THE HEALTH EDUCATOR

I. Content For the Teaching Specialty

A. Environmental Health

The prospective teacher:

1. Understands the relationships of population changes to environmental quality
 - a. Explains causes and consequences of population change and growth
 - b. Relates population problems of overcrowding to social, cultural, political, religious and economic influences
 - c. Compares social, cultural and political factors in determining population policy of different countries
 - d. Relates population problems to other environmental problems
2. Recognizes the need for individual and societal responsibility in the promotion and maintenance of environmental quality
 - a. Points out preventive and corrective measures of pollution
 - b. Lists the roles of various local, state and federal agencies and commissions combating pollution
 - c. Supports environmental quality through his own personal behavior.
3. Understands the relationship of man to his environment
 - a. Explains man's physical dependency on the environment
 - b. Identifies those psychological needs which are related to environmental quality
 - c. Identifies those human factors which affect the quality of the environment
 - d. Applies ecological principles to environmental problems
 - e. Analyzes current scientific data regarding environmental quality.

B. Mental Health

The prospective teacher:

1. Understands stress and its relationship to health
 - a. Evaluates various techniques in coping with stress
 - b. Analyzes the relationship of stress to the individual's position on the mental health continuum
 - c. Relates the effect of stress on physical health
2. Recognizes the influence of the school environment on students' mental health
 - a. Identifies aspects of the school setting which have implications for mental health
 - b. Identifies school policies and procedures which are detrimental to students' mental health
 - c. Relates the importance of maintaining flexibility in the

- school setting for meeting the needs of exceptional children
 - d. Analyzes the importance of effective communication among all members of the school community
 - 3. Understands mental health as a major aspect of total fitness
 - a. Relates the physical, mental, emotional and social aspects of health
 - b. Describes one's level of mental health as a factor in meeting personal, physiological and psychological needs
 - c. Describes the role of one's self-concept in all areas of health behavior
 - 4. Understands the scope and magnitude of the mental health field
 - a. Defends one's position regarding current issues in mental health
 - b. Identifies existing mental health programs and facilities in the community and state
 - c. Analyzes information concerning mental health and mental illness in regard to its accuracy
 - 5. Understands the various aspects of crisis situations
 - a. Describes the dynamics of suicidal behavior
 - b. Identifies sources of aid to those suffering from adjustment problems
 - c. Identifies deviations from characteristic behavior among students
 - d. Explains different types of problem behavior
 - 6. Understands the major aspects of optimal mental health
 - a. Describes the importance of effective interpersonal relationships
 - b. Explains the importance of caring for others
 - c. Justifies the importance of personal success for each individual.

C. Tobacco, Alcohol and Other Drugs

The prospective teacher:

1. Recognizes the skills necessary in working with students concerned with drug issues
 - a. Promotes an awareness and understanding in the student of his relationship to a drug-oriented society
 - b. Compares and contrasts alternatives in meeting student needs
 - c. Identifies the variables which make the use of drugs a personal experience
2. Understands the basic facts concerning drugs
 - a. Classifies common drugs into basic categories
 - b. Identifies common drugs by pharmaceutical and slang names
 - c. Identifies ways in which drugs are taken into the body
 - d. Defines basic terminology related to drug use

- e. Identifies the limitations of factual information in affecting behavior
- 3. Understands the basic uses and abuses of drugs
 - a. Identifies current functional uses of drugs in our society
 - b. Identifies some of the underlying causes of drug abuse
 - c. Compares different uses of drugs among various cultural groups
 - d. Compares different forms of drug abuse and use among various age groups
- 4. Understands current policies governing drug use
 - a. States the penalties and other provisions of local laws related to drug use
 - b. Identifies the penalties and other important aspects of federal legislation dealing with drug abuse
 - c. Defends the need for school policy governing drug use, possession or sale on campus and the teacher's role in such issues
- 5. Understands current issues in drug use and abuse
 - a. Describes some of the current controls on drug trafficking at various levels
 - b. Relates the general societal influences on the use and abuse of drugs
 - c. Describes the basic findings of major drug commission reports and research efforts
 - d. Gives examples of typical consumer drug problems related to self-medication
- 6. Recognizes drug-related community resources and their functions
 - a. Defends the importance of cooperation between the school and community agencies in drug programs
 - b. Identifies community resources in drug research
 - c. States the role of public and private health agencies that counsel and treat individuals with drug problems
 - d. Describes the role of major community health and social agencies in helping to reduce the drug problem.

D. Nutrition

The prospective teacher:

- 1. Recognizes that nutrients serve the body in a variety of ways
 - a. Identifies contributions of nutrition to the promotion and maintenance of human growth and development
 - b. Identifies the influence of age, sex, size, activity, specific conditions of growth, state of health and environmental stress as related to nutritional needs
 - c. Relates the quality, quantity and timing of nutrient intake to human health
- 2. Recognizes that nutrients are categorized according to their dietary roles
 - a. Analyzes the effects of processing, storage and preparation on food values

- b. Identifies the multiple nutrient values of food
 - c. Identifies the role of technology in modifying the nutrient content of foods
3. Recognizes that food selection is determined by a variety of factors
- a. Points out the ways in which social, psychological and economic factors may influence food choice
 - b. Analyzes the effects of caloric intake on weight control
 - c. Analyzes consumer behavior as it relates to food faddism, superstitions and misconceptions.

E. Communicable and Noncommunicable Diseases

The prospective teacher:

1. Recognizes that a disease is a harmful departure from normal body functions
 - a. Distinguishes between communicable and noncommunicable diseases
 - b. Identifies the stress factors leading to illness
 - c. Lists the signs and symptoms of major diseases
2. Identifies the various factors in the causes of disease
 - a. Lists basic principles of epidemiology
 - b. Identifies the modes of transmitting communicable diseases
 - c. Identifies variables which causes alteration in the structure and function of the body
 - d. Identifies diseases that may affect certain age, sex and genetic groups
3. Recognizes that disease affects human health to varying degrees
 - a. Describes several of the factors that influence the severity and duration of disease
 - b. Identifies natural defenses of the body
 - c. Describes major chronic health disorders and their effects on health
4. Recognizes the preventive, treatment and curative aspects of disease at all levels of responsibility
 - a. Identifies the role of appropriate health practices in delaying, minimizing the severity or preventing the occurrence of major diseases
 - b. Categorizes the role of various state, federal, local and voluntary agencies in effective disease control and prevention
 - c. Explains specific ways in which individuals may help to prevent diseases
 - d. Appraises the function of research in the control of disease
 - e. Depicts the role of the World Health Organization in the control of disease.

F. Human Sexuality

The prospective teacher:

1. Understands the total concept of human sexuality

- a. Describes the physiological, psychological and sociological bases of sexual feelings
 - b. Identifies the importance of achieving and maintaining one's sexual identity
 - c. Suggests ways of developing and maintaining meaningful sexual relationships
2. Understands the importance of sociocultural determinants of sex roles in society
 - a. Describes the forces determining traditional sex roles in society
 - b. Distinguishes between different ways of expressing one's sexuality
 - c. Describes the effect of sociocultural factors on changing sex roles
 3. Understands the distinctive nature of human sexuality as an area of study
 - a. Identifies the forces which support and inhibit change concerning sexual issues
 - b. Develops strategies for encouraging individual and community support for teaching this area
 - c. Defends the importance and basis for divergent views regarding sexual issues
 4. Understands the stages of psychosexual development
 - a. Cites examples of individual behavior and its relationship to the level of psychosexual development
 - b. Identifies alterations in behavioral patterns and their relationship to psychosexual development
 - c. Identifies the limitations in the concept of deviant behavior
 5. Understands the role of the family and the various forces acting upon it
 - a. Compares and contrasts various forms of marriage and life styles
 - b. Describes the importance of family stability as a factor affecting one's total well-being
 - c. Defends the importance of establishing roles within the family unit
 6. Displays confidence in oneself as a sexual being
 - a. Displays skills in leading discussions about sexual topics
 - b. Handles controversial issues effectively
 - c. Possesses an adequate vocabulary, understanding of proper terminology and an awareness of slang expressions in matters related to human sexuality.

G. Dental Health

The prospective teacher:

1. Understands the dental health needs of children and teenagers
 - a. Analyzes the role of diet in preventive dental health at early ages

- b. Points out esthetic aspects of dental hygiene
 - c. Gives examples of factors responsible for individual variation in dental health needs
 - d. Demonstrates skills and procedures for maintaining optimal dental health
2. Understands the relationship of dental hygiene to one's total well-being
- a. Describes the causative factors of proper and improper dental hygiene
 - b. Explains the nature and causes of major dental diseases
 - c. Predicts possible consequences of poor dental hygiene to total well-being
 - d. Contrasts the results of proper tooth cleaning with improper tooth cleaning
 - e. Demonstrates skills needed for maintaining optimal dental health
3. Recognizes the growth and developmental changes related to dental health
- a. Explains shedding and eruption of deciduous and permanent teeth
 - b. Gives examples of prenatal dental care
 - c. Identifies the major dental problems of specific age groups
4. Knows the concepts of corrective dentistry
- a. Describes oral conditions that require corrective dentistry
 - b. Identifies major dental specialties and their services
 - c. Identifies reasons for failure to seek corrective dentistry.

H. Physical Fitness

The prospective teacher:

1. Recognizes the contribution of physical fitness to one's overall well-being
- a. Identifies the role of our own labor-saving devices in affecting one's health
 - b. Evaluates concepts of fitness and their relationship to health
2. Recognizes the importance of establishing a fitness program to meet the individuals' needs
- a. Identifies major variables in considering individual fitness programs (e.g., age, general level of health)
 - b. Relates the importance of conditioning and training in physical fitness programs
 - c. Differentiates between various types of exercise programs necessary to meet each individual's needs
3. Appreciates the importance of sleep in contributing to physical fitness and health
- a. Identifies lack of sleep as an obstacle in functioning effectively
 - b. Gives examples of situations in which lack of sleep can be a hazard to self and others

- c. Identifies individual variation in sleep requirements
- d. Relates specific ways in which positive sleep habits can contribute to overall well-being.

I. Consumer Health

The prospective teacher:

1. Understands the roles of organizations and agencies in protecting the consumer of health services and products
 - a. Identifies the roles of medical and allied health professionals in consumer affairs
 - b. Compares and contrasts services of various consumer protection agencies and organizations
 - c. Identifies agencies and organizations concerned with the control of quackery
2. Understands the health implications of quackery in health services and products
 - a. Identifies characteristics of quack messages and practices
 - b. Describes the physiological, psychological, sociological and economic aspects of medical quackery
 - c. Identifies the implications of concerns such as food fads, crash diets, cosmetic quackery, etc.
 - d. Identifies fraudulent practices or products
3. Recognizes the factors involved in selecting and evaluating health services and products
 - a. Identifies criteria involved in selecting a physician, dentist and pharmacist
 - b. Lists and describes basic appeals used by the advertising industry in selling health products
 - c. Appraises health advertising messages for their scientific accuracy
 - d. Points out personality characteristics of individuals susceptible to quackery
 - e. Appraises health facilities in community in respect to scientific standards
 - f. Compares the roles of the physician, osteopath and chiropractor
 - g. Identifies the specific responsibilities of all medical specialists
4. Demonstrates knowledge of those professions, careers and occupations related to health fields
 - a. Identifies the qualifications and functions of each member of the health team. (Doctor, nurse, health educator, physical therapist, dentist, dental hygienist, public health worker, dietitian, nutritionist, pharmacist)
 - b. Compares the contributions of each health profession or occupation
 - c. Identifies specific educational requirements for each health occupation

- d. Explains reasons for the current demand for health specialists
- e. Identifies and appraises sources of information concerning various health careers
- f. Describes factors which influence supply and demand for health specialists.

J. Community Health

The prospective teacher:

1. Recognizes that community health is the responsibility of the citizenry
 - a. Identifies factors that influence people's decision making and action that affect community health
 - b. Distinguishes between health issues requiring community action and those requiring individual action
 - c. Describes the ways in which the health of the individual and the community are interrelated
 - d. Identifies ways of taking an active role in community health
2. Recognizes the role of health-related agencies in the promotion and maintenance of community health
 - a. Appraises the contributions of agencies and services concerned with the promotion and maintenance of community health
 - b. Identifies the impact of health agencies on the quality of life for the citizens in the community
 - c. Selects ways in which the school can cooperate effectively with community health agencies in meeting people's needs
3. Identifies major health problems facing the community, state, nation and world
 - a. Identifies major community health problems dealt with by all levels of government
 - b. Describes the basic principles of public health at the local, state, national and international levels
 - c. Relates basic principles of international health issues to local situations.

K. Accident Prevention

The prospective teacher:

1. Understands the conditions conducive to a safe environment
 - a. Identifies hazards of the total environment (home, school, traffic, occupational, recreational)
 - b. Evaluates the safety aspects of the school environment
 - c. Identifies factors affecting the degree of safety in human activity
 - d. Analyzes methods of promoting and maintaining a safe environment
2. Comprehends the psychological and sociological factors in accidents

- a. Distinguishes safety consciousness from accident-prone behavior
 - b. Infers from statistical data the frequency of accidents in specified age groups
 - c. Appraises stress as a factor in accident causation
 - d. Identifies emotional, psychological and social factors in contributing to accidents
3. Understands the concepts of first aid and emergency medical care
 - a. Identifies the essential components of a minimum emergency care program for home, school and community
 - b. Justifies the rationale for his choice of an emergency care program for the home, school and community
 - c. Demonstrates proper first aid and emergency medical care procedures in cases of injury or illness
 - d. Justifies the need for accident reporting procedures in the school
 - e. Records results of emergency care correctly
 4. Is aware of the natural and man-made laws relative to safe living in a technical and complex society
 - a. Defends the importance of developing proper attitudes in relation to safe living (drinking and driving, recreational activities, etc.)
 - b. Analyzes the importance for a democratic society to develop laws to promote safe behavior of its members
 - c. Identifies the effects of the laws of nature on man and his environment (gravity, friction, centrifugal force, force of impact)
 - d. Describes factors in the external environment which influence the accident situation.

L. Philosophy of Health and Health Education

The prospective teacher:

1. Understands theories of health and health education
 - a. Analyzes definitions of health and their meaning
 - b. Evaluates philosophical approaches to health education
 - c. Describes the rationale behind different concepts of health education
 - d. Analyzes the strengths and weaknesses of different concepts of health and health education
2. Recognizes the need for a working definition of health and health education
 - a. Demonstrates in his regular daily activity a working concept of health and health education
 - b. Identifies factors which contribute to the formation of health and health education concepts
 - c. Identifies the value of a conscious awareness of health and health education in enabling one to become an effective teacher of health.

II. Contributions to the Subject Matter of Health Education from Allied Fields

Health education is an applied discipline, drawing heavily from the biological and natural sciences for its content, and from the behavioral sciences for its methodology. A broad base of learning experiences in these areas is considered essential in preparing the health educator.

A. The Prospective Teacher:

1. Recognizes health education as a professional field from numerous disciplines
 - a. Recognizes the relationship of allied fields of health education
2. Identifies specific contributions of the biological and behavioral sciences to health education
 - a. Illustrates the unique contribution of health education as a professional field
 - b. Exhibits intellectual curiosity in fields related to health education
3. Understands the significance of man's relationship with his environment
 - a. Identifies current issues in urban and rural environment
 - b. Cites examples of man's use and misuse of the environment
 - c. Studies a local health problem, and relates the contributions of allied fields in meeting the problem
4. Recognizes the impact of political, psychological, sociological and economic factors on human health
 - a. Identifies the health needs and programs at local, national and international levels
 - b. Identifies local, industrial and environmental health problems and recommends appropriate remedial action
 - c. Formulates a plan including political, psychological, sociological and economic factors in combating a health problem
5. Understands the physical, social and psychological stages of human growth and development
 - a. Identifies theories of growth and development from conception through death
 - b. Distinguishes between physical, social and psychological stages of human growth and development
 - c. Illustrates factors that affect the sequence of mental and physical growth and development
 - d. Identifies the interrelatedness among physical, emotional and social dimensions of growing and developing
 - e. Perceives the differential health needs which are a direct result of maturity, growth and development

III. Teaching and Learning Theory with Laboratory and Clinical Experience

A. Curriculum Development and Organization of Health Content

As used in this section, the term *curriculum* focuses on the instructional

teaching-learning facets of education for health. It is not intended to encompass the total school experiences that may have implications for health, both planned and unplanned. It is intended to give direction to the many curricular aspects that are involved with developing, planning and processing the experiences within the framework of health instruction. Health instruction is an integral component of the total school curriculum.

The prospective teacher:

1. Understands that a philosophical foundation is a vital part of curriculum development
 - a. Is familiar with the concepts inherent in various philosophies of education
 - b. Selects and applies philosophical concepts in health curriculum development
2. Understands that curriculum development is a dynamic, ongoing process
 - a. Considers social change and student needs and interests as influences in curriculum development
 - b. Incorporates recognized innovative and creative ideas of design into existing curricula
 - c. Justifies the need for periodic evaluation and restructuring of the curriculum
 - d. Identifies community members and their roles as potential resources to assist in planning for curriculum change
3. Values the comprehensive, sequential approach to curriculum design rather than the crisis-oriented approach
 - a. Organizes the health curriculum in a sequential manner with an awareness of the importance of scope and continuity of content
 - b. Identifies direct teaching, integrated and correlated instruction and team teaching
 - c. Evaluates crisis-type problems and crash programs and decides which may become curriculum entities, thus indicating their relation to the comprehensive approach
 - d. Provides curricular flexibility to allow for the inclusion of past, current and future health topics
 - e. Demonstrates a flexible concept of health by applying it to relevant human concerns and by interpreting health issues within the context of general cultural values and beliefs and individual life styles
4. Is aware of curricular patterns and trends as they relate to education for health
 - a. Reviews new curriculum patterns in an effort to distinguish fad from innovation in curriculum design
 - b. Identifies direct teaching, integrated and correlated instruction and team teaching
5. Develops health content into a meaningful course of study

- a. Integrates content areas with common conceptual threads as they focus on the central problems of the life cycle of man
- b. Incorporates students' needs and interests as well as health problems of society into the existing curriculum
- c. Relates health instruction in the school to health practices of the individual
- d. Utilizes health resources at local, state and national levels in developing curriculum
- e. Localizes and personalizes health content specifics.

B. Development and Utilization of Effective Learning Opportunities

Effectiveness in health instruction is determined to a large extent by the selection, development and application of appropriate teaching methods and materials. For achievement of maximum efficiency, the teacher of health education, therefore, should have the competencies to construct, select and effectively use a variety of methods and techniques conducive to the learner's development. This implies a thorough understanding of theories of learning, behavior and communication.

The prospective teacher:

1. Understands modern theories of learning as applicable to health instruction
 - a. Applies currently accepted educational theories which relate to health teaching
 - b. Adapts learning theory models to classroom situations
 - c. Justifies the use of a given learning theory in health education
2. Understands selected theories of behavior and behavior changes as applied to health instruction
 - a. Demonstrates techniques of classroom management
 - b. Illustrates the application of motivational theory to health instruction
3. Perceives the necessity for communication skills
 - a. Demonstrates the ability to communicate
 - b. Interprets verbal and nonverbal areas which could create or enhance channels of communication
 - c. Uses the principles of group dynamics
4. Recognizes the importance of using teaching methods appropriate to the situation
 - a. Illustrates strengths and weakness of various methods
 - b. Demonstrates the use of a variety of methods such as role playing, etc.
 - c. Illustrates the relationship between teacher personality characteristics and the selection of method
 - d. Evaluates the effects of specific teaching methods
5. Recognizes the importance of selecting teaching techniques appropriate to the learner

- a. Demonstrates the ability to establish "learning stations" appropriate to the individual learner
 - b. Relates the selection of techniques to social, cultural and ability factors
6. Is familiar with the use of various media in health instruction
- a. Selects media appropriate for the learner and the situation
 - b. Demonstrates ability to incorporate use of media in lesson planning
 - c. Demonstrates the ability to use audiovisual equipment
7. Is aware of the use of unstructured learning opportunities ("teachable moments") that utilize daily life situations
- a. Identifies teachable moments
 - b. Uses opportunities for making learning relevant
 - c. Organizes teaching-learning experiences in such a way as to meet day-to-day performance tasks
8. Understands the principles of selection and uses of a variety of additional materials
- a. Identifies various sources of printed materials
 - b. Evaluates and selects materials appropriate to the learner
 - c. Discriminates between educational and noneducational material.

C. Evaluation of All Aspects of the Teaching-Learning Process

The teacher of health education should have the ability to select and develop appropriate techniques and devices for (a) determining health needs and interests, (b) evaluating student progress and (c) appraising the success of the total school health program. Furthermore, the teacher should be able to conduct classroom research projects and know how to interpret and use the results of health-related research.

The prospective teacher:

- 1. Understands the importance of using a variety of valid and reliable techniques to determine health needs and interests through the school health program
 - a. Describes the rationale for typical evaluative procedures used in various aspects of the school health program
 - b. Demonstrates ability to use diverse evaluative techniques in the school health program
 - c. Identifies the place of students' needs and interests in program planning
- 2. Understands the importance of using valid formal and informal methods to evaluate student progress
 - a. Constructs and uses instruments to measure student comprehension of content
 - b. Identifies a variety of standardized measurement instruments
 - c. Differentiates outcomes of instruction which are measurable
- 3. Understands the importance of using various local, state and national guidelines to evaluate the school health program

- a. Evaluates a local school health program using criteria accepted locally, at the state level or nationally
- b. Identifies a variety of school health program evaluation tools
- c. Adapts a school health program evaluation checklist and/or rating scale which would be applicable to a local situation
- 4. Understands the importance of interpretation, utilization and follow-up of the results of evaluation procedures
 - a. Describes and interprets the results of screening devices
 - b. Uses results of evaluation of classroom instruction in program modification
 - c. Reviews results of measurement with students
 - d. Recommends changes in the classroom environment on the basis of evaluation results
- 5. Understands the relationships of research and evaluation
 - a. Identifies methods used in data gathering and research reporting
 - b. Illustrates use of research data in evaluating and planning all aspects of the school health program
 - c. Reviews research literature
 - d. Demonstrates ability to use diverse research tools in planning
- 6. Recognizes evaluation as an ongoing process in determining teaching effectiveness
 - a. Identifies methods of teacher self-evaluation
 - b. Cooperates with others in the preparation and use of a variety of instruments for the evaluation of teaching effectiveness
 - c. Justifies the need for evaluation of the effectiveness of diverse teaching tasks and characteristics.

IV. The Practicum

The practicum in a professional preparation program should provide many opportunities for the professional student to work with individuals and groups in a variety of settings. Opportunities should include observation and/or participation in health-related activities in the school and community in addition to supervised student teaching.

A. The Prospective Teacher:

- 1. Understands the importance of possessing a variety of teaching skills
 - a. Selects objectives, content, methods and evaluation techniques according to the specific characteristics of each situation
 - b. Demonstrates skill in the use of classroom simulation
 - c. Designs relevant and comprehensive resource units
- 2. Recognizes opportunities for a variety of health-related experiences in the school and community

- a. Identifies health education role and responsibility of various community agencies
- b. Participates as a volunteer in one or more community health projects
- c. Participates in diverse field experiences in the school setting
- 3. Understands the value of communication skills in teaching
 - a. Uses verbal and nonverbal communication skills in different teaching situations
 - b. Distinguishes cultural variations in language
 - c. Demonstrates ability to lead discussions
 - d. Clarifies student responses in teaching situations
 - e. Develops well-organized classroom presentations
- 4. Recognizes the opportunities and limitations of various learning environments
 - a. Compares traditional classroom with open classroom
 - b. Demonstrates ways to modify the teacher-learner environment
 - c. Utilizes small group-work in teaching
 - d. Prepares independent studies for students
- 5. Uses community agencies for learning experiences
 - a. Justifies use of field trips in teaching
 - b. Plans a field trip to a community agency
 - c. Identifies various potential community resources
- 6. Understands the importance of valuing, problem-solving and decision-making skills
 - a. Clarifies own values with regard to health issues without imposing them on others
 - b. Designs and conducts classroom activities which give students opportunities to develop and examine various ways of handling health issues.

V. Organization and Administration – Special Responsibilities

- A. The Health Educator Should Possess These Competencies:
 - 1. Understands general administrative components of the school health program
 - a. Describes the general principles of budget procedures in school health programs
 - b. Assists in preparing an annual budget for a school health program
 - c. Identifies various scheduling patterns for health education
 - d. Identifies various equipment and facilities that contribute to the school health program
 - e. Recognizes the structure and function of a school health council in relation to school health
 - 2. Is aware of local, state and federal legislation as it relates to school health programs
 - a. Recognizes state and federal legislation relating to the school health program, including an awareness of excep-

- tions based on religious convictions
 - b. Explains local policies influencing the school health program in a given community
- 3. Recognizes the roles and responsibilities of the faculty, noncertified personnel, administration, student body and school board in the school health program
 - a. Describes the respective roles and responsibilities of each group (flow chart)
 - b. Compares and contrasts the unique roles and responsibilities of each of the above groups
- 4. Perceives his leadership role in the establishment and maintenance of a healthful school environment
 - a. Summarizes the major points relative to resources and standards concerning physical plant requirements
 - b. Identifies and relates the human and material factors contributing to a healthful school environment
- 5. Understands the general functions and goals of various community health organizations and agencies as related to the school
 - a. Identifies health agencies and other health-related agencies and organizations
 - b. Justifies using the services of official and nonofficial community health and health-related agencies and organizations
- 6. Understands the importance of classroom management in the successful performance of his duties
 - a. Relates students' classroom behavior to their level of growth and development
 - b. Identifies discipline as a desirable aspect of the teaching-learning process.
 - c. Applies discipline with full cognizance to its usefulness and limitations.

VI. Public Relations

- A. The Prospective Teacher:
 - 1. Communicates effectively with various segments of the population
 - a. Identifies the skills necessary for effective public speaking
 - b. Employs public speaking skills
 - c. Demonstrates a willingness to participate as a speaker in situations outside the classroom
 - d. Demonstrates skill in two-way communication when interacting with the public
 - 2. Employs a variety of media to inform the public about the school health program, particularly school health instruction
 - a. Describes the uses and limitations of the media as a public relations tool
 - b. Identifies topics of interest for specific publics

- c. Develops interesting and informative news releases for the media
 - d. Identifies the potential effect of media coverage on the school health program
3. Recognizes the public's needs and interests in matters related to health
- a. Visits community health organizations to participate and demonstrate an interest in community action
 - b. Surveys and synthesizes the needs and interests of a specific interest group
 - c. Participates in community efforts to meet the needs and interests of a specific interest group and the general public
 - d. Participates in community organizations and functions as a means of identifying public needs and interests
 - e. Evaluates the results of research investigations for interpretation and use with specific interest groups
 - f. Participates in projects which make available to the public and specific interest groups the most recent health information.

VII. Personal Qualifications of the Health Teacher

The prospective teacher of health should possess personal qualities that will influence students to develop positive health attitudes and behavior. Screening of potential candidates at the time of admission to the undergraduate professional program and appropriate guidance and counseling throughout the program are essential.

A. The Prospective Teacher:

- 1. Regards health as a quality of life
 - a. Describes the quality of life in terms of optimal emotional, social and physical well-being
 - b. Measures health on a continuum, the levels of which are determined by hereditary, environmental, cultural, social, economic and political variables
 - c. Strives continuously to improve as well as adapt to changing factors
 - d. Values good health in self and others
- 2. Realizes that maintaining competence in health education is a continuous process
 - a. Utilizes all opportunities to enrich educational and social growth
 - b. Becomes involved in organizations as a participant and/or resource person
 - c. Evaluates new ideas and information
 - d. Exhibits a willingness to share information and ideas with professional peers and others
- 3. Exhibits enthusiasm for teaching

- a. Demonstrates a sincere excitement for teaching
- b. Facilitates motivation to learn
- c. Accepts the responsibility and develops the capacity to nurture creativity in students
4. Strives continually to attain and maintain a positive self-image
 - a. Identifies and accepts one's own strengths and weaknesses
 - b. Demonstrates ability to accept and cope with social, mental and physical problems
5. Demonstrates a concern for and acceptance of people
 - a. Exhibits concern for people through empathy
 - b. Demonstrates concern and acceptance by "active listening"
 - c. Uses appropriate guidance techniques
 - d. Identifies the source of a problem before attempting a solution
 - e. Demonstrates a nonjudgmental attitude
 - f. Accepts different individuals and life styles
6. Possesses communication skills which are effective in working with individuals and/or groups
 - a. Identifies and demonstrates skills involved in individual and group processes
 - b. Evidences sensitivity toward others
 - c. Utilizes inquiry as a means of gathering information
 - d. Identifies and demonstrates skills in verbal and nonverbal communication
 - e. Demonstrates two-way communication skills
7. Recognizes the importance of value clarification as a learning experience and its implications to health
 - a. Demonstrates knowledge of man's process for developing self-worth
 - b. Demonstrates knowledge of moral and ethical values
 - c. Formulates a personal philosophy of life
 - d. Accepts diverse life styles and abilities
 - e. Is confident about professional relationships
 - f. Believes in human worth and dignity
 - g. Recognizes personal and student value systems
 - h. Exemplifies the qualities of a discriminating person
8. Possesses skill and knowledge necessary to make decisions
 - a. Knows how to use the scientific process to solve problems
 - b. Interprets the results of evaluative process as they relate to the individual
 - c. Views self as an influence in students' decision-making processes
 - d. Demonstrates skill in resolving crisis situations in the classroom and school
 - e. Realizes how the clarification of one's values may influence decision making.

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