

# MONOGRAPH 14

Supervision of Health and  
Physical Education as a Function  
of State Departments  
of Education

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## Foreword

When, by the tenth amendment of the Federal Constitution, there were left to each State of the Union the right and the responsibility to organize its educational system as it saw fit, the way was opened for establishing the beginnings of State policy with reference to public education. Moreover, the grants of land made for educational purposes and the creation of school funds, in the use of which local districts shared, brought early into the educational picture some form of State regulation. The receipt of aid from the State was accompanied by the necessity of making reports to the State, and this in turn evolved into compliance with other State demands as well. As a result, State officials were appointed to receive reports from the school corporations and to deal with them in matters relating to the apportionment of funds and other items of State policy.

The early duties of the officers thus appointed were largely clerical, statistical, and advisory with reference to the application of the State school law. But out of them grew the comprehensive structure of the modern State education department, with its chief State school officer acting in many cases as executive officer of the State board of education. Today myriad responsibilities of administrative, supervisory, and advisory services replace the original simple functions of tabulation of records and management of funds. State educational administration has become a challenging opportunity for exercising constructive leadership in the State's educational affairs.

Because of the individual authority of each State for its own educational program, practices and policies differ widely among them in many respects. Yet in the midst of differences there are also common elements of development. The United States Office of Education, in presenting this series of monographs, has attempted to point out those common elements, to analyze the differences, and to present significant factors in State educational structure. In so doing, it accedes to the requests of a large number of correspondents who are students of State school administration and who have experienced the need for the type of material offered in this series.

The sources of information have taken the form of both documentary evidence and personal interviews. During the year 1939, more than 20 representatives of the Office of Education were engaged in visiting State education departments throughout the country, conferring in each case with the chief State school officer and his assistants. Working in "teams" of from two to seven persons, they spent several days in the State offices of the respective States, seeking accurate and comprehensive data, gathering all available printed or mimeographed documents, and securing from each member of the department who

was available an oral statement of his duties, activities, and problems. Preceding this program of visitation and again preceding the compilation of reports, committees of chief State school officers met in Washington with members of the Office of Education staff, to assist in the drafting of plans, and later in the formulation of conclusions. No effort was spared, either at the time of the visits or in studying and checking data subsequent thereto, to make of the final report for each State a reliable document.

The topics considered in the series include problems of administrative organization and relationships, financial control and assistance, legislative and regulatory standards, and various types of supervisory services. Each has been studied from the point of view of past developments and of organization existing at the time of the visit to the State. For some fields of activity a State-by-State description is given of policies, problems, and practices. For some, selected States are used as examples, with a summary of significant developments and trends in all States. The total series, it is hoped, will prove to be a helpful group of publications relating to the organization and functions of State education departments and of the boards of education to which they are related.

The material included in the present monograph deals with developments of State educational administration and supervision in the various phases of health work and physical education. Interest in such fields began a century ago but it has been stimulated to activity under special personnel within the past 25 years.

In the following pages the history of such supervision is traced, its statutory background is sketched, and details concerning the methods now in use are described.

To the chief State school officers, to members of their respective staffs, and to other State officials who have assisted in furnishing data for this series of monographs, the United States Office of Education expresses its deepest appreciation. Without their wholehearted cooperation the publication of the series could not have been realized. The entire project is an example of coordinated action, both on the part of Office of Education staff members who have participated in it and on the part of State officials who gave so generously of their time and effort to supply the needed information and materials.

BESS GOODYKOONTZ,  
*Assistant U. S. Commissioner of Education.*

# Supervision of Health and Physical Education as a Function of State Departments of Education

## Introduction

FROM THEIR beginnings our State boards or departments of education have been more or less interested in the physical well-being of children in their charge. Their early publications contain reports from school visitors or deputy (county) superintendents with regard to sanitary provisions, or lack of provisions, and the comments of the chief school officer on such reports seem sufficiently caustic to stimulate improvement of existing conditions so far as words could accomplish such results.

Massachusetts, under the leadership of Horace Mann, went much further in this field. For Mann, "the study of human physiology—by which I mean both the laws of life and hygiene or the rules and observances by which health can be preserved and promoted" deserved a place in the curriculum and a place of "first rank after the elementary branches." He declared that "no person is qualified to have the care of children for a single day who is ignorant of the leading principles of physiology" and he saw to it that this subject received due recognition in the first State training school for teachers set up over a hundred years ago. Horace Mann was, then, the first, if undifferentiated, State supervisor of physical education, using the term in its broad Spencian meaning. A more fervent or learned evangel in the realm of school hygiene has not since appeared, and in no subsequent publications of State superintendents have two-thirds of their pages been devoted to such matters as was the case in the *Sixth Annual Report of the Massachusetts Board of Education*; that for 1843.

Chief school officers in other States were not silent on these subjects and in scanning their reports one often comes upon recommendations concerning the maintenance of healthful conditions in schools, instruction in hygiene, and provision for physical activities. In the schools themselves the growth of interest was steady and, in some instances, became so ascendant as to influence the lawmakers to inscribe a permissive, or a prescribed, policy in the statutes. A notable example was the simple but comprehensive law passed in California in 1866 which reads—

Instruction shall be given in all grades of schools, and in all classes, during the entire school course, in manners and morals, and the laws of health; and due attention shall be given to such physical exercises for the pupils as may be conducive to health and vigor of body, as well as mind; and to the ventilation and temperature of school rooms. (*Rev. school law. Approved Mar. 24, 1866, sec. 55.*)

The wave of legislation for instruction concerning the effects of alcohol and narcotics which began about 1880, carried physiology and hygiene, as the basis for such instruction, into the curriculum of every law-abiding school in the country but only a general responsibility for that abidance was laid upon the shoulders of the State officials.

In 1899 the lawmakers of Connecticut decreed that the teachers should examine the vision of their pupils every year and the State superintendent was required to furnish the needed equipment and instructions for making such tests. In 1913 the Legislature of New York made it mandatory that all school children should have a medical examination annually and the Commissioner of Education was empowered to appoint a State medical inspector to supervise this work. A second national and double-crested wave of legislation which derived impetus from the World War has made physical education (in either its restricted or inclusive meaning) compulsory in the schools of three-fourths of our States and has required or permitted the physical examination of children in an even larger number.

Some of these legal statements of educational policy required the production by the State department of courses of study in physical education and often in health instruction and supervision, and a few of them demanded the appointment of a special supervisor in these fields. The first of the new officials was appointed by New York in 1916 and, at the present time, half the States have one or more such agents. Because a State has a law requiring a supervisor does not however signify that such an officer is employed, nor do all States having directors of health education or physical education have special legislation in this field. Thirty-two of the forty-one laws concerning the physical examination of pupils places some responsibility on a State department. In 12 States this is the Department of Education and in 9 others that department shares such duties with the Department of Health.

This second wave of lawmaking reached its height in 1919 and is not yet quite spent. Minor swells in more recent years have been the results of the repeal of prohibition, the speeding of automobiles, and the consolidation of schools. There has been revision of laws concerning instruction in the effects of alcohol and new legislation in the realms of safety education and of school transportation. These statutes have laid additional obligations upon the commissioners of education in many of our States.

In the California law mentioned above, there was specific mention of a certain phase of school sanitation. The construction or reconstruction of school buildings involves the furnishing of an equipment which makes healthful conditions possible and many State departments are actively responsible in this field (see A study of school building work in State departments of education) but, given a satis-

factory plant, its daily management becomes a most important measure for health and safety for<sup>1</sup> which janitors and teachers are responsible and for which function they are not always prepared. Supervision in this field is far from lacking in some States through the periodic inspections required to be made by school physicians and the growing interest of departments in the adequate instruction of teachers, and especially in the training of janitors. The janitor is not born, or is not now born, with adequate knowledge of hygiene nor of the economical management of the complicated machinery of the present-day school. A number of States have recently been promoting the training of custodians<sup>1</sup> notably the School Commission of North Carolina which has established its own training centers for janitors in service. In a dozen other States training courses have been arranged through the State boards of vocational education.

Whether or not required by the laws previously mentioned, at least 45 States have, in the past few years, produced courses of study in health instruction, of various degrees of detail for elementary schools, and with suggestions as to time and methods of teaching. A few States without supervisors have published syllabi in physical education. In compliance with the laws concerning medical inspection, or health examination, some States have prepared forms and instructions for physicians or teachers. It is, however, with States which have shown a sufficient interest to employ one or more special agents in health instruction, physical education, and allied fields, that we expect and find more active efforts to make practice keep pace with knowledge. Of these States, a few have but recently added such persons to their staffs and we cannot expect more than a beginning in their activities.

Down through the years there has been much change and consequent confusion of terms, which confusion has been a serious hindrance to appreciation and progress along the lines we are considering. At the present time, however, the verbal atmosphere is becoming less murky and we have the fairly well-defined phases of: (a) Safety supervision in school and of transportation; (b) health supervision or sanitation, aimed at the maintenance of a healthful environment; (c) health instruction, which needs no explanation and which interlocks with (d) safety instruction or education; (e) health examination or medical inspection; (f) physical education or instruction in and management of activities of the playground and gymnasium; (g) recreation, which is an outcome of physical education; (h) interscholastic athletics, also intimately linked with physical education, except that it is a wayward child of which physical education is sometimes a little ashamed, and which is managed by a powerful organization usually independent of the State department of education. There is also the

<sup>1</sup> U. S. Department of the Interior, Office of Education. The school custodian. By James Frederick Rogers. Washington, U. S. Government Printing Office, 1928. (Bulletin 1928, No. 2).

very important matter of the healthful and educative management of the (i) school lunch, with which some State departments are concerned. (What the term "health education" may mean depends on the user. He may include even the teaching of physical activities, but specifically it refers to health instruction.) All of these phases of activity are important and they are all interrelated.

The addition of directors of "physical education" or of "health and physical education" or "physical and health education" has largely been the result of laws primarily directed at the provision for, and instruction in, physical activities. Had such supervisors been added 50 years ago it would have been expected that their efforts would be aimed chiefly toward the promotion of the teaching of physiology and hygiene and the effects of alcohol. Naturally, the supervisors chosen have nearly all been primarily interested and trained in physical education and their efforts have been directed especially to the promotion of work in this field. This fact accounts largely for recent developments in the State departments of health, mention of which will be made later and it also explains why the State supervisors do not always receive the credit which may be due them for work in the fields of health supervision, health examination, and health instruction.

## Alabama

### Historical Development and Legislation

In 1919 it was decreed by the legislature of Alabama that a division of physical and health education should be established in the department of education. The law reads:

This division of physical and health education, subject to the approval of the State superintendent of education, shall outline a course of physical training for the various schools of the State. It shall collect and disseminate useful data on the health of school children, and shall devise ways and means of coordinating the work of health education of the Department of Education, and of the country and city boards of education with the work of the State Board of Health and with the health authorities in counties and cities. (*Code of 1927, sec. 20.*)

From the School Code of 1927 we learn that "in every elementary school in the State there shall be taught" among other things "hygiene and sanitation and physical training," (*Sec. 431*) and—

... every public school and private or parochial school shall carry out a system of physical education the character of which shall conform to the program or course outlined by the State department of education. (*621*)

In cooperation with other authorized agencies, the State superintendent of education shall prepare or cause to be prepared and submit for approval and adoption by the State Board of Education, rules and regulations for the protection of the health, physical welfare, and physical inspection of the school children of the State. (*77*)

## STATE OF ALABAMA

STATE BOARD OF HEALTH  
STATE HEALTH OFFICERSTATE BOARD OF EDUCATION  
STATE SUPERINTENDENT

## DIVISIONS OF THE STATE DEPARTMENT OF EDUCATION

DIVISION OF ADMINISTRATION  
AND FINANCE

DIVISION OF INSTRUCTION

DIVISION OF VOCATIONAL  
EDUCATIONDIVISION OF NEGRO  
EDUCATIONTEACHER  
CERTIFICATIONTEACHER  
PLACEMENTPHYSICAL AND HEALTH  
EDUCATIONELEMENTARY  
EDUCATIONSECONDARY  
EDUCATIONPUBLIC SCHOOL  
LIBRARIESTEACHER TRAINING  
INSTITUTIONS67 COUNTY BOARDS OF EDUCATION  
45 CITY BOARDS OF EDUCATION67 COUNTY SUPTS. OF EDUCATION  
45 CITY SUPTS. OF EDUCATION

COLORED

3 Four Year Colleges  
4 Two Year Colleges

WHITE

1 University  
7 Colleges  
4 Teachers Colleges  
1 Normal SchoolSUPERVISORS--TEACHERS  
ELEMENTARY SCHOOLSW. 33 County 11 City N. 33 County 1 City  
W. 1449 N. 650 Elem. School Prin.  
W. 8556 N. 3927 Elem. School Teachers  
W. 314,176 N. 197,764 Elem. School PupilsSUPERVISORS--TEACHERS  
SECONDARY SCHOOLS2 City W. supervisors P. & H. E.  
W. 400 N. 117 Jr. & Sr. H. S. Principals  
W. 4492 N. 710 Jr. & Sr. H. S. Teachers  
W. 128,176 N. 26,376 High School pupils

ALLIED ORGANIZATIONS

Alabama H. S. Athletic Ass'n  
Alabama Physical Education Ass'n  
Alabama Congress of P. T. A.  
Recreational Centers  
American Legion  
Scouts (Boys & Girls)  
Y. W. C. A. & Y. M. C. A.'s  
Professional Clubs  
W. P. A.  
Safety Councils2 State Supervisors  
57 County Boards of Health with  
a Health Officer and Nurse  
57 County Health Units

Chart I

The State department of education and the State board of health shall in conjunction arrange for the examination of each and every child attending the public schools of this State, both male and female, for any physical defects of any kind embracing mental deficiency; . . . and any disease requiring medical or surgical aid in developing the child into a strong and healthy individual. The several county boards of education and county board of health shall cooperate fully with the State board of education and the State board of health in the promotion of this work. The County superintendent of education shall arrange with the county health officer a schedule of dates for this examination of the children in the public schools under his supervision and the city superintendent of schools shall make like schedule for the schools under his supervision. (619)

Each and every child shall be examined before October first in each and every year by the county health officer, and the State superintendent of education shall have blanks printed to be furnished by the county superintendent of education to the various school districts. The county health officer of each county shall make such physical examinations of the school children and he shall secure such assistance from the county board of health as is necessary. All examinations held under this article shall be without charge to the child or its parents. (620)

### Organization

In conformity with the law, a division of physical and health education was established in the State department and a director appointed in 1920. In 1927 a supervisor was employed, the person who now directs the work in this field. In 1935 this service became a part of the newly organized division of instruction in which the supervisor works. From the legal statements quoted above, it is the duty of this official to indicate what shall be done in public, private, and parochial schools of elementary and secondary grade in the way of instruction in physical and health education; to promote the physical examination of school children by the delegated authorities, and to issue rules and regulations with reference to the safe and sanitary management of schools.

The supervisor has, as cooperating officials, the school administrators, the county supervisors of elementary education, the public welfare agents, the county health officers and nurses, and the home and farm demonstration agents. Other related organizations will be found listed in chart I. This chart also shows the various relationships of the supervisor to the whole educational organization within and without the State department.

### Objectives and Activities

(a) *Accomplishments.*—The supervisor has published a course of study on *Physical and Health Education for Grades One through Six*, a course of study on *Health and Physical Education for Junior and Senior High School Girls*, with a *Point System of Awards to Junior and Senior High School Girls in Physical Education*, and a *Manual of Materials and Methods for Teachers of Physical and Health Education Point*

*Program for High School Boys*, dealing chiefly with physical education achievements.

Since the work of the supervisor covers much more than instruction in physical activities and hygiene, we find a section of the first publication mentioned above, devoted to the school health service with an explanation of its purpose and of the role of the teacher in connection with health examinations. Health supervision (sanitation) is covered in detail; instruction in safety and in first aid are sketched; and the hygiene of instruction is included. The course concerned with high-school girls contains a self-survey of school conditions.

In the course in physical education, some space is given to the promotion and management of play days which have long been a feature in the schools of Alabama.

The State Department has made certification requirements of whole-time and part-time teachers of health and physical education and of coaches of athletics. A schedule for physical activities and for health instruction is set up; textbooks are adopted and others suggested; constant attention is given to improving libraries in the field. As a stimulus to high schools, standards for credit in health and physical education by junior and senior high schools are established and these include all phases of these subjects as presented in the course of study.

The supervisor spends approximately 60 percent of her time in visits to schools, where under the direction of superintendents, at the request of principals, or on her own initiative, she consults with superintendents, principals, supervisors, special teachers, and public health officials. Assistance is given for improving the program through demonstrations, conferences (both State and local), and general training in service. Fifteen percent of her time is spent in advising with the administrators and teaching personnel of teacher-training institutions in pre-service training. Fifteen percent is spent in the office, where besides attending to correspondence, she works as chairman of committees which prepare or revise the State courses of study and the teacher-training curricula, and carries on a steady, constructive program of interpretation of current educational practices. The best possible integration and coordination of subjects and of personnel in each school and community is sought for the greatest good to the greatest number. The remaining 10 percent of her time is spent at summer schools, in attending conference, preparing articles and addresses for professional groups and magazines, within and without the State, and in the study of professional literature.

(b) *Limitations*.—The chief difficulties encountered by the supervisor in her efforts to promote an extensive program are (1) a limited personnel, both professional and clerical, in the State department; (2) lack of professionally trained leadership and adequate facilities in the schools; (3) lack of facilities for a year-round program in physical

education and recreation; and (4) lack of understanding by professional and lay groups of the importance of activities for all, rather than athletic exhibitions in which but a few are participants.

### Relationships With Other State Organizations

There is joint responsibility between the State departments of education and of health in "arranging for the examination of each and every child" and the county boards of education and of health are expected to "cooperate fully" with the State boards in the promotion of this work. The periodic examinations are to be made by the county health officer with assistance from the county board of health as is necessary. The State superintendent of education "shall have blanks printed to be furnished by the county superintendents to the various school districts." As already noted, the State department of education cooperates in arranging for these examinations through the information and advice contained in its courses of study in health and physical education. However, the responsibility for physical examinations rests with the Department of Health. (See chart.)

The Alabama High School Athletic Association is distinct from the State Department of Education; however, the supervisor of health and physical education is a member of the central board of control of this organization, and the State department publishes yearly the *Handbook of the Alabama High School Athletic Association and the Alabama Association for Health, Physical Education, and Recreation*. The supervisor is permanent secretary of the latter association.

## California

### Historical Development

California was first among the States in requiring provision in public schools for health instruction and physical activities. (See p. 1.) In 1917 a law was passed which made it the duty of the State board of education to appoint a State supervisor of physical education and such an official was appointed in the following year.

### Legislation

(a) *State department*.—The law of 1917 empowered the State board—

... to adopt such rules and regulations as it may deem necessary and proper to secure the establishment of courses in physical education in the elementary and secondary schools ... to appoint a State Supervisor of Physical Education ... to employ the necessary expert and clerical assistants in addition to the State Supervisor of Physical Education [and] to compile or cause to be compiled and printed a manual in physical education for distribution to teachers in the public schools of the State (*School code 1937, 3.740-3.745.*)

[The Supervisor] shall exercise general supervision over the courses of instruction in elementary and secondary schools of the State. He shall exercise general control over all athletic activities of the public schools; shall advise school officers, school boards, and teachers in matters of physical education; shall visit and investigate the work in physical education in the public schools and shall perform such other duties as may be assigned to him by the State board of education. (3.738.)

(b) *Local schools.*—The statutes of California provide that "attention must be given to such physical exercises for the pupils as may be conducive to health and to vigor of body as well as mind, and to the ventilation and temperature of school rooms." (3.41.) Instruction must also be given "in all grades of school and in all classes during the entire school course, in manners and morals and upon the nature of alcohol and narcotics and their effect upon the human system." (3.42.)

The local boards "shall have power and it shall be their duty to give diligent care to the health and physical development of pupils" and they are "authorized and empowered to provide for proper health supervision of the school buildings and pupils enrolled." (1.100, 1.101.) Boards may employ "physical inspectors" for the physical examination of children but no such examiner shall be employed or permitted to supervise the health and development of pupils "unless such person holds a health and development certificate granted in accordance with the provision of the code." (1.112.)

It is the duty of all boards to provide first-aid kits in schools, and instruction in "safety and accident prevention" is required in every elementary and secondary school. (*General laws, Act 7518a.*)

Suitable courses of physical education must be provided for both elementary and secondary schools. The aims and purposes of physical education as established by the law of 1917 are:

- (1) To develop organic vigor; (2) to provide neuro-muscular training;
- (3) to promote bodily and mental poise; (4) to correct postural defects; (5) to secure the more advanced forms of coordination, strength, and endurance;
- (6) to promote such desirable moral and social qualities as appreciation of the value of cooperation, self-subordination, and obedience to authority, and higher ideals, courage, and wholesome interest in truly recreational activities;
- (7) to promote a hygienic school and home life; and (8) to secure scientific supervision of the sanitation of school buildings, playgrounds, and athletic fields, and the equipment thereof. (3.732.)

### Organization

There is at the present time a Division of Physical and Health Education with a Chief of the Division and one assistant, the Chief of the Bureau of Physical Education for Girls. The chief of the division is directly responsible to the superintendent. The division is coordinate with others of the department.

### Objectives and Activities

(a) *Accomplishments.*—Statutes are not very specific except in regard to physical education and athletics. However, a "hygienic school and home life" can hardly be promoted without health instruction and this has been included in the supervisory field. The division of physical and health education attempts to cover all phases of school health work, physical education, and recreation.

Besides the elementary and secondary field, its efforts extend to higher education in connection with teacher education in physical and health education. A limited advisory service is extended to residential schools for the deaf and blind. In connection with the extended use of school plants, the supervisors have entered the field of community recreation.

In achieving the general objectives of the division, the production of suitable publications is important. In recent years the division has issued manuals for teachers in training and in service on *Instruction Concerning Alcohol, Tobacco, and Narcotics* (1935), on *Special Activities in Physical Education for High Schools and Adult Groups* (1934), and on *Physical Education in Small Rural Schools* (1938). At the present time manuals on *Health Instruction and Physical Education for Elementary Schools* are being developed. Professional news letters are issued regularly.

Having placed the program where those interested may read, the division endeavors to secure its adoption in practice through leadership rather than "supervision" in the usual sense of that word. The division works through county superintendents, county supervisors, and local administrative and teacher groups. It is largely responsible for the promotion of the school health work and therefore is in constant contact with school health personnel.

The chief of the division lists among present specific objectives (1) the improvement of teacher education, (2) the revision of certification requirements, (3) the extension of health services in public schools, (4) continuous improvement in the physical education programs on all levels, and (5) more extensive use of the school plant for community recreational purposes.

(b) *Limitations.*—In covering the manifold duties which it has been assigned, the division is hampered by its limited staff. Especially is there need of an experienced school physician.

### Relationships With Other State Organizations

In the realm of safety education, beginnings have been made in the development of a satisfactory program through a study sponsored jointly by the State department and the University of California. A State committee of 20 members is assisting in this study. It is

financed through funds transferred from the division of safety of the State department of motor vehicles.

The chief of the division serves as a consultant of the schoolhouse planning division in connection with review of plans for indoor and outdoor physical education facilities.

The division reviews books submitted for adoption by the division of textbooks and publications, and works closely with other divisions, especially so in the case of the elementary, secondary, and adult divisions.

The division is legally responsible for the control of high-school athletics. The chief of the division works to this end largely through the California Interscholastic Federation, and its many sections and leagues.

The division works closely with the California Association for Health, Physical Education, and Recreation—an organization whose members are active workers in the field. The division also assists in many ways the State-wide lay organizations interested in child welfare and community improvement. It also cooperates with the State department of health.

## Connecticut

### Historical Development

State supervision in the fields of health and of physical education was begun in the State Department of Education of Connecticut in 1922. Authorization for the appointment of a supervisor followed the enactment of a legislative act which provided that "there shall be established and made a part of the course of instruction in the public schools of this State a course in health instruction and physical education" and that, "by and with the approval of the State board of education, the State commissioner of education may employ experts to assist him in preparing such courses of instruction, and to assist in putting into operation the courses and work as prescribed in the public schools of the State." The course of instruction was to include "instruction in personal and community health and safety and in preventing and correcting bodily deficiency." The physical examination of children was already begun (in 1899, see p. 2) and the supervisor was concerned in the development of this service. While the original statute has undergone considerable change there has been continuous supervision in these fields.

### Legislation

Two different provisions of the statutes are of especial interest in connection with this study: (1) Those concerned with the responsibility of the State Department of Education for assigned functions,

and (2) those concerned with the responsibilities of local schools in the same connection.

(1) In Section 185c (of the present statutes) entitled "Maintenance," it is decreed that—

... in said schools shall be taught, by teachers legally qualified . . . hygiene, including the effects of alcohol and narcotics on health and character; physical and health education, including methods, as presented by the State board of education, to be employed in preventing and correcting bodily deficiency. . . . Courses in health instruction and physical education shall be prepared by the secretary of the State board of education, and when approved by the State board of education, shall constitute the prescribed courses.

Safety education shall be a subject of instruction in all public schools of the State, and the State Board of Education, with the cooperation of other State departments, organizations, and instrumentalities as are engaged in elimination of motor vehicle accidents shall prepare material for use in such instruction, and furnish them, free of charge, to superintendents or supervising agents of schools. (*Sec. 186d*)

The State board of education shall adopt regulations fixing the qualifications of teachers in physical education and shall require all students at the State normal schools to receive thorough instruction in such courses and shall provide such instruction for such students in attendance at the State summer schools as shall elect to take such instruction. (*Sec. 46.*) (Possibly training of teachers for the various phases of health work was taken for granted.)

The State board of education shall prepare or cause to be prepared suitable test cards and blanks to be used in testing the eyesight of pupils in public schools, and shall furnish the same, together with all necessary instructions for their use, free of expense, to each school in the State. The superintendent, principal, or teacher, in each school in which no examination or inspection shall have been made under the provisions of Section 125 [see below] shall annually, during the fall term test the eyesight of all pupils . . . shall give written notice to the parent or guardian . . . and shall make a written report of all such cases to the State board of education.

(2) The local boards of education or district committees of each town or city or district of more than 10,000 inhabitants shall, and those of less than 10,000 may appoint one or more school physicians [and] the board of education may appoint a school nurse who shall take such action as may be necessary for safeguarding the health of pupils and teachers of the schools. (Dental hygienists may also be employed by any board.)

The school authorities of any town or school district which has appointed a school physician . . . shall cause each child attending the public schools therein to be separately and carefully tested and examined at least once in each school year to ascertain whether such child is suffering from disability tending to prevent such child from receiving the full benefit of school work or requiring a modification of such school work in order to prevent injury to the child or to secure the best educational results. (*Sec. 125*)

In 1930 "school instruction concerning tuberculosis" was required but this instruction is to be taken care of by the State Tuberculosis Commission. (*Sec. 131*)

### Organization

Since 1922 there has been a State supervisor and, as the department is now organized, there is a "health education section" with a senior supervisor and an assistant supervisor of health and physical education located in the division of supervision. Its functions are coordinated with, and carried out through, other sections of the division of instruction. The section works closely with the rural supervisors who visit the schools under their direction at least twice a month and who are responsible for seeing that the whole school program is carried out. The section serves in an advisory capacity with the section concerned with buildings and grounds, with special reference to physical education facilities. The section devotes most of its time to elementary and secondary schools but furnishes assistance, on request, to the teachers' colleges.

### Objectives and Activities

As stated by the senior supervisor, his objectives are:

1. To protect the health of the pupil while at school by maintaining a school environment in strict accordance with the known laws of sanitation and hygiene.
2. To detect, early in the school career, any physical defects or conditions which may retard the normal growth and development and the educational progress of the pupil and to assist in establishing measures for the removal of such defects or conditions.
3. To establish in the school the preventive measures that will lessen the incidence of communicable disease.
4. To apply the laws of hygiene to the school program and to the methods of instruction used.
5. To give the pupil by training and instruction a set of good health and safety habits, a properly functioning body, and an understanding of the hygienic conduct of life.

The function of the section is "to promote and improve programs and practices" and in doing this the supervisors serve "as advisers and consultants rather than administrators."

The section prepares and disseminates courses of study in physical education and in health and safety and other materials for school administrators, classroom and special teachers, physicians, and nurses. Its publication *A School Health Program for Teachers* covers all phases of the subject in which the teacher has, or should have a part. This includes the hygiene and sanitation of the school, the prevention of communicable diseases, health examinations, the hygiene of instruction, the treatment of speech defects, and first-aid to the injured. Among recent publications, one is devoted to the school lunch. There is a special *Manual of Physical Education for Rural Schools*. A publication on *Intelligent Driving* was recently issued; and the pamphlets on health instruction are being revised.

In its more active promotional work, the supervisors spend much time in the field, and since all forms of school health work are covered, they advise with workers along all these lines including school physicians and nurses.

The supervisors do not find the time for periodic visits but are in demand for meetings with special groups or for advisory assistance to local schools. By invitation they serve as instructors in summer schools for teachers.

#### **Limitations**

The section finds itself much hampered by lack of personnel in actively covering all the phases of the program which it would promote. The supervisors find little opportunity for research concerning best means of instruction and the revision of courses of study; they cannot exercise an active leadership in the training of teachers before and in service; there is need for assistance to school nurses and they do not find time for periodic visits to schools but must trust to calls for assistance which naturally come from those who are especially interested in improving their activities.

#### **Relationships With Other State Organizations**

The section cooperates with the State Tuberculosis Association in its work of carrying out the law with reference to instruction concerning tuberculosis.

Recently the section organized a committee on school health work in which Yale University, the State Department of Health, the State Nurses Association, the Visiting Nurses Association, the State Teachers Association, the State Superintendents Association, the State Medical Society, and other organizations were represented. The work of the committee resulted in a statement of policies for the entire school health program which was published by the State Department of Education.

### **Delaware**

#### **Historical Development**

While physical education is not specifically mentioned in the laws of Delaware it is taken as implied in the words "physical welfare" and a supervisor in this field was appointed in 1928. The present Director of Physical and Health Education has been in office for 3 years.

#### **Legislation**

The State Board of Education shall prescribe rules and regulations "governing the health, physical welfare, and physical inspection of public school children," and "they shall require that all pupils of all public elementary schools and all public high schools of the State be instructed in physiology and hygiene with special reference to the

effects of alcoholic drinks, stimulants, and narcotics upon the human system." (S. L. 2630, sec. 8.)

### Organization

The Director of Physical and Health Education is appointed under the act which requires the State Board to "conduct investigations relating to the educational needs of the State and the means of improving the educational conditions; and for such investigations may employ additional expert assistants and appoint special agents whenever they deem it advisable." (2629, sec. 7.) The director is responsible to the superintendent. Within the department, the director has the support and assistance of the Assistant Superintendent in Charge of Secondary Schools and the Assistant Superintendent in Charge of Elementary Schools, in the promotion of safety education and the whole program, and he has found the Directors of Art and Music helpful in connection with physical education, and the Supervisor of Home Economics, in the improvement of nutrition. In the field, the director has the assistance of the five rural supervisors. His services are rendered chiefly to elementary and secondary schools but are extended to the field of adult education. (See chart II.)

### Objectives and Activities

(a) *Accomplishments.*—As fundamental to supervision, courses of study in health and physical education have been prepared for elementary schools, for junior and senior high schools, and for rural schools. The first of these publications is now undergoing revision. In connection with the courses of study, a list of basal text and supplementary books on health instruction for all grades is issued every 3 years. The supervisor has included in his courses of study suggestions concerning the control of communicable disease and the importance of maintaining sanitary conditions and of making the most of the school lunch.

Circulars have been published on such special subjects as Games, Play Days, and Safety, and a monthly *News Letter* is issued which contains suggestive material and news notes for teachers.

Besides the conduct of physical activities in schools, the director has concerned himself with provision for recreation after school and in vacations and with the general guidance of interscholastic events. In connection with other State agencies, he has been promoting the instruction of teachers and parents in matters concerning sex and is furnishing suitable material on this subject for use in school libraries.

The supervisor spends each school day in the field and is able to visit every school in the State about once a year. He finds that untrained teachers profit especially from demonstrations while the staff teachers often need criticism and direction.

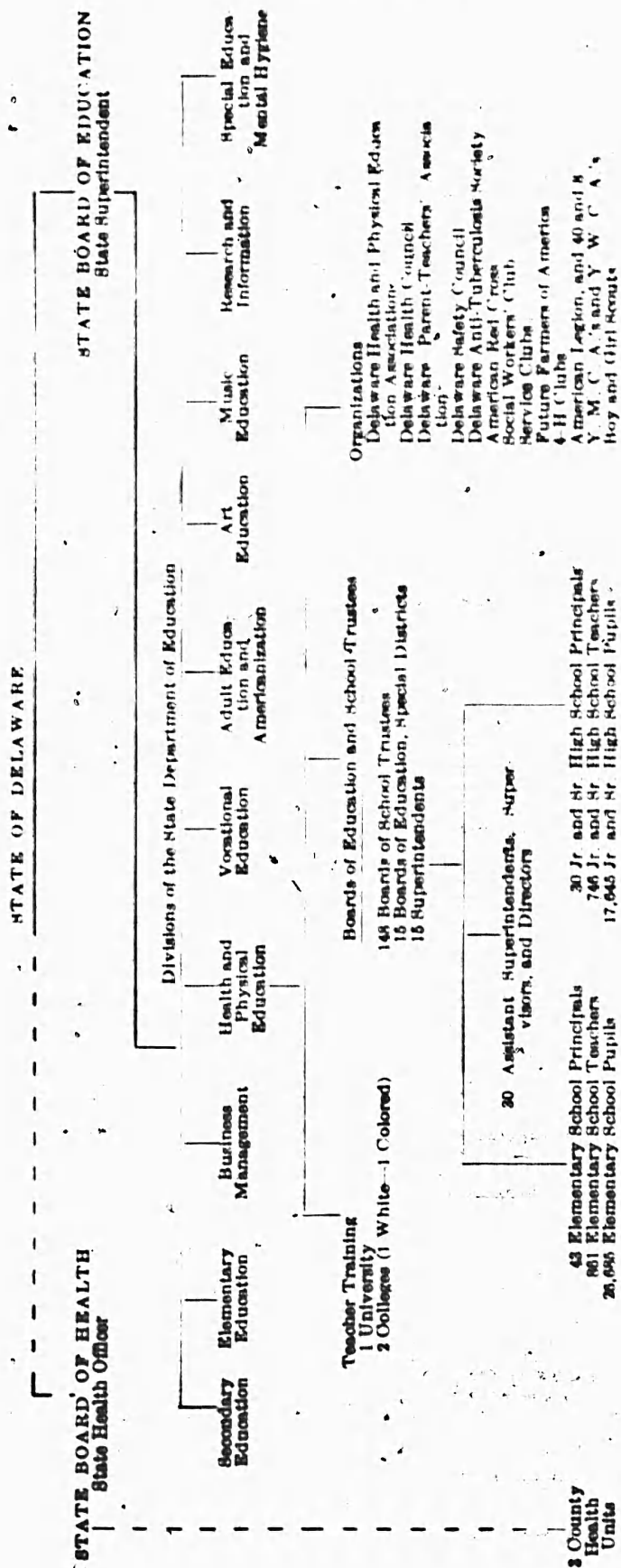


Chart II

A fall conference is held for all staff teachers and there is a sectional meeting each year with the State Teachers Association. The supervisor also meets with the supervisors and principals and with the 10 district supervisors at least once a year.

(b) *Limitations.*—The supervisor is stressing the need for more emphasis on health instruction in both elementary and secondary schools and some progress is being made. He has recommended the appointment of 3 assistant supervisors.

#### **Relationship to Other State Agencies**

The State department of health is most cooperative. It has assumed responsibility for periodic examinations of pupils in the first, fourth, and seventh grades, and for the supervision of school nurses.

The Delaware Anti-Tuberculosis Association and the Delaware Safety Council have been helpful in furnishing printed material. The American Red Cross has promoted instruction in swimming, lifesaving, and first-aid, and has supplied first-aid kits to schools. The Delaware Citizens Association and the parent-teacher association have cooperated recently in furnishing information concerning sex to parents and teachers through a series of lectures.

There is no State interscholastic athletic association. Interscholastic activities are managed by the State director. There are no State championships in any sports.

## **Florida**

### **Historical Development**

In 1927 the lawmakers of Florida created the position of State supervisor of physical and health education and such a person was appointed in that year. In 1933 the law was repealed and supervision in this field was discontinued, but in 1937 the supervisor of certification was also made a consultant in health and physical education.

### **Legislation**

(a) *Applying to Boards of Education, State and Local.*—Except for teaching the effects of alcohol and narcotics, there is no law with reference to instruction in hygiene or physical education, but the State department considers these as essential items in the general educational program and has acted accordingly.

The State board of education and the State board of health shall jointly adopt and promulgate all needful rules and regulations having to do with the sanitation of buildings, grounds, shops, cafeterias, toilets, school busses, laboratories, rest rooms, first-aid rooms, and all rooms or places in which pupils congregate in pursuit of the school duties or activities. (S. L. 1936, sec. 636.)

Maximum regard for safety and adequate protection of health shall be primary requirements which must be observed by County Boards in routing buses, appointing drivers, and providing and operating equipment. (Sec. 802.)

(b) *Applying to the State and county departments of health.*—Except for the joint prescription of forms, rules, and regulations and arranging for examinations at appropriate intervals "the State Board of Health shall have supervision over all matters pertaining to the medical examination of school children," but "any work done by health authorities in schools shall be arranged with the school authorities." (Sec. 630.)

"The county physicians of each county . . . shall act as county medical inspectors of school children in their respective counties" providing that in such counties where there are "no regular appointed county physicians, it shall be the duty of the board of county commissioners to appoint a physician as county medical inspector of school children." The medical inspector is to be paid from State Board of Health funds.

### Organization

As stated above, the supervisor of certification serves as consultant in health and physical education. He is appointed through the general powers conferred on the State superintendent "to organize, staff, and administer the State department so as to render the maximum service to public education in the State." (S. L. sec. 316.) This official is one of three supervisors comprising the general instructional staff and he is responsible to the director of the division of instruction as well as to the State superintendent. He is also the supervisor of certification and has the responsibility of visiting and accrediting schools and advising with elementary and secondary school authorities, so that his activities in the field in which we are here interested are limited. His chief functions are those of an adviser to stimulate and coordinate work through conferences and committees, and the development of standards and materials. His work is confined to the elementary and secondary schools, and to teacher training.

### Objectives and Activities

As fundamental material, a bulletin containing source materials in physical education for grades 7 through 12 has been produced with the assistance of a committee of representative teachers. A similar bulletin has been prepared for the elementary school. A publication dealing with the school health program has been developed through similar methods. This publication includes administrative policies; the functions of the State board of health and how to take advantage of them; and methods and content of instruction in health and safety. Circulars of general information are issued occasionally.

In the very important field of teacher preparation, a "Work shop" on health was conducted in the summer of 1940 at the Florida State College for Women, the purpose of which is to bring about a better

understanding, on the part of the teacher, of the possibilities in health teaching. Similar courses are being arranged in other institutions.

### Relationship With Other State Agencies

In planning the health activities of the schools, the consultant is in touch with the educational adviser of the State board of health. A 2 weeks' conference was recently called jointly by the two State departments to make plans for the coordination of the activities of the various health agencies working in the schools. The consultant does not have a close relationship with the high-school athletic association or with the Florida Coaches' Association.

## Georgia

### Historical Development

Active supervision in the field of health and physical education in the schools of Georgia was not initiated until 1939.

### Legislation

(a) *Affecting the State Department of Education.*—In 1920 the State board of education was required to—

... prescribe a course of study in physical education for all common schools of the State. . . . This course shall occupy periods totaling not less than 30 minutes each school day which shall be devoted to instruction in health and safety, to physical exercises, and to recess play under proper supervision. A manual setting forth the detail of said course of study shall be prepared by the State superintendent of schools in cooperation with the State board of health and State board of education of Georgia, and such expert advisers as they may choose.

(b) *Affecting teacher-training schools and local boards.*—All teacher-training schools supported in whole or in part by public funds shall furnish "one or more courses in physical education and each person graduating from a teacher's course in any of these institutions shall have completed one or more courses in physical education." City and county boards "may employ supervisors and special teachers of physical education." (S. L. 1937, §2-1901.)

(c) *Affecting district health officials.*—"The district Commissioner of Health shall at least every school year, examine the teachers and janitors for infectious and contagious diseases and shall also examine each pupil, in the presence of the teacher or nurse, for intestinal parasites and for defects of the eye, ear, nose, throat, lungs, teeth, and other physical defects," etc. (Code 1933, 88-309.) Visiting nurses may be employed by boards of health to assist in examination of children and "to instruct parents in matters pertaining to their children." (88-311.) So far as legislation is concerned the school child's environment is left to departments of health.

### **Organization**

In 1939 a State director of health and physical education was appointed by the State board of education under the law which states that the board "shall have general supervision of the State department of education and shall employ and dismiss, upon the recommendation of the State superintendent of schools, supervisors, and other employees . . . as may be necessary." (*S. L. 1937, sec. 3.*)

### **Objectives and Activities**

In fulfillment of the law concerning physical education, the State superintendent with the temporary assistance of two specialists issued, in 1921, a "health manual" which, notwithstanding the law concerning medical examinations, included instructions for the examination by teachers of vision, hearing, and the teeth. There were suggestions for health instruction and details concerning physical education. In 1938 an "official manual for teachers" on "play in education" was prepared by the division of information and publications. This manual is devoted entirely to physical activities.

### **Relationships With Other State Agencies**

In 1938 the State department of health employed as director of the division of health education an experienced person in school health work. She is working with and through institutions for teacher training and also in the schools. "The State department of education has cooperated with this special agent by calling meetings in many counties with a view to bringing the school and health workers closer together."

Since 1932 the State department of health has employed a director of dental health education who has been active in the promotion of dental work in the schools.

## **Illinois**

### **Historical Development**

A law requiring provision for physical education in public schools was passed in 1915. This law was revised in 1927 and in 1929 the position of State supervisor of physical education was created by the legislature in the office of the Superintendent of public instruction.<sup>2</sup> The position became vacant in 1934 from lack of funds. A similar position, that of director of physical education, was created in 1937.

### **Legislation**

By an act of 1923 it is the duty of the superintendent of public instruction—

. . . to prepare with the advice of the State board of health, the State architect, and the State fire marshal . . . specifications for the minimum requirements on the heating, ventilation, lighting, seating, water supply, toilet, and safety against fire which will conserve the health and safety of the children

<sup>2</sup> Illinois School Report, 1928-30, p. 63.

attending the public schools. (*Sec. 1, art. 13, Act to establish and maintain a system of free schools.*)

**The law of 1927 provides for—**

... the physical education and training of all pupils of public schools and educational institutions in all grades . . . The aims and purposes of courses in physical education and training established under the provision of this Act shall be: To develop ideals of efficiency as dependent upon organic vigor, bodily and mental poise, proper physical development, and obedience to the rules of hygiene. To instruct pupils in physiology and the laws of health and the conditions that promote physical and mental efficiency. To secure scientific supervision of the sanitation of school buildings and playgrounds and the equipment thereof. (*Act July 9, 1927.*)

By an act of July 9, 1937, the board of directors of schools are empowered "to employ dentists and furnish their professional services free of charge" when such work is requested or consented to by parents or guardians. They may "establish and maintain a properly equipped first-aid room with a competent nurse in charge . . . to assist the children in case they are sick or injured." The directors are also empowered to "employ a physician and surgeon and define his duties." (*SL 1939, par. 114.*)

**Organization**

The State director of physical education is responsible to the State superintendent but has as an adviser, the first assistant superintendent and coordinator of the department of instruction. He has also the counsel of the regional supervisors of the department. The director works in the elementary and secondary school fields and is concerned with the curricula of teachers colleges. He also has charge of the safety education program and pupil transportation.

**Objectives and Activities**

The appointment of the supervisor is recent and his work has only been sketched and begun. An assistant State superintendent outlined, in Circular No. 292, 1937, a school health program for elementary schools. Building on this, the director has organized a State-wide committee for the purpose of preparing a syllabus for every school level in health, physical education, and safety:

Curricula for rural, elementary, junior, and senior high schools have been completed but not published. Programs of safety education for elementary and secondary schools, Circulars No. 299 and No. 299A, have been issued and a School Health Examination Program, Circular No. 313.

A committee representing the teacher-training institutions has developed a curriculum for major and minor courses for special teachers and also curricular requirements for prospective classroom teachers. Besides theory and practice teaching in physical education, the fol-

lowing are to be included in the preparation of classroom teachers: (a) Health practices for the grade level; (b) health inspection; (c) observation of children for major defects; (d) knowledge of desirable health and safety conditions and practices in the school; (e) accident prevention and first-aid measures; and (f) relation of classroom teacher to the health service.

At present the director has some assistance in promoting his program from the regional supervisors of general curricular subjects. More to the point, the superintendent of public instruction is endeavoring to secure county supervisors of physical education. Two counties now have such persons as helping teachers.

### Relationships With Other State Organizations

In the law quoted, neither the State department of education nor that of health is made responsible for the promotion of school health services, although the report of the committee on curriculum gives evidence that the teachers are to be prepared for their part in the prevention and care of defects and diseases. There is some development of medical, dental, and nursing services under county departments of health. The director cooperates with such agencies as the State department of health, which distributes to schools, printed material on communicable diseases. The director as yet has no official relation to the State Interscholastic Athletic Association.

## Louisiana

### Historical Development

In 1918, without any special legislation on the subject, a supervisor of physical education was appointed in the State Department of Louisiana. He continued in office until 1926, when he was transferred to the division of certification. In 1935 a division of physical education was organized and a director was employed. A circular issued at the time reads:<sup>3</sup>

Our purpose in providing for this new work is to aid to the extent of our ability the local school authorities and teachers in bringing about proper health conditions among the children of the various schools. The new division will be concerned naturally with at least two aspects of physical education—that of health and that of physical exercises. The former is of far greater importance than the latter and will receive major attention, though the latter will not be neglected.

A Division of Safety was created in 1937.

### Legislation

#### (a) *Affecting the State Department of Education.*—

The State board of health and superintendent of education shall prepare or cause to be prepared, suitable test cards, blanks, and record books and

<sup>3</sup> State Department of Education of Louisiana. Eighty-fifth Annual Report, p. 29.

all other necessary appliances to be used in testing the sight and hearing of pupils in the public schools of the State, together with the necessary instructions for the use of the same. [The superintendent of education shall furnish these appliances and instructions to the schools.] (Act 292, 1908.)

It shall be the duty of the State board of education to include in the curriculum of all public schools of the State a course of study on the evil and injurious effects on the human system of the use of alcohol and narcotics. The said course shall be used only in those grades above the seventh. . . . The books to be used in the teaching of the said subject . . . shall be exhaustive and complete on the said subject and of such nature as to provide for the adequate and effective teaching of the same. (Act 167, 1934.) The State board of education shall prepare courses of study. (Act 100, 1922.)

(b) *Applying to local boards.*—The legislators were farsighted and unique in requiring that one of the three members of the board of health, which must be organized in each parish, shall be a “person engaged in educational work in connection with the public school system of the parish.” (Act 296, 1926.) Parish school boards have authority to employ “medical directors” and it is implied that these are to make such physical examinations of pupils as are considered advisable. (Act 100, 1922.)

The sanitary regulations of the State board of health “concerning hygiene and sanitation of schools” are specific.

The parish or municipal school board, and the parish superintendent of schools, shall be held responsible for the execution and enforcement of the rules and regulations of this code and all other health laws governing the hygiene of the schoolroom and the premises of the schools under their respective jurisdiction. (School Laws, p. 146.)

These rules and regulations apply not only to sanitary conditions of the school but to the control of communicable diseases in teachers and pupils. They are published with the school laws.

### Organization

By Act 100 of 1922, the board of education is authorized to “provide the necessary employees” and the State superintendent shall select such employees. Through this staff the superintendent is to see that the schools are in a proper state of repair and sanitation; that courses of study are followed; and, in all ways, the local schools are to be assisted in their work so as “to secure the best possible results from their efforts.” “In the prosecution of this work of inspection and supervision” the various employees are under the immediate direction and control of the State Superintendent.

The supervisor of health and physical education was appointed under this law. The whole supervisory program of the State is closely coordinated and there is constant interchange of experience and of ideas on the part of members of the State staff. The supervisor is especially concerned with the elementary and secondary schools and

with the teacher-training institutions; he cooperates with the junior colleges and works, as far as possible, with the residential schools for handicapped children and with private and denominational schools.

### Objectives and Activities

(a) *Accomplishments.*—The supervisor covers all phases of school health work. In a circular to superintendents, supervisors, and principals, for 1939-40, the following objectives were mentioned:

*Health supervision*—through the efforts of principals, teachers, and janitors.

*Health service*—through the examination of pupils by physicians and teachers, the seasonal examination of athletes, and the establishment of health units in each parish so that children may receive needed treatment.

*Health instruction*—with recommendation of textbooks and other material; first-aid instruction in the seventh grade by qualified Red Cross workers.

*Physical education*—improvement of playgrounds and gymnasias and their equipment and the development of intramural games.

*Personnel*—the employment of properly trained men and women as teachers of health and physical education in high school, and all such teachers and coaches to be members of the State and National organization for health and physical education.

A "Second Manual of Health and Physical Education," published in 1938, offers, in its 300 pages, detailed information concerning the role of school officials and teachers in elementary and high schools in all of the above fields. There are sections on the sanitation of the school plant, on the management of the school lunch, and on mental hygiene; the school sanitary code of the Department of Health is also included.

In his work, the supervisor finds personal visitation of schools of first importance. Most of his time is spent in the field working with the profession and the laity and he has been able to visit each parish about every year and a half. Appointments for visitation are made through the parish superintendent who may or may not accompany the supervisor.

General supervisory conferences are scheduled by the State superintendent's office in each parish or region once a year. These and other conferences are attended by the supervisor.

Demonstrations of methods of instruction are given at the teacher-training institutions.

The supervisor is, at the present time, especially interested in (1) securing adequate training facilities for teachers, (2) establishing clinical services in every parish, and (3) securing suitable rest rooms, and first-aid and examining rooms in school buildings.

The supervision of safety and safety education is assigned to the supervisor of health and physical education. A course of study in safety education has been published and also a *Handbook for School Bus Drivers and School Officials*. All school buses are operated under the supervision of the State.

The handling of interscholastic athletics is left to the school principals.

(b) *Limitations.*—The difficulties to be overcome which seem most formidable at the present time are (1) the securing of correction of physical defects, which accounts for the efforts of the supervisor to secure local health units; (2) the lack of equipment in the way of pianos or phonographs for use in connection with physical activities; and (3) the overemphasis in local schools on interschool athletics, an attitude which is, of course, not peculiar to Louisiana.

### **Relationship to Other State Agencies**

Outside the department of education, the State department of health has assisted in the development of local health units and clinical service for school children and has furnished specific regulations concerning hygiene and sanitation of school buildings.

The State welfare department is of assistance to needy children and the State Police Jury Association is helpful in establishing recreational areas and in securing parish health units. The supervisor also finds the State park commission helpful and the State Medical and Dental Associations cooperative in securing treatment of defects.

## **Maine**

### **Historical Development**

The wave of interest in physical education following the World War moved the legislators of Maine in 1919 to pass a law on the subject but a State supervisor was not appointed until 1934.

### **Legislation**

The law of 1919 makes it—

the duty of the superintending school committees of the several towns of the State to make provision for instruction to be given to pupils, in all public schools, in personal hygiene, community sanitation and physical education, including recreational exercises in accordance with a course of study and plans of lessons and instruction prepared by the commissioner of education who shall prescribe such rules and regulations as may be necessary to carry out, in a successful manner, said program of physical education and he may require such reports from superintendents as he may deem necessary. (*S. L. 1935, sec. 181.*) (By the same statute, towns or districts were subsidized in the employment of directors or supervisors of physical education.)

The school committees are required to test the sight and hearing of pupils every year, the examinations to be made by teachers or school physicians. The directions for such tests are to be prescribed by the commissioner of education "after consultation with the bureau of health." (*S. L. 1935, secs. 52, 53.*) School committees may employ school physicians whose duties are to make prompt examinations of children referred to them by the teacher as showing signs of ill health

or contagious disease and of every child returning after illness without a certificate.

Provision must be made for instruction of all pupils in physiology and hygiene with special reference to the effects of alcoholic drinks.

### Organization

A director of health, physical education, and recreation was appointed by the commissioner of education in 1934, under the general powers conferred upon him by the legislature. The director is responsible to the commissioner of education and his work is coordinate with that of the other divisions of the department.

### Objectives and Activities

Prior to the employment of the supervisor, the State department published in 1928 *A Course of Study in Health and Physical Education for Elementary and High Schools*. This contains a paragraph on the importance of school sanitation; a section on health service with details concerning health examinations by teachers and physicians; a section on health education for all grades; and one on physical education for all grades. This course of study is undergoing revision.

The time of the director is devoted chiefly to the promotion of physical education. It is his function to see that schools which are subsidized in this field are conducting work which meets State requirements and which justifies such subsidy. He endeavors to expand the subsidized program and to develop the programs of schools which do not employ local supervisors. As the amount of subsidy has been greatly reduced, it is especially needful to provide the training of regular teachers. To this end, the director spends half his time in the six normal schools of the State where he directs the work of teacher preparation. His salary is paid in part from normal school appropriations. The remainder of his time is spent in inspecting the work done in local schools. He covers both elementary and high schools since, to receive State aid, all grades must receive instruction. The services of the director, as adviser, are available to private or denominational schools on request.

The director finds as the most effective supervisory-procedures: (a) The development of "play day" activities, using two or three towns as a supervisory unit; (b) the employment of physical directors for specified areas regardless of town lines (the town in New England is the equivalent of a township in most States); (c) exhibiting motion pictures of "play days" and regular physical education programs before service clubs and other promotional organizations.

### Relationship With Other State Agencies

Most cordial and intimate relations with the State Department of Health are maintained in respect to health education in the public schools.

## Maryland

### Historical Development

In Maryland a law with reference to "physical education and training" in public schools was passed in 1918 and a State supervisor of physical education was appointed in that year. Following his death in 1935, the present supervisor of physical education and recreation was elected, and in 1939 an assistant supervisor of physical education was added to the staff of the State department.

### Legislation

#### (a) Applying to the State department of education:

There shall be established and provided in all the public schools of the State and in all schools maintained or aided by this State, physical education and training for both sexes during the following minimum periods: A—In the elementary public schools at least 15 minutes each school day and also at least 1 hour of directed play outside of regular classroom work in each school week. B—In public high schools at least 1 hour in each school week and also at least 2 hours of directed play or athletics for all pupils outside regular classroom work in each school week. (*Public-School Laws, 1927, par. 259.*) The State board of education upon recommendation of the State superintendent of schools shall appoint a supervisor of physical education whose duty it shall be to direct and carry out the provisions of this act under the direction of the State superintendent of schools, etc. (260, 261).

#### A bylaw (No. 28) reads—

Each county board of education shall hold annually, unless excused by the State board of education, an athletic field day, school rally, and exhibit day, to which patrons and friends of education shall be invited.

The State board of education shall provide for pupils in the normal schools suitable instruction and practice for testing the sight and hearing of school children. (*Ch. 185, par. 124.*) The State superintendent of public education shall prescribe, after consultation with the State board of health, directions for tests of sight and hearing, and shall prescribe suitable rules, test cards, etc. (122)

(b) *Applying to local boards of education.*—The board of county school commissioners may, in its discretion, appoint one or more school physicians. "Every school physician so appointed shall make prompt examination of all children referred to him . . . and such further examination of teachers, janitors, and school buildings, as in his opinion the protection of the health of the pupils may require. (115, 117) At least once in every 2 years every child is to be "carefully tested and examined to ascertain whether such child is suffering with defective sight or hearing or from other physical disability, . . ." (119)

The laws of Maryland list hygiene and sanitation among the "branches" to be taught in every elementary school. "The nature of

alcoholic drinks and narcotics, with special instruction as to their effects upon the human system, in connection with the several divisions of the subjects of physiology and hygiene shall be included in the branches of study taught in common schools" and shall be studied as thoroughly and in the same manner as other like branches. (Ch. 7, par. 77.)

### Organization

The supervisor of physical education and recreation holds office under the law requiring the appointment of a supervisor quoted above. He is directly responsible to the State superintendent. There are close relationships with the assistant superintendent in administration and supervisor of high schools, with the assistant superintendent in charge of elementary instruction, and the supervisor of colored schools. The supervisor and his assistant are especially concerned with elementary and secondary schools, but they serve in an advisory capacity to the white and Negro teachers colleges and in the field of adult education. On request, they advise with the residential schools for the handicapped.

### Objectives and Activities

(a) *Accomplishments.*—The supervisors are especially concerned with the promotion of participation in physical activities of every child in the elementary and secondary school and in a graded progressive program, well taught, adapted to the needs and capacities of the pupils. The stimulus of the desire to excel is promoted through athletic badge tests, directed play, and physical education programs for the elementary schools, all under the direction of the classroom teacher; the program for the secondary schools consists of badge test activities, intramural and interschool athletics, health and physical education programs under the immediate direction of qualified teachers of physical education or carefully selected teachers. There is at the end of the school year the "spring meet" and the "county play day" which are mentioned above. Schools are closed for this day of competitive sports. Besides this the secondary schools have seasonal athletic sports for girls and boys on an extramural and interscholastic basis. As basic to this program, a bulletin on *Badge Test Activities for Girls and Boys* was issued in 1937 and a publication on *Track, Field, and Games for County Meets and Shore Championships in Maryland Counties*, in 1938.

The course of study in physical education for high schools is being revised and developed locally. Four counties now have such units, and in one county a course of study has been developed through the cooperation of elementary and secondary schools.

In addition to physical activities, a beginning has been made in the production of curricular material in health instruction for elementary and secondary schools. The assistant supervisor is promoting the provision of healthful school environments, the development of health services and practices, and first-aid and health instruction. A study by teachers is urged of essential knowledge needs of pupils under their care for improvement of conditions in the home as well as their personal practices.

The supervisor finds the cooperation of county superintendents, supervisors, and principals essential to success. His most effective procedures are county conferences with teachers, principals, and superintendents; meeting with athletic committees and with groups of physical education teachers. He spends 5 days a week in the visitation of schools.

(b) *Limitations.*—The chief difficulties encountered are: (1) Securing materials of instruction for physical activities such as bats, mats, and balls; (2) the development of programs in elementary schools conducted by the elementary teachers and development of adequate programs in secondary schools, taught by fully qualified teachers of physical education. Difficulty arises in high schools where non-accredited teachers must be depended upon. Unless the teacher is well trained in physical education and is accredited in this field, the student does not fully benefit therefrom or receive academic credit for his course. However, many secondary schools are interesting themselves in this problem with the result that the number of high schools with nonaccredited teachers is fast diminishing; (3) adequate health service to insure health and physical education appraisal of each pupil, to be used as a basis for his program of physical education.

#### **Relationship With Other State Agencies**

The State Department of Health is cooperative and, through the county health agencies, promotes the health examinations required by law. The county associations of physicians have been helpful in this work and in the correction of defects.

### **Massachusetts**

#### **Historical Development**

Although there is no special statute in Massachusetts requiring such an appointment, a special supervisor in the field of physical education has been employed since 1922. At the present there is a supervisor of physical education, an assistant supervisor of physical education, and an assistant supervisor of safety education.

### Legislation

(a) *The State Department.*—Legislation applying directly to the function of the State Department of Education is brief. This department—

after consultation with the State Department of Public Health shall furnish to school committees suitable rules of instruction, test cards, blank record books, and other useful appliances, and shall provide for pupils in the teachers college instruction and practice in the best methods of testing the sight and hearing of children. (Ch. 71, sec. 58.)

(b) *The local board.*—

The committee shall cause every child in the public schools to be separately and carefully examined at least once in every school year to ascertain defects in sight or hearing and other physical defects tending to prevent his receiving the full benefit of his school work. The tests of sight and hearing shall be made by the teachers. (Ch. 71, sec. 57.)

Except where school physicians and nurses are supplied by departments of health, "the school committee shall appoint one or more school physicians and nurses." (Ch. 71, sec. 53.)

Among the required subjects of instruction are "physiology and hygiene" and "indoor and outdoor games and athletic exercise." "In connection with physiology and hygiene, instruction as to the effects of alcoholic drinks and of stimulants and narcotics on the human system, and as to tuberculosis and its prevention shall be given to all pupils." (Ch. 71, sec. 1.)

The sanitary condition of schools is, by law, under the supervision of departments of public health. (Ch. 143, sec. 42.)

### Organization

The supervisors in the fields of physical education and of safety are employed under the right of the Commissioner of Education to assign functions to his staff. As previously stated, there is a supervisor of physical education, an assistant supervisor of physical education, and a supervisor of safety education. These supervisors are responsible to the director of the division of elementary and secondary schools and State teachers colleges. The work of the supervisors of physical education is confined to the elementary and secondary schools and to the State teacher-training institutions, while the activities of the Supervisor of Safety Education are extended to preschool children and to parents.

### Objectives and Activities

(a) *Accomplishments.*—Physical education—The supervisors of physical education find most effective (1) the preparation of courses of study especially for rural areas; (2) the publication of news letters; (3) visitation of schools upon request; and (4) conferences with directors of physical education.

Courses of study in physical education for all grades were published in 1934-35, and in 1931, *A Course in Health Education for Elementary Schools* was produced by a committee of 16, including the supervisor (at that time) of physical education. A syllabus on instruction concerning the effects of alcohol was also recently issued. The courses of study in physical education have been supplemented by mimeographed circulars—for example, by one on winter sports.

While the course in health education mentioned above covers all phases of the school health program, the work of the supervisors of physical education, as their titles indicate, is confined chiefly to the field of physical activities. The supervisors depend on news letters to get to teachers the items they especially wish to emphasize. These are sent through the local superintendents and they suggest practices, report local accomplishments, and recommend literature.

Visits to schools are limited to those requested by superintendents or local supervisors. A written report of the visit is made to the director of the division under whom they function. The reports are concerned only with facilities and procedures in physical education. The conferences mentioned above are annual, all-day meetings for the State at large. The Commissioner of Education calls the conference and the supervisors plan the programs which are confined chiefly to physical education and athletics.

*Safety education.*—The supervisor of safety education devotes most of her time to the promotion of safety for children on the highway. She acts as a consultant to schools on safety patrols; encourages the use of such patrols in elementary schools, and the organization of safe driving courses in high schools.

The department has had, since 1924, a course of study in safety education for all grades and a committee of superintendents, appointed by the Commissioner is now revising this publication. *A Course in Highway Safety Education for Junior and Senior High Schools* was issued in 1935.

The supervisor makes use of the following procedures: (1) The publication of bulletins; (2) meetings called by local superintendents; (3) demonstration lessons; (4) conferences for high-school principals and students held at strategic points; (5) participation in parent meetings; and (6) radio broadcasts. The bulletins which are issued quarterly contain suggestions to teachers for developing safety habits by activities in various grades. They also present news items concerning local safety programs and accomplishments. Meetings mentioned above are attended only on request of the superintendent of a local district. Radio talks were begun this year. These are addressed "To Mothers of Massachusetts school children."

(b) *Limitations.*—The supervisors of physical education feel the want of trained special teachers which they attribute chiefly to the

fact that there are no certification requirements in this field. The supervisor of safety finds much conservatism in high schools in introducing instruction in this subject.

### **Relationships With Other State Organizations**

Although required subjects, instruction in physiology and hygiene are not supervised by the Department of Education. The State department of public health has issued material in this field and has recently employed a supervisor of health education for work in teacher-training institutions. This department issued a *School Hygiene Book* (1934) which covers all phases of school health work but is especially devoted to the school environment and to the promotion of medical, dental, and nursing services. As required by law, the State department of education issues recording forms and directions for the testing of vision and hearing, but active promotion in this field is conducted by the State department of public health.

## **Michigan**

### **Historical Development**

In 1919 a "physical training" law was passed in Michigan which required the appointment of a State director of physical training and such a director was appointed in that year. By 1932 supervision in this field had developed to the extent of the employment of a director, an assistant director of physical education and health, and there was also an assistant director of interscholastic athletics, for the superintendent was made responsible for the control over such activities. The law requiring the appointment of a director of physical training was changed in 1927 to a permissive one, and at the present time there is in the State department only a director of interscholastic athletics.

### **Legislation**

There shall be established and provided in all public schools of this State, and in all State normal schools, health and physical education for pupils of both sexes and every pupil attending such schools of this State, so far as he or she is physically fit and capable of doing so, shall take the course in physical education as herein provided. (Sec. 467, 1940.) The superintendent of public instruction shall prepare and distribute suitable courses of study in health and physical education. (Sec. 470.) The superintendent of public instruction shall appoint such supervisors and other office and clerical help as he shall deem necessary to carry out the provisions of this chapter and he may revoke said appointments at his discretion. (Sec. 471.) The superintendent of public instruction shall have supervision and may exercise control over the interscholastic athletic activities of all the schools of the State. (Par. 7566.)

### Organization

The director of interscholastic athletics was appointed under the law requiring the supervision of such activities by the State superintendent. He functions in the division of administrative services. The State Association consists of a representative council of 14 members, 13 of whom are elected by the schoolmen of the State for 2-year terms. The fourteenth member is the State director who is appointed by the representative council subject to the approval of the State superintendent of public instruction.

### Objectives and Activities

(a) *Athletics*.—The cooperative effort of the department of public instruction and the Michigan High School Athletic Association is directed toward these ends:

- (1) To increase the educational value of interscholastic athletic programs throughout the State.
- (2) To assist in the regulation of competition so that there will be ample time both for study and athletics.
- (3) To regulate the interscholastic program so as to safeguard the physical welfare of students participating.

The following problems should receive continued attention:

- (1) The importance of sportsmanship at athletic contests both on the part of competitors and spectators.
- (2) Wider participation in intramural and interscholastic athletics.
- (3) Maintenance of proper balance between athletics and other activities.
- (4) The improvement of relationships between schools and officials and between spectators and officials.
- (5) Determination of the status and extent of athletics in junior high schools.
- (6) A study of the problems involved in relationship to possible benefits to be derived from interscholastic athletic competition by girls. It may be possible that some program for girls should be encouraged other than that usually found in schools that sponsor only interscholastic athletic activities for them.
- (7) Possible ways by which the State Association might aid high schools in meeting problems incurred in injuries resulting from athletic competition. Ways of prevention as well as adequate care of those receiving injuries should be given consideration.

(b) *Health instructions*.—In 1934 a committee of persons outside the State department was appointed by the State superintendent to cooperate with the director of Curriculum Research in the preparation of instructional material on the effects of alcohol and narcotics, and in 1936 a bulletin on this subject was issued.

In the field of health instruction four bulletins (undated) for teachers were recently prepared by the Michigan Joint Committee on Health Education, of which the State department of education is only 1 of 27 organizations represented.

<sup>1</sup> Ninety-fourth Report of the Superintendent of Public Instruction. For the Biennium 1935-37. Lansing, Mich.

## Minnesota

### Historical Development

In Minnesota a law requiring physical and health education in public schools was passed in 1923 and a supervisor was appointed in that year. Supervision in this field has been continuous since that year.

### Legislation

The law of 1923 requires that—

... there shall be established and provided in all the public schools of this State physical and health education, training and instruction of pupils of both sexes and every pupil attending any such school, insofar as he or she is physically fit and able to do so, shall take the course or courses therein as provided for in this act. Suitable, modified courses shall be provided for students physically or mentally unfit to take the course or courses prescribed for normal pupils ... provided that high-school students in the junior and senior years need not take such course unless required by the local school authorities (3073). All colleges, schools, and other educational institutions in this State giving teacher training shall provide a course or courses in physical and health education, training, and instruction and every pupil attending ... shall take such course or courses (3074).

The commissioner of education shall supervise the administration of this act and shall prescribe the necessary course or courses in physical and health education training and instruction, and make such rules and regulations and prepare or cause to be prepared, published, and distributed any such manual or manuals of instruction, or courses of study, or other matter, as he may deem necessary or suitable to carry out the provisions thereof (3075).

In the law there is an indirect permissive reference to "physical or medical examinations." A later statute makes it—

... the duty of every school nurse, school physician, school attendance officer, superintendent of schools, principal, teacher, and of the persons charged with the duty of compiling and keeping the school census records to cause a permanent public health record to be kept for every child of school age. ... It shall contain a record of such health matters as shall be prescribed by the board of health, and of all mental and physical defects and handicaps which might permanently cripple or handicap the child.

It shall be the duty of the State commissioner of education to cause a report to be made periodically to the children's bureau of the State of all diseases and defects that are of a continuous nature or that might result in a permanent handicap to the child, which have not been heretofore reported. He shall also furnish to the State board of health such information from the records as that board shall desire (5356.3).

The law was more intent on finding and recording "permanent" disabilities than on improving the general condition of the child and the State department of education is required to report any such conditions to the department of health. It is within the power of the school board to employ a school physician, or a school nurse, and a nurse especially qualified for public health work is recommended.

Code XIV-A-7-Revised

STATE OF MINNESOTA  
DEPARTMENT OF EDUCATION  
DIVISION OF HEALTH AND PHYSICAL EDUCATION  
Self-Survey Form For Physical Education

The well-balanced, well-developed, and desirable program in physical education presents many problems. It is the purpose of the following questions to present the problems of the field to you. It should serve as a check list to evaluate the program in physical education and show where improvement is possible and desirable. Plans should be made and put into operation for the solving of every problem and the results checked at frequent intervals.

It is suggested that some time be spent on each question. Some new thought or method may come as a result. It is not sufficient to answer each question with either "Yes" or "No". Each is a challenge to you.

#### COURSE OF STUDY

1. Are you familiar with the principles and objectives of physical education?
2. Have you checked the content of your courses with Bulletin C-I and the National Physical Education Curriculum?
3. Do you have a complete written lesson plan for each class made out in advance for the entire year?
4. Is a copy of each plan on file in the superintendent's office?
5. Do you keep a record of such plans from year to year?
6. Do you attempt to improve the content of the physical education program from year to year?
7. Is the reference material in your department up to date and adequate?

#### METHODS

8. Do you consider the physical education period primarily an instructional period?
9. Do you make use of pupil leadership in physical education classes?
10. Do you divide your classes into squads?
11. Do you provide different activities for each grade, age or ability group? In other words, you do not give the same prescription to all groups.
12. Is your program of activities graded?
13. Do you require different degrees of skill for each grade, graduated in difficulty according to classification?
14. Do you select activities that will keep all of the class actively engaged all of the time?
15. When teaching games such as basketball which require only a small group for play, do you see to it that the rest of the class is kept busy with some other activity?
16. Do you spend the majority of the period in teaching game skills and fundamentals, self-testing stunts, relays, tumbling, rhythms, etc.?
17. Do you spend a lesser portion of the time in class work on the actual playing of the games?
18. Do you use Achievement Tests?
19. Do you use objective skill tests to measure the performance or improvement in skills that are taught during the class period?
20. Do you use some Motor Ability Test?
21. Do you use the Physical Capacity Test?
22. Do you classify your pupils according to their scores on the above mentioned tests of their individual differences into homogeneous groups?
23. Do you keep a permanent record card for each pupil that is up-to-date, containing the scores of all of the standard tests and skills that he has taken?
24. Do you give a grade in physical education on some other basis than attendance or appearing for work in uniform?
25. Do you consider the improvement the pupil has made rather than the ability to perform when grading?
26. Do you take less than a minute to take roll?
27. Do you have regular periodic measurements for a height-weight program?
28. Do you conduct class out-of-doors whenever possible?
29. Do you provide for individual differences in your program?
30. Do you have Play Days for all of the pupils? Grades I-XII.
31. Do you have a yearly demonstration of physical education activities?
32. Do you include sports in your program that have a definite carry-over value?
33. Do you teach sports that require only two to four participants?
34. Do you include outdoor winter sports in the physical education program?

35. Do you provide variety and balance of activity in the classwork?
36. Do you give individual instruction as well as group instruction?
37. Do you require your pupil leaders to aid you in instruction?
38. Do you consider pupil interest in the activities offered?
39. Do you attempt to develop pupil interest in the activities taught?
40. Do you spend too much time on one activity?
41. Is your program of activities balanced and varied?
42. Do you provide activities and exercises that tend to develop the child who is physically unable to participate in regular physical education?
43. Do you require or recommend a physical examination by a physician each year as a prerequisite for physical education and extra-curricular activities in physical education?
44. Do you check general conditions of health such as skin, feet, and cleanliness of body and clothing of pupils at regular intervals?
45. Do you consider the needs of the individual as more important than the needs of the class?
46. Have you eliminated girls' interscholastic athletics and substituted a G. A. A. program?
47. Do you have an intramural program for boys?
48. Do you provide a rest program for those pupils who due to their physical condition should rest rather than participate in physical education activities?
49. Do you have a standard excuse form for the physician to use which states definitely the defect, containing a list of activities which the physician may check for the defective pupil's participation, and which indicates the length of time the pupil is to be excused?

#### EXTRA-CURRICULAR PROGRAM

50. Does your extra-curricular program correlate closely with the class work in physical education?
51. Do you consider the G. A. A. or the intramural program the laboratory or play period for the physical education program?
52. Is the extra-curricular program arranged so that it offers an opportunity for plan and practice in those activities taught in physical education class?
53. Do you make use of pupil leadership in the extra-curricular program?
54. Do you feel that the extra-curricular program is an integral part of the physical education program?
55. Do you provide as much time for play and practice to those pupils that are not members of some inter-school squad as those that are?
56. Do you have a noon hour program for pupils that eat their lunch at school?
57. Is the noon hour program a part of the extra-curricular program so that the rural pupils have the same opportunity as the town pupils?
58. Do you provide for co-recreation in the extra-curricular program?

The following sports are recommended for co-recreation:

Skating	Horseshoes
Winter Carnival	Archery
Skiing	Shuffleboard
Hiking	Table Tennis
Ariel Dart	Tap Dancing or Clog
Badminton	Folk Dancing
Golf	Social Dancing
Tennis	Deck Tennis or Tennisquet
Coasting	Bicycling
Paddle Tennis	Roller Skating

59. Do you have some point system whereby pupils may win a school letter or some similar award for participation in the extra-curricular program? (G. A. A. program for girls, intramural athletics for boys.)
60. Do you have a leaders' club or organization?
61. How many of the following activities do you include in your program?

Activities for boys only are:

Football	Ski Jumping
Touch Football	Gym Team
Baseball	Wrestling
Track and Field	Boxing
Ice Hockey	

Activities that are suitable for boys' programs and girls' programs:

Soccer	Badminton
Speed Ball	Squash
Soft Ball	Golf
Skating	Tennis
Ice Racing	Archery
Winter Carnival	Fly and Ball Casting
Skiing	Shuffleboard
Hiking	Social Dancing
Basketball	Tumbling
Handball	Fencing
Horseshoes	Deck Tennis or Tennisquet
Table Tennis	Bicycling
Tap Dancing or Clog	Coasting
Folk Dancing	Paddle Tennis
Volleyball	Roller Skating
Ariel Dart	

Notation: Field Hockey may be added to this list for girls.

62. Do you have any other sports in your extra-curricular program?
63. Do you have 100% participation of pupils in the extra-curricular program? That is, do you have every pupil taking part in some game activity and also an individual or couple sport during the year?
64. Do you emphasize sports that have a definite carry-over value in afterschool life?
65. Are practice periods provided in intramural activities so that the pupil is prepared physically to participate in competitive sport?
66. Do you classify pupils for extra-curricular activities so that participants of a contest are equal in general ability?

**LOCKER AND SHOWER ROOM**

67. Do you require a shower bath of each pupil after every physical education and intramural or G. A. A. period?
68. Do you teach pupils how to take a shower bath?
69. Do you excuse from activity and bath all pupils with colds or infections of the respiratory tract?
70. Do you require pupils to use a towel for drying after a shower bath?
71. Do you require pupils to use clean towels for drying?
72. Do you have a working plan that provides a clean towel for each pupil each time he uses the showers?
73. Do you require pupils to have their complete gymnasium uniforms washed at frequent intervals?
74. Are adequate soap dispensers placed and kept filled in the shower rooms?
75. Are the drains in the shower and locker rooms kept clean so that the water runs off freely?
76. Do you supervise the shower and locker rooms when they are in use?
77. Do you have adequate shower heads in your shower room?  
For boys—one shower head for every four boys is recommended.  
For girls—one shower head for every three girls is recommended.  
\* If gang showers are used for the girls, two private cubicles should be provided.
78. Does each pupil have a locker or basket for his physical education clothes?
79. Do you have some provision for drying wet equipment?
80. Are locker and shower rooms kept clean and sanitary?
81. Is some solution used on the floor of the shower and locker rooms that tends to prevent fungus infection?
82. Are locker and shower rooms ventilated so that disagreeable odors are carried away?
83. Is there an adequate number of mirrors placed in the locker room?
84. Do you allow the pupils to take more than 7 minutes to dress for the physical education class period?
85. Do you allow the pupils to take more than 10-12 minutes for a shower and dressing after a physical education class period?

**SAFETY EDUCATION**

86. Is a drinking fountain provided in the locker room?
87. Do you include teaching of safety in physical activities as a part of your instructional program?

88. Are all physical education activities constantly supervised?
89. Do you have first aid material handy for treatment in case of emergency?
90. Do you allow pupils with boils or other skin infections to use the locker and shower rooms?
91. Do you excuse such pupils from physical activity until their infectious condition is cleared up?
92. Do you allow pupils to use dangerous equipment without adequate supervision?
93. Is the gymnasium floor too highly polished for safety? (slippery)
94. Do you carefully remove all pieces of apparatus while the pupils are playing games?
95. Is the apparatus placed so that it does not interfere with the use of free space designed for games?
96. Are ropes and chains of suspended apparatus inspected regularly for worn or defective parts?
97. Have you removed those portions of bleachers, etc., that might be a hazard to the safety of pupils on the gymnasium floor?
98. Is proper storage space provided for movable apparatus and portable equipment and is the space properly used?
99. Are mats provided under bars and horses?
100. Are mats cleaned periodically?
101. Are uprights, radiators or other projections against which a participant might fall or be pushed, padded?
102. Are all obstructions removed from the area of play on the playground?
103. Is the ground level and surfaced in such a manner that it is as safe as possible under all weather conditions?
104. Do you inspect the playground equipment for its safety at regular intervals?
105. Does the use of one piece of apparatus interfere with the use of another on the playground?
106. Are the pupils required to wear suitable heel-less rubber-soled shoes for physical education work?

**GENERAL**

107. Do you have a definite budget for obtaining new equipment and replacing old worn out equipment?
108. Do you have an up-to-date inventory of your equipment?
109. Do you keep equipment in repair?
110. Do you have a safe and adequate storage place for the equipment?
111. Do you check in equipment at the close of each class?

112. Do you have adequate equipment? The term "adequate equipment" varies with the local situation. A good program, however, deems it essential to have a sufficient number of each kind of equipment so that each squad or individual may be equipped.

#### REPLACEABLE EQUIPMENT

Aerial Dart Birds	Ice Hockey Sticks
Aerial Dart Rackets	Jumping Ropes (Ind.)
Archery Arrows	Jumping Ropes (16' )
Archery Bows	Medicine Balls
Archery Targets	Paddle Tennis Nets
Badminton Birds	Paddle Tennis Racket
Badminton Rackets	Ping Pong Balls
Baseballs	Ping Pong Nets
Baseball Bases	Ping Pong Paddles
Baseball Bats	Rubber Balls (4")
Basketballs	Rubber Balls
Bean Bags	(Assorted Sizes)
Bowling Set	Shin Guards
Boxing Gloves	Shuffleboard Sets
Dart Sets	Soccer Balls
Deck Tennis Rings	Soft Balls
(Tenniquott)	Soft Ball Bats
Field Hockey Balls	Speed Balls
Field Hockey Clubs	Sport Balls (24")
Footballs	Tether Balls
Golf Balls	Tether Ball Paddles
Golf Clubs	Tennis Balls
Handballs	Tennis Nets
Horseshoes (pair)	Tennis Rackets
Horseshoes (indoor)	Volleyballs
Horseshoe Stakes	Volleyball Nets
Ice Hockey Puck	

#### PERMANENT EQUIPMENT

Back-and-Leg Dynamometer	Photograph and Records
Balance Beams	Ping Pong Tables
Bench	Rings
Climbing Ropes	Scales
or Poles	Shots
Dumbbells	Spring Board
Discus	Stall Bars
Eye Guards	Stop Watch
Hand Dynamometer	(Split Record)
High Jump Standards	Tape Line
Horizontal Bar	Tumbling Belt
Horse	Volleyball Standards
Hurdles	Vaulting Box
Indian Clubs	Wands
Mats	Whistles
Parallel Bars	

113. Do you use a bulletin board?
114. Do you keep pictures and diagrams posted on the bulletin board as well as schedules of extra-curricular activities?
115. Do you change the illustrative material on the bulletin boards often and do you add to your supply from year to year?
116. Do you have articles appear in the local papers regularly about the various activities of your program in physical education?
117. Do you require that all pupils be properly attired for work in physical education?
118. Do you also have articles printed in your local papers during American Education Week concerning the principles and philosophy of physical education as well as the objectives that you are trying to accomplish?
119. Do you keep the equipment in repair and clean it (treating leather goods with some preparation for preservation) before storing it away for future use?
120. Do you prepare and present a suitable program to your school on Child Health Day?
121. Can you show by definite and objective means the growth and increased well-being of the pupils in your classes?

#### PERSONAL

122. Are you really interested in physical education?
123. Do you spend enough time on your problems of teaching?
124. Do you wear a suitable gymnasium costume when teaching?
125. Do you look for new ideas and methods of teaching? Do you put them into practice?
126. Do you check your own accomplishments as well as that of the pupils?
127. Do you make personal contacts with the pupils, parents, the public, and other teachers?
128. Can you demonstrate the various skills with reasonable ability?
129. Do you maintain contacts with professional groups of teachers in physical education?
130. Do you subscribe to the leading journals of physical education?
131. Are you thinking ahead?
132. Are you interested in your professional growth? Are you constantly learning new skills and new ways of teaching?
133. Have you read the recent books on physical education?



### Organization

By law the State board of education is required to appoint a "State Director of Physical and Health Education and Training" to administer, supervise, and direct the program as described above. (3076.) The title of director has been changed to supervisor.

The State supervisor of health and physical education is directly responsible to the Commissioner of Education but he is in close relationship with the State officers concerned with rural schools, with Indian education, and with school buildings. He works directly with the elementary and secondary schools and junior colleges, and he is also interested in the work of the teacher-training institutions.

In outlining the scope of the State program, the supervisor has construed the words "health education" liberally to cover health teaching, health service and health supervision, and activities in all these fields are promoted. Recreation is also included.

### Objectives and Activities

(a) *Accomplishments.*—The *State Manual of Physical and Health Education*, prepared a few years ago, is supplemented by suggestive circulars and material contained in a periodic *News Letter*. A publication on the *Rural School Play Day Program* was recently published and a manual on *Community Recreation* was issued tentatively. A *Bulletin for the Secondary School Curriculum on the Effects of Alcohol* (the teaching of which is required by law) was prepared in 1934. Committees are working now with the supervisor in the preparation and revision of courses of study.

As suggestive of what should be done, a Self-Survey Form with 133 questions concerning the program in physical education is issued by the supervisor and a report concerning work in health education, physical education, and recreation is required annually. (See forms on pp. 35-39.)

The supervisor spends most of his time in the field. In 1938-39 he visited 244 graded and high schools. He usually spends from a third to a half day in each school observing, checking, and advising, and his visit is followed by a letter to the board and to the superintendent.

Twelve to fifteen regional conferences are held annually each attended by some 50 teachers, principals, and superintendents. These usually occupy an afternoon and evening or all day Saturday. The papers and discussions are chiefly by teachers though the superintendents, principals, and the State supervisor participate. An outside speaker is sometimes secured.

The supervisor is much concerned with the training of new teachers and conferences are held with representatives of the teacher-training institutions looking toward the adequate development of major and

minor courses. There have already been evident results in better standards and more uniform training.

(b) *Limitations.*—While progress is being made the supervisor finds boards and administrators unwilling to spend the amount of money needed for first-class programs in health and physical education. They are not convinced of the desirability and significance of health examinations. Administrators in smaller schools conceive of physical education purely as an activity program and make no provision for health education. (Of 500 high and graded schools, only 169 made arrangements for medical examinations in 1939.)

### Relationship With Other State Organizations

The supervisor is in operating relationship with the State department of health in the promotion of health examinations by teachers, as prescribed by law, and in encouraging the employment of physicians and nurses. The Girls' Athletic Association of the Minnesota Physical Education Association has cooperated with the State Department in the publication of a *Suggested Program for Girls' Athletic Associations*.

## Missouri

### Historical Development

In 1921 a Director of Health, Physical Education, and Recreation was appointed in the State Department of Education in compliance with the law passed in that year requiring such an appointment. This position was maintained until 1932. In 1937 a supervisor in the field of health education was appointed through joint arrangement with the State Department of Health and in 1939 a supervisor of physical education was added to the staff.

### Legislation

(a) *Affecting the State Department of Education.*—In 1921 a Statute was enacted which read as follows: To promote the physical development of boys and girls in our public schools and the correction of their physical defects and impairments, to secure proper health habits and to secure scientific sanitation in the schools, the State superintendent of public schools is hereby authorized and directed—

- (1) To adopt and promulgate such rules and regulations as he may deem necessary to secure courses in physical education to all pupils and students in all public schools and in all educational institutions supported in whole or in part by the State.
- (2) To compile and print a manual of physical education and health supervision and school nurse service to be distributed for use by the teachers, supervisors of physical education, school health supervisors, and school nurses of the State.
- (3) To appoint a State director of physical education who shall, under the direction of the State superintendent of public schools, see that all rules and regulations relating to physical education, health habits, school

sanitation and playground activities and athletics are carried out, and to authorize such expenditures for travel as he may deem necessary to carry out the provisions of this act. (*R. S., 1929, sec. 9363, Laws 1921, p. 641.*)

In 1938 the last paragraph of this law was revoked and the State superintendent was designated as the State director of physical education. (9263.) The law as it now stands is a long one and will not be given in full here. It requires that—

... all teacher-training institutions shall provide courses in physical education for the proper preparation of teachers to carry out the State rules and regulations under this section [and,] to carry out the provisions of this section, each of the directors of physical education of the five State teachers colleges, the school of education of the University of Missouri, and Lincoln University shall be known as a deputy State director of physical education and shall cooperate with the State director of physical education in promoting physical education, generally, and in proper control of competitive athletics in both elementary and secondary schools as may choose to adopt the provisions of this article. (9364.)

*(b) Affecting local schools.—*

Each county, city, and town school board employing 30 or more teachers may employ a supervisor of physical education whose qualifications for service shall be established by the superintendent of schools, for the schools under its jurisdiction, who shall, under the direction of the county, city, or town superintendent of schools, respectively, participate in making periodical physical examination of all school children . . . supervise the teaching of all subjects related to physical education and the physical well-being of the children under his charge, direct supervised play and gymnastics in the schools and control school athletics. [A "supervisor of health" may also be employed and one or more school nurses] who shall serve under the administration of the county, city, or town superintendent of schools as the case may be or under the supervisor of physical education if so delegated by the superintendent in charge. (9366.)

Physiology and hygiene, including their several branches, with special instruction as to tuberculosis, its nature, causes, and prevention, and the effect of alcoholic drinks, narcotics, and stimulants on the human system, shall constitute a part of the course of instruction, and be taught in all schools supported wholly or in part by public money or under State control. (9236)

A chapter or chapters on dental hygiene are "required in all textbooks on physiology used in the public schools of the State," the said chapter or chapters to be edited or approved by a competent committee of five members "three of whom shall be selected by the State dental society, one by the State Board of Health and one by the State superintendent of schools." (9237)

It shall be unlawful on and after the first day of July 1922 to sell in this State for use in the public schools, any textbook on physiology which does not contain the aforesaid chapter or chapters; [and the offering for sale of any such textbooks] shall be a misdemeanor. (9238)

(c) *Affecting the State department of health.*—In 1919 a law was passed permitting the physical examination of children and the responsibility for the "supervision and regulation of the physical inspection of school children" was placed with the State Board of Health.

### Organization

(a) *The supervisor of physical education.*—The present supervisor serves as spokesman for the State superintendent since, by wording of the law, the latter is the Director of Physical Education. (This supervisor was appointed after the visit of the representatives of this Office.)

(b) *The State supervisor of health education.*—In 1937 the position of State supervisor of health education was established by cooperative agreement between the State department of education and the State department of health, the appointee to this office to serve as a "coordinator" of the school health work of the two departments. The salary and expenses of this official are paid by the department of health but she works under the direct supervision of the State superintendent and in the fields of teacher training and elementary and secondary education. Safety education is also included in her program.

### Objectives and Activities

(a) *Accomplishments.*—The efforts of the supervisor of health education are directed especially at the (1) improvement of teacher training, and (2) assistance to teachers in service. The supervisor made a survey of the status of training for school health work in the teachers colleges, the results of which were presented by the State superintendent before the State educational conference with the recommendation that the college administrators improve any shortcomings in their curricula and secure an adequate staff for instruction.

The service to teachers consists in (1) the production and distribution of literature (25,137 pieces in the past year); (2) health talks, which were given upon request to 62 groups totalling 6,490 persons; (3) articles concerning school health were contributed to newspapers and to journals going to physicians, dentists, parents, teachers, and administrators (bulletins for teachers are also published); (4) interest in providing school-nursing services is promoted and in 1 year county services were about doubled. This is a generalized service and is financed up to 50 percent by the State department of health; (5) field demonstrations will be given until all counties have been covered. Twenty-two counties in practically all sections of the State were given the program in 1938 and 2,400 teachers attended.

Scheduled in cooperation with district health officers, county and city superintendents, these demonstrations require a full day and are conducted by the State supervisor of health education with the assistance of one or more pub-

lic health nurses in the field. Eight fundamental school health procedures are covered by the demonstrations: Morning inspection, vision testing, hearing testing, hot lunch, weighing and measuring, birth registration, handwashing, and first-aid. Teachers participate in the program by serving as subjects for demonstrations. Appropriate literature is exhibited and a specially prepared booklet called "Health Aids for Teachers" is distributed. Parent-teacher members, school directors, local physicians, and dentists are invited.

(b) *Limitations.*—The chief hindrances to better health work are (1) lack of training on the part of most teachers which in turn is due to the fact that little training is offered in the State colleges; (2) lack of adequate health service personnel in the schools. Relatively few school physicians, dentists, and nurses are employed by the schools and it is necessary to depend upon private practitioners for health service program. For this reason, periodic examinations, correction of defects, and immunization are inadequate.

#### Relationship With Other State Agencies

- (a) *The State highway department* cooperates in the promotion of safety education by furnishing literature to teachers and providing speakers for pupil and parent groups.
- (b) *The Work Projects Administration* assists materially with nutrition problems through its hot school-lunch program for which the WPA provides labor at no cost to the schools.
- (c) *The State Social Security Commission* through its Federal Surplus Commodities Division likewise contributes substantially to the feeding program by supplying surplus commodity foods to schools at no cost.
- (d) *The National Youth Administration* makes its contribution to the school health program also through provision of labor for hot lunches.

### Nebraska

#### Historical Development

Although in Nebraska there is no special legislation on the subject, a Director of Physical Education was appointed in 1931. Since 1934 his title has been changed to that of acting director. The Acting Director is also the Director of Certification.

#### Legislation

(a) *Applying to the State Department.*—There are no laws referring directly to activities of the State department in the field of health work, safety, or physical education, except that—

The State superintendent and chief deputy fire commissioner shall prepare a book arranged in chapters or lessons on fire dangers and prevention. It shall be the duty of the State superintendent to distribute these books to teachers. (79-1202.)

(b) *Applying to local boards.*—

The board shall have the care and custody of the schoolhouse and other property of the district. (79-509) Provisions shall be made for instructing the pupils in all schools supported by public money or under State control, in physiology and hygiene with special reference to the effects of alcoholic drinks and other stimulants and narcotics upon the human system. (79-1409) No certificate shall be granted to any person to teach in the public schools of the State of Nebraska who has not completed a satisfactory course or passed a satisfactory examination in physiology and hygiene with especial reference to the effects of alcoholic drinks, \* \* \*. (79-1410)

It shall be the duty of every teacher engaged in teaching in the schools of the State, separately and carefully to test and examine every child under his jurisdiction to ascertain if such child is suffering from defective sight or hearing or diseased teeth, or breathes through its mouth, . . . (79-2113) It shall be the duty of the boards of education and school boards of the several districts of the State to enforce the provisions of this act. (79-2116) Boards of education may employ regularly licensed physicians to make the tests. (79-2117)

(c) *Applying to the State department of health.*—

The State board of health shall provide rules for making [the tests mentioned above and] furnish test cards, blanks, and other useful appliances for carrying out the purposes of this act. (79-2114)

### Organization

The acting director of physical education was appointed by the State superintendent under the general powers conferred upon him. He is directly responsible to the State superintendent. He is in advisory relationship with the director of the bureau of the education and registration of nurses.

### Objectives and Activities

(a) *Accomplishments.*—A course of study in physical education was published in 1931 which was revised, with the assistance of a committee of teachers, in 1938. This course was prepared primarily for use in rural elementary schools but it "may be used with profit in the elementary grades of all schools of the State." The course is detailed and is confined to physical activities with the exception of a section devoted to first-aid. The caption on the cover reads "Course of Study for Normal Training High Schools," and it is evident that teachers are to be trained in the use of the syllabus.

The acting director is especially interested in the training of teachers and the development of physical education activities in rural elementary schools and in small city schools, elementary and secondary. Besides the course of study mentioned above, which is fundamental to these objectives, the acting director finds conferences, and especially individual conferences, with county superintendents, local administrators, and teachers especially effective.

(b) *Limitations.*—Because of his duties in the field of certification, the acting director can spend only a small portion of his time in the development of physical education. His chief limitation otherwise is the fact that there is no law requiring physical education in schools, either elementary or secondary.

Apparently the State department exercises no supervision over the health instruction or health examinations which are required by law.

#### **Relationship With Other State Agencies**

The acting director is in an advisory relationship with the State department of health and he serves as a member of the advisory committee of the State department of child welfare.

By law the State superintendent and the chief fire commissioner are required to prepare and distribute a series of lessons on fire dangers and fire prevention. Such a publication was prepared and distributed in 1938.

By law (*S. L. 1935, p. 135*) the general supervision of the education of nurses and their certification is placed in the Department of Education. There is a bureau in charge of this work consisting of six members, one of whom serves as the State director of the bureau. The bureau establishes rules and regulations for the accrediting of schools of nursing, requirements pertaining to licensure and registration, and regulations for State examinations.

### **New Hampshire**

#### **Historical Development**

Since 1919 the State of New Hampshire has had a supervisor of health whose chief responsibilities are the promotion of health services and, in this connection, the direction of school nursing.

#### **Legislation**

(a) *Applying to the State board of education.*—The State board of education of New Hampshire is expected to—

... investigate the condition and efficiency of public education with special reference to the instruction given in physiology and hygiene in relation to the effect of alcohol and narcotics on the human system, prescribe such a course in respect to these subjects as will stimulate and guide public sentiment and give a detailed account of its doings in relation thereto in its biennial report. (*P. L. Ch. 116, IX.*)

The State board of health shall prescribe the directions for tests of sight and hearing and the State board of education shall, in cooperation with the State board of health, prescribe instruction, test cards, blanks, record books, and other useful appliances for carrying out the provisions of this subdivision and shall provide for students in normal schools, instruction, and practice in the best methods of testing the sight and hearing of children. (*Ch. 123, 23.*)

(b) *Applying to local boards.*—

It shall be the duty of the school board of every district in the State to furnish each teacher of a public school a sufficient number of copies of the bulletin on tuberculosis, whenever issued by the State board of health, to enable the said teacher, whose duty it shall be, to distribute one copy to each family represented in said school district. (Ch. 123, 7.)

Any school district may appoint one or more school physicians who . . . shall at least once a year, upon notice and in the presence of the teacher, make such an examination of every pupil . . . and of every teacher, janitor, and other employee of the schools, committed to his charge, and of the school buildings, yards, and surroundings thereof as the protection of the health of the pupils may require. (Ch. 123, 17) The school physician shall cause every child in the public schools to be carefully tested and examined in the presence of the teacher, at least once in every school year, to ascertain whether he is suffering from defective sight or hearing, or from any other disability, or defect, tending to prevent his receiving the full benefit of his school work, or requiring a modification of this school work in order to prevent injury to the child or to secure the best educational results. The tests of sight and hearing shall be made by the teacher under the direction of the school physician. (Ch. 123, 21).

The State Board of Education in 1919 adopted a regulation requiring that:

All districts which have not adopted medical inspection must employ a school physician or school nurse for the physical examination of children, and superintendents must include physical exercise in the program for all elementary schools.

### Organization

"The State board, upon nomination of the Commissioner, shall appoint and fix the terms of employment of its deputy commissioners and other officers and employees." (Ch. 116, 10.) Under this provision a State Supervisor of Health was appointed in 1919 for the promotion of health services; and in this connection, the supervision and direction of school nurses. She is directly responsible to the commissioner of education. Within the department there is close cooperation with the divisions of elementary and secondary schools and with that of home economics, for example, in the organization of home hygiene classes, in connection with projects for improved nutrition and in the preparation of a bulletin on safety instruction. [Instruction in health and in safety falls under the direction of the elementary and high-school "agents."]

### Objectives and Activities

(a) *Accomplishments.*—The supervisor works through the superintendents of the local school unions. Besides her work in elementary and secondary schools, her supervisory activities extend to the two teacher-training schools.

The most effective activities of the supervisor have been (1) help in selection of the school nurse; (2) individual assistance in organizing the work of the nurse; (3) visitation of the nurse while at work; (4) regional conferences and a summer institute for nurses; (5) organization of State-wide audiometer testing for defects in hearing.

(b) *Limitations.*—The problem of securing the treatment of physical defects through the home is a troublesome one and there is need for more frequent employment of medical specialists and of dentists in the examination of children.

#### **Relations With Other State Agencies**

The department of education and that of health are in constant contact and seem "almost one department." They work together in the control of communicable disease. The supervisor assists in the preparation of the sanitary code.

The State department of welfare, through its division on sight conservation, has been of assistance in securing special examinations of the visually defective and in providing glasses and operations.

### **New Jersey**

#### **Historical Development**

By a statute of 1917 "a course in physical training" was "established and made a part of the course of instruction in the public schools" of New Jersey. "To make the physical training law fully effective" two directors were employed by the State department in 1918 and supervision in this and related fields has been continuous.

#### **Legislation**

The laws of New Jersey concerning provisions for the physical welfare of school children and school employees are most inclusive and detailed, and they are supplemented by specific rules and regulations of the State board of education. All of them have a bearing on the supervisory activities of the State department but it was the law of 1917 which gave the commissioner of education the power to establish such supervision.

(a) *Law permitting the employment of supervisors.*—The ubiquitous requirement concerning instruction in physiology, hygiene, and the effects of alcohol, which antedates other statutes in the field of school health work, was expanded and supplemented (as was also that concerning medical inspection, passed in 1906) by the law of 1917 which made "physical training" compulsory. Physical training was interpreted broadly. It was to—

... include exercises, callisthenics, formation drills, instruction in personal and community health and safety and in the correction and prevention of bodily deficiency, and such other features and details as may aid in carrying out these purposes, together with instruction as to the privileges and responsi-

bilities of citizenship, as they relate to community and national welfare, with special reference to developing bodily strength and vigor, and producing the highest type of patriotic citizenship; and, in addition, for female pupils, instruction in domestic hygiene, first aid, and nursing. To promote further the aims of this course any additional requirements or regulations as to medical inspection of school children may be imposed. (18: 14-93.) The instruction and courses in physical training shall be subject to the general supervision and direction of the commissioner, (18: 14-95) [and he] may employ experts to assist him in the preparation of the course and in putting it into operation. (18: 14-94.)

The State board shall adopt regulations fixing the necessary qualifications of teachers of physical training, and shall require all students of the State teachers colleges to receive thorough instruction in such courses. It shall provide instruction for students in attendance at the State summer schools who shall elect to take this instruction. (18: 14-98.)

The State commissioner of education shall prepare and publish, from time to time, handbooks or manuals on accident prevention . . . and shall furnish a copy of these to each teacher required to give instruction in accident prevention. The commissioner shall prepare suggested programs of study which shall organize this instruction in connection with allied subjects. (18: 19-2.)

(b) *Laws or regulations applying directly to local boards.*—The State laws and the rules of the State board<sup>1</sup> require local boards to make adequate provisions for safe and healthful living; each building is to be supplied with a first-aid outfit; every board is to employ a medical inspector and may also employ a nurse. The medical inspector or the nurse under his immediate direction, "shall examine every pupil to learn whether any physical defect exists, and shall keep a record from year to year of his growth and development," (18: 14-57) [and] boards of education shall submit reports of medical inspection to the commissioner of education at times and in the form prescribed by the commissioner. (*Rules and Regulations No. 71.*) The school physician shall also instruct the teachers in methods for the promotion of health and the prevention of disease. A dental service for indigent pupils may be set up by each school. Periodically the presence or absence of active or communicable tuberculosis shall be determined and "with respect to frequency, procedure, and selection of pupils" for examination "the rules and regulations of the State board of education shall be complied with." (S. 92, 1939.)

Every board "shall require a physical examination of all employees of the board at least once in three years. . . . The scope of such examination shall be determined under rules of the State Board of Education." (S. 93, 1939.)

On entrance to the State teachers colleges—

. . . all candidates must be examined by a physician selected by the college to determine whether they are free from any disease or infirmity which would unfit them for teaching. . . . The administration of tuberculin tests shall be

<sup>1</sup> Both the laws and the rules and regulations are contained in the 1939 New Jersey School Laws.

an essential part of the health examination of all who enroll as regular students in the New Jersey State teachers colleges, the State manual training and industrial school for colored youth, and the State school for the deaf, [and] no student shall be retained in any of these schools who shows evidence of active tuberculosis. (Regs. 147, 148.) [Every applicant for employment in these institutions] shall be required to prove that he is free from active tuberculosis. (Reg. 149.)

### Organization

At the present time there is in the State department a division of health and safety and physical education with a director and an assistant in health education (who includes in her work the supervision of school nurses) and an assistant in physical education. In the organization of the department, the director is coordinate with, and has the same official relationship to the 21 county superintendents as have the assistant commissioners. As an advisory group, there is, in the State board, a committee on health, safety, and physical education consisting of 4 members of the board. Besides its supervisory work in elementary and secondary schools, the division serves in an advisory capacity to the State school for the deaf, the State manual and industrial school for colored youth, the teachers colleges, and other teacher-training institutions of the State.

### Objectives and Activities

(a) *Accomplishments.*—As stated by the director of the division in his annual report for 1932-33<sup>6</sup> the work of the division, as determined or implied by law or imposed by requests for service, includes: School sanitation, safety supervision; prevention and control of communicable disease, health supervision and service, dental supervision and service, nutrition and the school lunch, hygiene applied to school organization, hygiene applied to the teaching process, health in relation to guidance, health education, safety education and physical education, interscholastic athletics, mental hygiene, and special management of handicapped children.

The division works through the presentation of basic material for the guidance of administrators, physicians, dentists, nurses, janitors, teachers, and other personnel; visitation of schools and conferences with school officials; the holding of State and regional meetings; institutes and summer schools.

Some of the special activities of the division listed in the director's report for 1936-37 were:

Continuance of work on basic courses of study in Health, Safety, and Physical Education.

Preparation through a committee of administrators, principals, supervisors, and teachers of a course of study on automobile driving.

Conducting sectional institutes for school nurses.

<sup>6</sup> Annual report on Health and Physical Education to the Commissioner of Education, 1932-33. ms.

Supervision of a Federal project in school nursing.  
Teaching two summer school courses in health service and instruction for teachers and nurses.  
Preparation of a plan for family physician participation in the health program of the school child.  
Preparation of a code of administrative regulations for physical education and athletics.  
Assistance to schools in gymnasium planning.  
Work on revision of the school-building code.  
Preparation of exhibits for three conventions.  
Conduct of a safety poster contest sponsored through The National Safety Council.  
Study of teacher-school relationships.  
Planning and directing the annual State convention of school nurses.  
Service to the State advisory committee on recreation.  
Direction of two demonstration schools.  
Cooperation with department of motor vehicles in project on school bus inspection.  
Assisting local communities in curriculum planning.  
Study of play equipment.

Studies were begun or completed within the year on the following subjects: Methods and standards of marking in physical education; correlation between visiting teacher and school nurses; certification of physical education teachers in other States; courses listed by colleges and universities for preparation of physical education teachers; teacher liability for pupil injury in physical education or athletics; distribution of physical education teachers in relation to total pupil enrollment.

Surveys of programs, facilities, organization, and administration were made in two school systems.<sup>7</sup>

The field work of the division, which consumes about three-fourths of its time, consisted of visits to some 200 schools with conferences at the time with school officials of all types. (The school nurses are visited about every 2 years.) Conferences were held with agencies interested in, but not connected with, the schools, such as boards of health, medical societies, and parent-teacher associations. State and county conferences of professional workers in health and physical education were attended and participated in. Many visits were made and services rendered to the teacher and nurse-preparing institutes of the State, including the conduct of courses of instruction at the Trenton State teachers college. Demonstrations were given in physical education and in health education and conferences on the planning of buildings and playgrounds were held. Work was carried on with a number of county and local committees in the development of courses of study in health education.

<sup>7</sup> Annual report on Health, Safety, and Physical Education to the Commissioner of Education, 1936-37. ms.

In addition to the foregoing activities, there was the correspondence and conference service of the office; cooperation with many organizations interested in school work; the writing of articles and addresses; and attendance at many professional meetings outside the State.

While standards are set up and detailed information is furnished on procedures in all phases of the health and physical education program, the work of the division is largely promotional. However, professional requirements have been established not only for special teachers of health and physical education but for school nurses. Local schools are subsidized in the employment of nurses holding certificates of full preparation. No special requirements of school physicians have yet been made and no reports are required although a standard form for reporting activities has been recommended by the director. Sanitary surveys are expected of school physicians but they report to the superintendent of the school visited, and not to the State department.

No course of study in health and physical education has recently been published but one is now in preparation. By law, at least 150 minutes per week are to be devoted to health, safety, and physical education. The commissioner, assistant commissioners, and county superintendents are responsible for compliance with this law.

Writing of the field service, the director <sup>6</sup> remarks—

Probably no activity of the division is more important. . . . There is nothing comparable to it, for like results would be impossible through correspondence or programs. First-hand observation and the opportunity to ask questions permit a ready grasp of the situation and a detailed interpretation of the recommendations made.

(b) *Limitations.*—In no State is there a more inclusive program. The clientele is large and the division finds that it has built up an appreciation of and demand for its services which is beyond the limits of its staff and its financial resources which have not grown proportionately.

Writing 6 years ago of his field service, the director said <sup>6</sup>—

The steadily increasing demands for field service is becoming a serious problem. With only three members available for part-time work in the field, the services must be curtailed either by refusing some of the invitations or by effecting short-cut methods, a course to be avoided if possible since it invariably means inefficient work and unsatisfactory results. The cause is apparent in the expanding programs.

The division has also been hampered by lack of money for the publication of bulletins and of leaflets, and if present policies are to be pursued in a satisfactory manner, there is need of larger resources in personnel and funds.

<sup>6</sup> Annual Report on Health and Physical Education to the Commissioner of Education, 1932-33. ms.

### Relationships With Other State Organizations

The director is a member of the executive committee of the State athletic association and exercises a controlling and coordinating influence. In its planning of nursing service, the sanitation of schools and prevention of communicable disease, the division cooperates with the State department of health in the management of epidemics, and the work of medical and dental inspection brings it in contact with the State and local medical, dental, and nursing societies. Only by a thorough understanding of the aims of school health work by these organizations, can this work be fully developed. The supervisors serve on committees of these societies.

In its accident prevention and safety education, there is cooperation with the State police and motor vehicle department, in the preparation of material on safety instruction and on school transportation. Relations are intimate with the department of conservation and development and with the New Jersey Parks and Recreation Association in the promotion of physical education and recreational facilities. The division has the assistance of the State milk control board in its promotion of standards for the school lunch, and it has the close cooperation of the New Jersey Tuberculosis League in its recently inaugurated work of finding and dealing with active cases of this disease. Nor should the educational organizations of the State go unmentioned for the supervisors are in demand for addresses before the meetings of these groups.

## New York

### Historical Development

In 1913 the legislature of New York passed a law requiring the medical inspection of children in all public schools and the commissioner of education was empowered to appoint a State medical inspector whose duties were to see that the provisions of the law were fulfilled. This officer was appointed in the following year. In 1916 an act was passed which made "physical training and allied subjects" a part of the course of instruction. The matter of supervision was not mentioned in the law but a director of physical training was appointed in that year who was paid by, and functioned, under the military training commission of the State. This commission prepared a course of instruction which was adopted by the board of regents. In 1918 funds for the purpose were made available to the State department of education and the director and his assistants were transferred to that department.

In the course of time a bureau of medical inspection and a bureau of physical education were built up and at present these are embraced in a division of health and physical education.

### Legislation

The laws bearing on the subject are detailed and they are supplemented by specific regulations of the department. Only abstracts of these laws will be given here.

(a) *Laws referring to the State department of education.*—By the act of 1913 the commissioner of education was required to appoint a State medical inspector of schools who shall, under the supervision of the commissioner of education "perform such duties as may be required for carrying out the provisions of this article. The said medical inspector shall be appointed in the same manner as other employees of the education department." (*Ed. law, par. 577.*) The commissioner of education shall also appoint a specialist for eyes and ears and for audiometer tests in the bureau of medical inspection. (*Par. 577a.*)

Medical inspectors, or principals and teachers in charge of schools, are expected to make eye and ear tests of the pupils in such schools at least once a year and the commissioner of education shall prescribe and furnish to the school authorities suitable rules of instruction together with test cards, blanks, other useful appliances, and suitable apparatus when necessary for making such examinations. The commissioner shall provide for pupils in State colleges for teachers and normal schools, instruction and practice in the best methods of testing the sight and hearing of children. (*Par. 574.*)

All male and female pupils above the age of eight years in all elementary and secondary schools, shall receive as part of the prescribed courses of instruction therein such physical training under the direction of the commissioner of education as the regents may determine. Pupils above such age attending the public schools shall be required to attend upon such prescribed courses of instruction. (*Par. 695.*) It shall be the duty of the regents to adopt rules determining the subjects to be included in courses of physical training . . . the period of instruction in each of such, the qualifications of teachers, and the attendance upon such courses of instruction. (*Par. 696.*)

The nature and effects of "alcoholic drinks and other narcotics" shall be taught in connection with the various divisions of physiology and hygiene, as thoroughly as other branches in all schools under State control." (*Par. 690.*) Indirectly the statute requires the teaching of "the various divisions of physiology and hygiene" for a prescribed number of hours in all of the first eight grades. All teachers are to be trained for instruction in this field. Every school commissioner and the principal of each normal school shall at the close of each school year file with the commissioner of education an affidavit in connection with his annual report showing that the law has been complied with.

The regents "shall prescribe courses of instruction in highway safety and traffic regulation, to be followed in all schools of the State. The boards of education and trustees of the several cities and school districts of the State shall require instruction to be given in such courses."

The commissioner of education "shall be responsible for the enforcement of this article and shall cause to be inspected and supervised the instruction to be given in such subjects." (720.721.)

(b) *Applying more especially to local schools.*—The law which introduced medical inspection requires that, except in cities of the first class, "medical inspection shall be provided for all pupils attending the public schools." (Par. 570.) Besides competent physicians, boards of education or trustees may employ nurses, dentists, dental hygienists, and nutritionists who shall aid the medical inspector and shall "perform such duties, including health instruction, for the benefit of the public schools as may be prescribed by such board or trustees." (Par. 571.)

Every district employing 20 or more teachers must employ a physical education "teacher, or teachers, qualified and duly licensed under the regulation of the regents to give such instruction." Otherwise, the teachers regularly employed to teach other subjects may furnish instruction in this field. Special apportionment of money is made to districts which separately or in combination employ a duly qualified special teacher.

### Organization

There is a division of health and physical education under a director. There is a bureau of health service and a bureau of physical education each headed by a chief with a total division staff of 16 supervisors—5 concerned with medical service; 1 with oral hygiene; 2 with school nursing; 5 with physical education and recreation; 2 with health teaching; and 1 with health and physical education.

The medical inspection law requires the appointment of a director of medical inspection, a specialist for eyes and ears, and a supervisor of audiometer tests, but the other members of the supervisory staff are appointed under the provision which reads—

The commissioner of education, subject to the approval of the regents, shall have power, in conformity with their rules, to appoint all other needed officers and employees and fix their titles, duties, and salaries. (22.)

The statement of the "organization and functions of the New York State education department" approved by the board of regents in 1937<sup>9</sup> reads,

The Division of Health and Physical Education is "charged with the responsibility for organizing and supervising the program of health and physical education including (a) health education comprising health service and health teaching, and (b) physical education and recreation. The division is responsible for the administration of the program which includes the supervisory direction of the divisional staff including the Bureau of Health Service and the Bureau of Physical Education.

<sup>9</sup> University of the State of New York Bulletin No. 1118. June 15, 1937. Albany, N. Y.

Previous to the present organization, the bureaus of health service and of physical education worked independently, but the present director has sought to bring about their coordination and mutual helpfulness. An administrative manual indicating lines of responsibility for this purpose has been prepared.

The Bureau of Health Service is responsible for the administration of the medical inspection law. The bureau maintains general supervision of health examinations, as provided for under the statute, and follow-up health services, including special health education adjustments, as carried forward by the local school authorities, throughout the State. This service insures a continuous health survey of pupils in all schools of the State and encourages such procedures as will insure to the highest possible degree the prevention and correction of physical defects. It is also the function of the bureau to cooperate with all other health agencies seeking to raise the health standards of school children and to discover and adapt to practical school use the best procedures necessary to meet essential individual health needs.

The bureau of physical education is responsible for administering the physical education law and for the supervision of the program of physical education throughout the schools of the State. An important function of the bureau is to provide leadership in the field of physical education and to develop an appreciation of the importance of physical activities as a fundamental method of education adapted to serve the needs of all types of pupils, for the handicapped, normal, or gifted. The bureau is responsible for the supervision of the organization of those informal recreational activities which form a part of the program of physical education, and is also responsible for the supervision of the program of interschool athletics under the rules adopted by the Regents governing these activities.

In the general organization of the department, the division functions under the assistant commissioner for instructional supervision. It is coordinated with the divisions of elementary education, of secondary education, of school buildings and grounds, of administrative services, and of examinations and testing. The assistant commissioner for supervision is responsible for the inter-relations of these divisions.

There is an advisory council on health and physical education consisting of 15 persons representing: State congress of parents and teachers; Governor's commission for the study of educational problems in penal institutions; State federation of labor; State school boards association; State teachers association and superintendents; State dental society; State nurses association; State medical society; State association of school physicians; the State health and physical education association; the health teaching supervisors; the directors, supervisors, and teachers of health and physical education; and representatives of safety and research in education and recreation. The members of this council are appointed by the board of regents on recommendations of the director of the division. The council has proved helpful in developing and coordinating the various features of the school health program.

The work of the division is concerned with the elementary and secondary school levels but only indirectly with higher education, State teacher-educating institutions, and with private or denominational schools. \*Nor does it deal directly with the residential schools for handicapped children. Recently it has been concerned, to some extent, with recreation for adults. Responsibility for the care and educational services for physically handicapped children of all types in schools, sanitariums, and hospitals falls on the bureau of the physically handicapped children, which bureau is under the general direction of the assistant superintendent for vocational and extension education. There is, of course, a close working relationship between the school health service and the development of special classes for the handicapped.

### Objectives and Activities

(a) *Accomplishments.*—Regulations concerning procedures in health and physical education and a general statement of policy pursuant to the regulations of the commissioner of education governing health and physical education were approved by the regents and published in 1937 and 1938, respectively. These were followed by a bulletin containing details of procedures in administration and supervision of school health services. The regulations are mandatory and founded on the aforementioned laws. Very wisely these regulations are preceded by definitions of the terms employed.

(1) *Sanitary supervision.*—As fundamental for putting into practice the laws and regulations, a detailed manual of instruction was issued by the division in December 1938 on the *Administration and Supervision of School Health Service*. Beginning with a statement concerning the need for this service and the principles underlying it, there is a chapter on "Continuous health service" which goes into detail concerning first-aid, the matters of sanitation and safety, and the hygiene of instruction. Another chapter deals with the facilities, equipment, and types of annual and subsequent examinations and tests. The follow-up and educational adjustment for the treatment of defects and diseases and the personnel necessary for good service are dealt with in other sections. Copies of the various forms for recording and reporting are given and the law and regulations are added in an appendix. In all, 136 pages are devoted to outlining what is desirable and expected in this field.

(2) *Sanitation.*—The State department has no immediate influence over janitorial service or the training of janitors. The responsibility for such service is placed with the local superintendent who is "to see that adequate janitorial service is maintained at all times." There is no mistaking what that service should be for, as mentioned above, it is outlined in detail.

"Regular and thorough inspection of the school plant for the purpose of correcting any condition which constitutes a hazard to health, safety, or comfort is a specific responsibility of the school health service." Just how often routine inspections are to be made is not stated, although "it is advisable that the school physician himself inspect the buildings and grounds once a month and send a dated, signed report of his findings to the administrator." A detailed "approved form" is furnished by the division for the inspection and supervision of the health aspects of the school plant.

More direct supervision of sanitary conditions is obtained through the annual report of health and physical education (See Form A), from which the division can draw some conclusions as to school conditions and practices and make recommendations accordingly.

In the periodic visits made by the physicians of the bureau of health service, record is made concerning the extent and frequency of local surveys and the visitor himself makes an investigation of sanitary conditions.

(3) *Medical service.*—The bureau of health service is vitally concerned with local personnel for medical examinations and supervision, and a full-time physician is required to hold "a provisional certificate which meets department standards regarding approved professional courses, internship, license, registration, and experience. After completing additional approved professional courses and in-service training the holder of a provisional certificate is eligible for a permanent certificate as school medical supervisor."

More active supervision of school medical work divides itself into (a) general or continuous activities, and (b) special services as local emergency or demand arises. A review of an annual report, required of the superintendent, gives the bureau a general idea of what is being accomplished by the local service, and comments and recommendations are made by the director of the division based on the data furnished. (See Form A.)

More intimate acquaintance and assistance is rendered in the periodic visits of the staff every 5 years. A field report work sheet (Form B) is used on this visit which includes in its items not merely the work of the health service personnel but the relation of that personnel and service to other phases of the school health program. From the report of the visiting physician the chief of the bureau prepares an advisory letter, one copy of which goes to the superintendent, one to the school physician, and one to the president of the board of education.

In pursuance of the law the specialist in eyes and ears is especially engaged in perfecting and promoting examinations of these organs and in furnishing instruction in the use of the audiometer.

## FORM A

THE UNIVERSITY OF THE STATE OF NEW YORK  
THE STATE EDUCATION DEPARTMENT  
DIVISION OF HEALTH AND PHYSICAL EDUCATION  
ALBANY

## ANNUAL REPORT OF HEALTH AND PHYSICAL EDUCATION

For School Year Ending June 30, 1940

This report is to be compiled by the superintendent as soon after school closes as possible and mailed at once to the Division of Health and Physical Education, State Education Department, Albany, N. Y.

City or Village..... Superintendent .....

Number of elementary schools..... Number of secondary schools.....

Have any major changes been made in your health and physical education program since September 1939 [administration, organization, program, facilities]? Yes..... No..... Describe briefly: .....

What efforts were made to inform the school personnel, parents, nonschool health agencies, welfare agencies and the general public regarding school health and physical education services and how they might assist in improving them?.....

(Before filling out any of the following form read carefully all footnotes.)

## Health Service and Health Supervision

Give summary of health records for the school year as classified below (including all cases treated during the summer of 1939). Under item "Number of pupils examined" include all who were examined and recorded by school physician, and/or other physician.

## NOTE 1.

"Found" is to be interpreted as those defects in need of treatment by proper authorities. Coded xx and xxx on health record card.

"Treated" is to be interpreted as those under qualified treatment or advisement.

## NOTE 2.

Column "Total" must be recorded by all schools. If figures are available by grade, it will serve to indicate the prevalence of defects in specific groups.

N. B. Read all footnotes.

GRADE	Pre-sch.	Kgn	1	2	3	4	5	6	7	8	9	10	11	12	PG	Total
No. pupils registered.....																
No. pupils examined by physician (family or school).....																
No. irremediable defects <sup>1</sup> .....																
No. of defects found <sup>2</sup> .....																
No. of defects treated <sup>3</sup> .....																
No. recommended for special education <sup>4</sup> .....																
No. receiving special education <sup>5</sup> .....																
No. pupils with defects of:																
Eyes (Vision):																
No. of children receiving the Snellen test <sup>6</sup> .....																
No. wearing apparently adequate glasses ( <i>Do not report in (a) below.</i> ).....																
a No. found defective by Snellen chart, or by observation <sup>7</sup> .....																
b No. treated <sup>8</sup> .....																
c No. recommended as possible candidates for special education <sup>9</sup> .....																
d No. receiving special education <sup>10</sup> .....																
Eye defects other than vision:																
a Found.....																
b Treated.....																
Cars:																
No. children receiving group audiometer tests.....																
No. found defective (9 decibels or more).....																
No. receiving pitch range tests.....																
No. found defective (10 decibels or more).....																
No. receiving examination by otologist (10 decibels or more) <sup>11</sup> .....																

<sup>1</sup> Those coded "I" on health record card. Do not record elsewhere in report.

<sup>2</sup> Total number reported under "a" items in body of report.

<sup>3</sup> Total number reported under "b" items in body of report.

<sup>4</sup> Total number reported under "c" items in body of report.

<sup>5</sup> Total number reported under "d" items in body of report.

<sup>6</sup> All children should be tested. All children wearing glasses should be tested both with glasses and without glasses.

<sup>7</sup> Include defects of those never having worn glasses and those whose glasses are apparently inadequate.

<sup>8</sup> Total number having been under professional treatment or advisement (glasses given or not, medication, surgery, muscle training etc.)

<sup>9</sup> 20/50 Snellen notation in the better eye after correction, or recommended by eye physician or optometrist. Special report blank is available from the Department on request.

<sup>10</sup> See Education Law, section 1020 (Page 128, Bulletin on Administration and Supervision of School Health Service)

<sup>11</sup> See article J, section B, of the Regulations of the Commissioner of Education.

N. B. Read all footnotes.

GRADE	Pre-sch.	Kgn	1	2	3	4	5	6	7	8	9	10	11	12	PG	Total
a No. recommended for medical or surgical treatment after examination by otologist																
b No. receiving medical or surgical treatment																
c No. recommended for special education <sup>12</sup>																
d No. receiving special education <sup>13</sup>																
Defects other than hearing																
a Found (Do not include those reported in (a) immediately above)																
b Treated (Do not include those reported in (b) immediately above)																
No. of pupils with defects of (not number of defects):																
Nutrition a Found																
b Treated																
Teeth a Found <sup>14</sup>																
b Treated <sup>14</sup>																
Tonsils a Found																
b Treated																
Nose a Found																
b Treated																
Glands, Cervical a Found																
b Treated																
Thyroid a Found																
b Treated																
Other a Found																
b Treated																
Heart a Found																
b Treated																
c Needing special education <sup>15</sup>																
d Receiving special education <sup>16</sup>																

<sup>12</sup> Twenty decibels loss or more in the better ear, or recommended by otologist. Special report blank is available from the Department on request.

<sup>13</sup> Report number of pupils with defects in both deciduous and permanent teeth.

<sup>14</sup> Include all pupils treated by any dentist or dental clinic.

N. B. Read all footnotes.

GRADE	Pre-sch.	Kgn	1	2	3	4	5	6	7	8	9	10	11	12	PG	Total
Lungs a Found .....																
b Treated .....																
Orthopedic <sup>18</sup> a Found .....																
b Treated .....																
c Needing special education <sup>19</sup> .....																
d Receiving special education <sup>19</sup> .....																
Posture, severe <sup>18</sup> .....																
a Found .....																
b Treated .....																
c Needing special education <sup>19</sup> .....																
d Receiving special education <sup>19</sup> .....																
Feet a Found .....																
b Treated .....																
Skin, Noncommunicable .....																
a Found .....																
b Treated .....																
Hernia a Found .....																
b Treated .....																
Nervous system (except epilepsy) .....																
a Found .....																
b Treated (medical or surgical) .....																
Epilepsy a Found .....																
b Treated (medical or surgical) .....																
c Needing special education <sup>19</sup> .....																
d Receiving special education <sup>19</sup> .....																
Speech a Found .....																
b Treated .....																
c Needing special education <sup>19</sup> .....																
d Receiving special education <sup>19</sup> .....																
Other defects <sup>17</sup> a Found .....																
b Treated .....																

<sup>18</sup> See Education Law, section 1020. True orthopedic cases. Those with structural defect for whom medical or surgical treatment is necessary or has been given.

<sup>19</sup> See Education Law, section 1020. Severe posture cases needing special exercises prescribed and supervised by physician.

<sup>17</sup> Miscellaneous defects not found in the classifications above.

.....  
 (Person supplying information)

.....  
**(Signature of Superintendent)**

## Health Teaching

- 1 Was the classroom teacher directly responsible for the health teaching in all the elementary grades? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. If not, give the title of the person who did the health teaching \_\_\_\_\_
- 2 Was a specific health-teaching period included in the program, at least weekly, in grades 4 to 6? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In grade 7? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In grade 8? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In grade 9? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In grades 10-12? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 3 Was *specifically planned* health teaching included in other areas of the program? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 4 Was a special supervisor of health teaching employed to guide the classroom teachers in their health-teaching programs? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. If so, give title and name \_\_\_\_\_  
 Grades supervised \_\_\_\_\_  
 If no special supervisor was employed, give title of person responsible for such supervision and guidance in the elementary grades \_\_\_\_\_  
 In the secondary school \_\_\_\_\_
- 5 Did the classroom or home room teacher conduct the daily health inspection in the elementary grades? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In the secondary school? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 6 Do any of the pupils eat their noon lunch at school? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. If so, was at least one hot dish provided for them? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Was the preparation of this school lunch supervised by a person trained in home economics? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Do such children have a rest period or *quiet* play after lunch? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 7 Are bubbling fountains provided? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Are these fountains of the slant-stream type? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. In the absence of bubbling fountains, are paper cups furnished in sufficient quantity so that reuse is not necessary? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 8 Were handwashing facilities available for all children: Warm water? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Soap? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Individual paper towels? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 9 Did children evidence results of health teaching by washing hands after using toilet? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 10 Is there an accurate thermometer for registering room temperature in each schoolroom? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools. Was temperature noted throughout the day? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 11 Were the findings of the health examination interpreted to the teacher by a qualified person? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 12 Did the teachers use these findings in planning their health-teaching programs? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 13 Did the teachers assist in the follow-up service to obtain the treatment of remediable defects? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 14 Were parents encouraged to visit the school when a better understanding of the pupils' health needs was necessary? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 15 Who was assigned the responsibility for the organization and integration of safety education? In the elementary schools (Give title) \_\_\_\_\_  
 In the secondary schools (Give title) \_\_\_\_\_

- 16 Is a flexible master-plan, developed by the principal and entire faculty of the individual school, used by the teachers in planning and carrying out their health and safety teaching activities? Yes in \_\_\_\_\_ elementary schools. No in \_\_\_\_\_ elementary schools. Yes in \_\_\_\_\_ secondary schools. No in \_\_\_\_\_ secondary schools.

(Person supplying information)

(Signature of Superintendent)

#### Physical Education

- 1 Have any additional physical education facilities been obtained since September 1939? Yes \_\_\_\_\_ No \_\_\_\_\_ What? \_\_\_\_\_
- 2 Have any additional physical education teachers been added to the staff since September 1939? Yes \_\_\_\_\_ No \_\_\_\_\_ How many? \_\_\_\_\_
- 3 Did the board of education assume responsibility for financial support of athletics? Yes \_\_\_\_\_ No \_\_\_\_\_
- 4 Was a state "approved" record of each child in the secondary grades covering the physical education program compiled and used? Yes \_\_\_\_\_ No \_\_\_\_\_
- 5 Were flexible master plans prepared by the physical education teacher for each grade or group level and presented to the principal at the beginning of the school year? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 6 Was physical education specifically scheduled and conducted as a part of the classroom program of each elementary grade throughout the school year? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 7 Did each child in elementary grades receive physical education instruction for at least 120 minutes each week? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, how much time was scheduled for each child? \_\_\_\_\_
- 8 Was classroom teacher of grades kindergarten to grade 3 responsible for the physical education program of her own grade? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 9 Was this program under the guidance of the physical education staff? Yes \_\_\_\_\_ No \_\_\_\_\_
- 10 How was such guidance provided? By conference? \_\_\_\_\_ By demonstration teaching? \_\_\_\_\_ By lesson planning? \_\_\_\_\_
- 11 Were physical education relaxation periods conducted at least four times a day in the elementary grades? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 12 Did each pupil in the secondary schools receive physical education for at least 300 minutes each week? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, how much time was scheduled for each child? \_\_\_\_\_ What was the average total time for each pupil? \_\_\_\_\_
- 13 Were at least two periods of this time in regular instructional physical education classes? Yes \_\_\_\_\_ No \_\_\_\_\_
- 14 What was the average physical education teacher-pupil load? In the elementary schools \_\_\_\_\_ In the secondary schools \_\_\_\_\_
- 15 Were physical education laboratory games and sports regularly conducted in the secondary schools for general participation by all pupils? Yes \_\_\_\_\_ No \_\_\_\_\_
- 16 Were pupils tested in order to discover their individual physical education status and progress? Yes \_\_\_\_\_ No \_\_\_\_\_ What types of tests were used? \_\_\_\_\_
- 17 What method was used to group pupils for physical education classes in grades 7 to 12? Grade \_\_\_\_\_ PFI \_\_\_\_\_ Other tests \_\_\_\_\_ Free period \_\_\_\_\_ Others \_\_\_\_\_
- 18 Did physician's examination precede physical fitness and skill tests? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 19 Were the findings regarding the health examination of the pupils interpreted to the physical education teacher by a qualified person? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.

- 20 Was a modified or restricted program of physical education, in accordance with needs, including rest, provided for those pupils who were unable to participate in the regular physical education program? Yes in \_\_\_\_\_ schools. No in \_\_\_\_\_ schools.
- 21 Give the number of pupils whose programs were so modified. \_\_\_\_\_
- 22 Was a program of corrective physical education provided?  
 Elementary schools: Yes \_\_\_\_\_ No \_\_\_\_\_ Length of period \_\_\_\_\_ No. times a week \_\_\_\_\_  
 Secondary schools: Yes \_\_\_\_\_ No \_\_\_\_\_ Length of period \_\_\_\_\_ No. times a week \_\_\_\_\_
- 23 Did an adequate health examination precede pupils' participation in strenuous activities? Yes \_\_\_\_\_ No \_\_\_\_\_
- 24 Were periodic health examinations given athletes throughout the season? Yes \_\_\_\_\_ No \_\_\_\_\_
- 25 Were the girls' sports limited to club activities, intramural games, playdays and approved invitation activities with the emphasis on recreational and social values? Yes \_\_\_\_\_ No \_\_\_\_\_
- 26 In how many playdays did pupils in your schools participate during the year? Boys \_\_\_\_\_ Girls \_\_\_\_\_ Mixed \_\_\_\_\_ In how many invitation games did the girls participate? \_\_\_\_\_
- 27 Were programs offered: (1) during school year for (a) adults? Yes \_\_\_\_\_ No \_\_\_\_\_ (b) nonschool youth (16-21) Yes \_\_\_\_\_ No \_\_\_\_\_ (2) during summer for (a) adults Yes \_\_\_\_\_ No \_\_\_\_\_ (b) nonschool youth Yes \_\_\_\_\_ No \_\_\_\_\_ (c) children Yes \_\_\_\_\_ No \_\_\_\_\_
- 28 Were these programs under the administration of the board of education? Yes \_\_\_\_\_ No \_\_\_\_\_ And financed by it? Yes \_\_\_\_\_ No \_\_\_\_\_
- 29 Were physical education teachers used in the conduct of recreation programs? Yes \_\_\_\_\_ No \_\_\_\_\_
- 30 Were these programs supervised by member of the school faculty? Yes \_\_\_\_\_ No \_\_\_\_\_
- 31 Give name and title of person supervising the recreation programs. \_\_\_\_\_
- 32 Does your athletic program conform to the Regulations of the Commissioner of Education Governing Health and Physical Education? Yes \_\_\_\_\_ No \_\_\_\_\_

## Interscholastic Program

ACTIVITY	DURATION OF SEASON*	TOTAL NUMBER OF GAMES PLAYED	NUMBER OF BOYS PARTICIPATING	NUMBER OF THESE BOYS ELIGIBLE ACCORDING TO STATE REGULATIONS	NUMBER OF SCHOOLS REPRESENTED BY THESE DATA
Baseball					
Basketball					
Cross country					
Football					
Golf					
Ice hockey					
Soccer					
Swimming					
Tennis					
Track and field					
Others					

\* Give dates from first practice to last game.

[Person supplying information]

[Signature of Superintendent]

REMARKS:

As noted above, the medical staff is on call in response to local complaints, or requests for advisory service. There is always need of research and, more recently, in connection with the transportation of pupils—in setting up physical standards for school bus drivers, the schooling of drivers in giving first-aid, and the ventilation of buses. The local annual reports offer valuable data for studies in the evaluation and improvement of methods in health examinations and the securing of treatments.

(4) *Dental service.*—Since there is only one specialist in oral hygiene, his work is of necessity promotional and advisory. A "Guide to the Dental Hygiene Program" was prepared under the direction of the supervisor of oral hygiene and this outlines the activities of those concerned with work in this field. The supervisor makes addresses to groups of teachers and school health workers, furnishes exhibits for such meetings, and advises with school dentists and hygienists.

(5) *Nursing service.*—"The school nurses' most valuable contribution is in the field of child and parent education, the focal point in any program of child health." Accordingly New York requires special training of its school nurses as "nurse-teachers."

The two supervisors spend about 40 percent of their time in the field. They consider it highly important to visit all new nurses in their first year for as yet the training and experience they can receive before service is far from adequate. Many of them are much at sea in their new surroundings which are far more complicated than those of ordinary nursing. A bulletin on "The Work of the School Nurse-Teacher" has been prepared especially to help the inexperienced school nurse-teachers and the superintendents and principals employing them. The annual report from the superintendent mentioned above furnishes the nursing supervisors with indications as to where special assistance may be rendered and regional meetings offer opportunities for general exchange of experiences.

(6) *Physical education and recreation.*—In the field of physical education a syllabus is offered as of fundamental assistance to all grades. There is a minimum time requirement in physical activities for both elementary and secondary schools including "practice and play periods." The types of activities to be followed and the administrative procedures for physical education and athletics are stated in outline in the regulations of the commissioner. An effort is made to secure teaching, or at least supervision, by specially prepared and certified teachers.

The efforts of the supervisory staff are directed especially at assisting and encouraging local authorities in the development of their work without too evident exhibition of the powers vested in the State

department. The supervisors are on call for assistance in planning gymnasias or playground facilities and in developing programs. About 75 percent of their time, however, is spent in periodic visits to schools which are made at least every 5 years. Spot maps are kept in the office to indicate where these, and other supervisors, are located from day to day so that they may be asked to respond to local calls from schools in the neighborhood which were not scheduled for periodic visits.

Physical education is included in the annual report of the superintendent already referred to. A field report is furnished by the supervisor on his periodic visit which is mailed to the director together with any recommendations which the supervisor has made while in conference with the local authorities. (See Form C.)

The supervisors participate in State and district meetings of physical educators, in meetings of school board representatives and other administrators who need information concerning the ideas and ideals represented in the physical education program.

(7) *Recreation*.—A considerable proportion of the time of some of the supervisors is devoted to work in the field of recreation beyond the limits of the school. A publication "Play and Recreation for Children and Adults," prepared by one of the staff, furnishes a "statement of policies, procedures, and activities." Circulars concerning the development of recreational facilities have been issued and the division furnishes advisory service.

(8) *Health teaching (including safety)*.—Health instruction is represented by a supervisor devoting her time chiefly to the elementary field, one concerned with the secondary schools, and a supervisor of health and physical education who works chiefly in the realm of teacher training.

*A Guide to the Teaching of Health and Safety in Elementary Schools*, based on a published study of the *Everyday Behavior of Elementary School Children*, furnishes guidance to teachers in the essential phases of the program and a similar guide for the teaching of health in high schools is in process of preparation. A classified list of health-teaching references was recently published and practical material on the very important subject of nutrition has been prepared for teachers.

The annual report from the superintendent gives some information as to what is done in the way of health instruction and offers opportunity for comment by the supervisors, but it is evident that two supervisors cannot make periodic visits to schools unless at very long intervals. They do, however, find time for visits with study groups of teachers and for participation in summer schools.

## FORM B

THE UNIVERSITY OF THE STATE OF NEW YORK  
THE STATE EDUCATION DEPARTMENT  
DIVISION OF HEALTH AND PHYSICAL EDUCATION

## HEALTH SERVICE—FIELD REPORT

City or town \_\_\_\_\_ Date \_\_\_\_\_ Report by \_\_\_\_\_  
Name, type and address of school \_\_\_\_\_  
Date of last visit \_\_\_\_\_ By \_\_\_\_\_ Previous letters to schools \_\_\_\_\_  
Purpose of supervisory visit \_\_\_\_\_  
Persons interviewed \_\_\_\_\_

## Follow-up letters

Original to \_\_\_\_\_ Inclosures \_\_\_\_\_

Copy to \_\_\_\_\_

Copy to \_\_\_\_\_

1 Enrolment (Primary, intermediate, junior high school and senior high school grades). Indicate kind of school organization (6-4, 6-3-3 etc.).

2 Personnel (General and special). Record names of all health service personnel—physician, dentist, nurse, dental hygiene teacher and others—indicating by letters "F.T." and "P.T." whether they are on full-time or part-time basis.

## 3 Facilities

3.1 Plant (Health, examination, dental rooms, rest rooms etc.)

3.2 Equipment (Scales, audiometer, sight-meter, Snellen chart, cabinets for filing records, examining robes etc.)

3.3 Supplies (First-aid equipment, tongue depressors etc.)

\* This report is to be made out in ink, on day of supervisory visit, and immediately mailed to the Division office.

**Present program** (Check each of the following items in terms of Regulations, Statement of Policy, and instructions in Health Service Bulletin, noting outstanding merits or weaknesses.)

**4.1 Objectives** (Educational functions of health service, as outlined in above-mentioned publications)

**4.2 Records** — Current, special supplementary, cumulative. (Check completeness according to approved standards.)

**4.3 Inspections and examinations** — General and special

**4.4 Follow-up and educational adjustment** (Notification of parent; activities in securing treatment of defects; school expenditure for examinations and for treatment; provision for special educational adjustment, including acceptable developmental and preventive health education procedures and activities)

4.5 Control of communicable disease

4.6 Accidents and illnesses

4.7 Plant inspection and supervision (Check according to approved sanitary form.)

4.8 Supervision of hygiene of instruction (Check in accordance with approved policy.)

4.9 Procedures for informing school personnel, parents, nonschool health agencies, welfare agencies and general public (This includes general publicity and information on school health conditions and services; cooperating activities in securing treatment of defects etc.; and guidance for parents, pupils and teachers in procedures for preventing and correcting defects and diseases.)

5 Comments (Commendations or criticisms). Indicate outstanding features beyond minimum requirements, research activities etc.

**6 Recommendations<sup>1</sup>****7 Summary (Recapitulation, in order of importance, of imperative needs)****8 Special problems****8.1 Health teaching****8.2 Physical education****8.3 Others**

[Signed] \_\_\_\_\_

<sup>1</sup> Any recommendations that the supervisor finds it necessary to make while in conference with local authorities must be noted in this report for confirmation in the official letter concerning this visit

## FORM C

THE UNIVERSITY OF THE STATE OF NEW YORK  
THE STATE EDUCATION DEPARTMENT  
DIVISION OF HEALTH AND PHYSICAL EDUCATION

PHYSICAL EDUCATION AND RECREATION — FIELD REPORT<sup>1</sup>

City or town..... Date..... Report by.....  
Name, type and address of school.....  
Date of last supervisory visit..... By..... Previous letters to schools..... By.....  
Purpose of supervisory visit.....  
Persons interviewed.....  
Follow-up letters:  
Original to..... Inclosures (list).....  
Copy to.....  
Copy to.....  
1 Enrolment (Primary, intermediate, junior high school and senior high school grades). Indicate kind of school organization (8-4, 6-3-3 etc.).

2 Personnel (General and special). Record names of physical education teachers. Record number of teachers who assist with physical education laboratory activities.

## 3 Facilities

## 3.1 Plant — Indoors

## 3.2 Plant — Outdoors

## 3.3 Equipment

## 3.4 Instructional supplies

<sup>1</sup> This report is to be made out in ink, on day of supervisory visit, and immediately mailed to the Division office.

**4 Present program (In terms of courses of study — syllabuses, Regulations and Statement of Policy)**

4.1 Objectives (Do the local administrators and physical education teachers understand the objectives of this program as stated in the syllabuses?)

4.2 Records — Current, cumulative (pupil status, pupil and program progress)

4.3 Scheduling procedures

4.4 Attendance

4.5 Time requirement (elementary — secondary)

4.6 Course of instruction (scope — elementary, secondary) (lesson plans — general, specific)

4.7 Administrative procedures (acceptable examinations and tests)

4.8 Individual physical education (including activities for the handicapped)

4.9 Physical education laboratory and recreation activities (physical education clubs, intramural and inter-scholastic games and sports)

## 4.10 Community relationships

5 Comments (Commendations or criticisms) Indicate outstanding features beyond minimum requirements, research activities etc.

6 Recommendations<sup>1</sup>

<sup>1</sup> Any recommendations that the supervisor finds necessary to make while in conference with local authorities must be noted in this report for confirmation in the official letter concerning this visit.

**7 Summary (Recapitulation, in order of importance, of imperative needs)**

**8 Special problems**

**8.1 Recreation (community)**

**8.2 Health service**

**8.3 Health teaching**

**8.4 Others**

**[Signed]** .....

(9) *Teacher training.*—The department rules that the school administrator—

... is responsible for the general organization and supervision of health teaching in all schools under his direction. He may perform these duties himself or delegate them to qualified personnel. If the board of education employs a director or supervisor of health and physical education or a special supervisor of health teaching to assume the responsibility for the organization and supervision of health teaching, such person must meet the standards of preparation approved by the State education department.



The State supervisor of health and physical education visits all teacher-training schools of the State once a year where she endeavors to help these schools to make the most of the personnel and facilities they have for the welfare of students, and to improve their professional preparation in health education and physical education. As a means of keeping the instructional work at a high level, reports are analyzed and recommendations are sent to each principal.

(b) *Limitations.*—Although the health service and the physical education activities in New York have been carried forward with vigor for about a quarter of a century, this is not a long time for the installation of innovations. There is complaint on the part of some supervisors of much lack of understanding and appreciation of the activities promoted by the division. The present personnel does not permit of periodic visits more than once in 5 years and this lack of personal contact may have much to do with slow developments in some schools.

The promotion of interscholastic athletics is too often of more interest to many principals and superintendents than the development of appropriate physical activities for all pupils.

In the field of school nursing, a staff which would permit district regional supervision seems desirable to the supervisors. There is need for more personnel and better facilities for the care and instruction of students in teacher-training schools.

#### **Relationships With Other State Agencies**

The State Public High School Athletic Association has a *central committee* made up of superintendents, principals, directors of physical education, and coaches. The chairman of the central committee is selected by that committee and the director of the division of health and physical education is considered president *ex officio*. In this capacity, however, he has served only as an adviser, the central committee and the State athletic association being responsible for their own acts. Staff members of the division are assigned from time to time to assist and advise the State athletic association, this assignment being made by the director of the division.

The division also has numerous contacts with the State departments of health, welfare, mental hygiene, and correction, and the like. It is in close relationship with the 15 State organizations represented on the advisory council appointed by the board of regents which have been mentioned above.

## North Carolina

### Historical Development

In 1921 the legislature authorized an annual appropriation from the State public-school fund for school extension work not more than \$15,000 of which might be "used by the State board of education in employing a State director of physical education and providing said director with the necessary assistance and traveling expenses." (*Reg. Sess. 1921, sec. 14.*) However, "owing to the great need in increasing the size of the equalization fund, this supervisor was never appointed,"<sup>10</sup> and a special worker in this field was not added to the staff of the State department until 1938.

### Legislation

(a) *Affecting the State Department.*—"Health education, including the nature and effect of alcoholic drinks and narcotics, and fire prevention," are subjects to be taught in elementary schools, and "it shall be the duty of the State Superintendent of Public Instruction to prepare a course of study outlining these and other subjects that may be taught in the elementary schools." (*C. S. (III) 5440.*) The law antedates the agitation for a special supervisor and by "health education" was meant what "is usually termed physical education."<sup>10</sup>

It shall be the duty of the State board of health and the State board of public instruction to prepare and distribute to the teachers in all public schools of the State instructions and rules and regulations for the physical examination of pupils. (*Sec. 5779.*)

(b) *Affecting local schools.*—The district committeemen are required to furnish a "good water supply" and to "keep the school privies in a sanitary condition," and school officials must obey the rules and regulations of the sanitary committee or the board of health. (*C. S. (III) 5479, 5477.*) "It shall be the duty of every teacher in the public schools to make a physical examination of every child attending the school" and "make a record of such examination." (*1919, C. 192, secs. 1 and 2.*) (Examinations are to be made at least once every 3 years.) The record cards are to be transmitted to the State board of health which shall notify the parents or guardians of any seriously defective child to bring such child before an agent of the State board of health for the purpose of having a more thorough examination. (*1919, C. 492, sec. 3.*)

<sup>10</sup> Biennial Report. Superintendent of Public Instruction, North Carolina, 1920-22, p. 39.

A "graduate in mouth hygiene" may be employed by schools to teach mouth hygiene and to clean teeth. (1929, (I) 302.)

"Health education, including the nature and effects of alcoholic drinks and narcotics, and fire prevention" are, as mentioned above, to be taught. (C. S. (III) 5440.)

In all normal schools, teacher-training classes, summer schools for teachers, and other institutions giving instruction preparatory to teaching, or to teachers actually in service, adequate time and attention shall be given to the best methods in teacher health education with special reference to the nature of alcoholism and narcotism. (The law is detailed and specific concerning such instruction.)

It shall be the duty of all teachers . . . to promote the health of all children, especially of the first three grades, by providing frequent periods of relaxation; to supervise the play activities during recess; and to encourage wholesome exercise for all children. (C. S. (III) 5562.)

### Organization

In 1938 the State department employed an Adviser in Health and Physical Education, and in 1939 an assistant adviser was appointed. These appointments are made under the general powers conferred by the Constitution. (Art. IX, secs. 10-13.) The adviser works under the Division of Instructional Service and the assistant adviser, under the division of school health coordinating service. They have for their functions the production of courses of study and supervision in the fields of physical education, health, and safety in elementary and secondary schools. They also cooperate with teacher-training schools in planning courses of study and in teacher certification.

### Objectives and Activities

Prior to the appointment of an adviser, special bulletins on physical education were issued by the State department and instruction in health, safety, and physical education were outlined briefly in the general courses of study for elementary and secondary schools. (Pub. 189, 1935.) The advisers, with the help of a committee of 60 administrators and teachers, have produced a course of study in physical and health education. (1940.) This publication is devoted almost entirely to promotion of physical activities.

In addition, special mimeographed circulars have been sent to teachers, and the advisers have taken part in teacher institutes and met with county and city groups.

### Relationship With Other State Agencies

Arrangements were made in 1940, through a 5-year grant from the general education board, to establish a school hygiene service for the State, with a coordinator, who will serve as executive secretary of a committee on school health service. This coordinator is employed jointly by the State department of education and the State department of health.

It is—

... understood and agreed that the health and physical education adviser shall operate as a member of the personnel of the department of public instruction in the development of curricula and supervision of activities in the schools of the State, while the nurses, sanitary inspectors, and others contributing technical health services operate as members of the personnel of the department of health.

It is understood and agreed that with regard to instruction in health and physical education there is to be full cooperation between the two agencies, but ultimate authority in instructional matters, both in physical education and health education shall remain with the State department of public instruction. It is understood and agreed also that with regard to technical matters of sanitation and health services, such as clinics, physical examinations by physicians, follow-up work for the correction of defects and immunization there is to be full cooperation between the two agencies, but ultimate authority in such matters shall remain with the State board of health.

It will be interesting to follow the development of the 5-year experiment which is intended to correct "defects in organization by bringing about more effective teamwork on the part of both boards."

## Ohio

### Historical Development

Ohio was among the first States to pass a law permitting or requiring physical education in public schools, but it was not until 1923 that the law was modified to include provision for State supervision. A State director was appointed in 1925. The office was vacant from 1932 until 1936 when the present supervisor was chosen.

### Legislation

#### (a) *Affecting the State department of education.*—

All pupils in the elementary and secondary schools of the State shall receive, as part of their instruction such physical education as may be prescribed or approved by the director of education. (Sec. 7721.)

The Director of Education may appoint a supervisor of physical education to administer, supervise, and direct the varied program and activities of physical education and to promote the training of teachers of physical education, to promote cooperation with the State Department of Health and with the district boards of health. (Sec. 7721-5.)

Accident prevention shall be taught by "each teacher" for "not less than 30 minutes a month" and the superintendent of public instruction shall prepare a manual on the subject. (Sec. 7724, 1 and 2.)

#### (b) *Affecting local schools.*—"Teachers shall strive to guard the health and physical welfare of their pupils." (Sec. 7707.)

The nature and effect of alcohol and other narcotics are to be taught "in connection with the various divisions of physiology."

"Each and every board of education may appoint at least one school physician and at least one school dentist." (Sec. 7692.)

(c) *Affecting other departments, State and local.*—The State has a detailed safety and sanitary code applicable to school buildings. Inspections are to be made as often as deemed necessary or on request, but the responsibility in these matters is placed with the Department of Industrial Relations. (1934, Ch. 17.)

Semi-annually, and oftener if in its judgment necessary, the board of health shall inspect the sanitary condition of all schools and all school buildings within its jurisdiction. (Sec. 4448.)

The district board of health may provide for the medical and dental supervision of school children. (Secs. 1261-62.)

### Organization

The Supervisor of Physical Education is appointed in accordance with the law previously mentioned. He functions as a member of the instructional division of the department. He includes elementary and secondary schools and teacher-training institutions in his service.

### Objectives and Activities

Courses of study in health instruction and in physical education were published by preceding supervisors. Standards and requirements for high schools and for teacher education have been established. The present supervisor has issued circulars on physical education and on the *Development of a Leisure-Time Program for Rural Communities*. He is making a survey in 24 of the 88 counties of the State as a basis for preparing new courses in physical education and health teaching.

He places the visitation of schools first among supervisory activities. He works with teachers and principals as well as with special teachers. He examines equipment, the preparation of teachers, and the adequacy of the local program. He has divided the State into six districts and has held meetings of teachers in these districts assisted by outside speakers.

The supervisor serves as an adviser to the board of control of the Ohio High School Athletic Association.

### Relationship With Other State Agencies

A close cooperation exists with the State department of health through which dental and health clinics are held in those systems not employing school dentists or physicians.

The department of health and physical education in cooperation with the State highway patrol promotes instruction in safety education as it relates to automobiles and highways.

## Pennsylvania

### Historical Development

In Pennsylvania a State director of health and physical education was appointed in 1920. A division of health and physical education, covering the various phases of health work, was developed until the

staff consisted of a director and seven supervisors. In 1936 an adviser in audiometric testing was added through special legislation. At the present time there is a director of health and physical education and an adviser in school nursing.

### Legislation

(a) *Applying to the department or council of education.*—In Pennsylvania "proper standards" of heating, of ventilation, and of lighting "shall be established by the State council of education."

The State council of education shall prescribe rules and regulations for the sanitary equipment, and inspection of school buildings. (*Guide to S. L.*, p. 631.)

Medical inspectors of the several school districts shall make eye and ear tests of the pupils in such schools at least once in each school year. Such tests for hearing shall be made with audiometers or with such other scientific devices as may meet the approval of the department of public instruction, which shall be provided by the Commonwealth for use in the various school districts. The department of public instruction shall prescribe to the boards of school directors and medical inspectors of schools suitable rules of instructions as to the tests and examinations to be made as provided in this section, together with test cards and blanks deemed necessary for carrying out the purposes of this section. The department of public instruction shall provide, in the State teachers colleges, instruction and practice in the best methods of testing the sight and hearing of children, and shall prescribe the scientific appliances which shall be used by State teachers colleges to provide such instruction.

The superintendent of public instruction shall appoint a specialist for eyes and ears in his department, who shall assist medical inspectors in the several school districts in making eye and ear tests of pupils of the public schools. He shall also assist in providing instruction and practice in the State teachers colleges in the best methods of testing the sight and hearing of children, and shall perform such other duties as the superintendent of public instruction shall prescribe. The superintendent of public instruction shall also appoint a competent person to supervise audiometric tests. Such person shall be one certified to teach in the public schools, shall be thoroughly familiar with the use and purpose of audiometers, and shall have some experience in medical social service. Such person shall supervise the use of audiometers and other scientific appliances used in hearing tests, and perform such other duties as may be assigned by the specialist for eyes and ears. (1937, Act 547.)

(b) *Applying to State department of health.*—The State department of health in every school district of the fourth class [less than 5,000 population] shall provide medical inspection. (p. 232.)

(c) *Applying to local boards of education.*—In first-, second-, and third-class districts medical inspectors are to be employed by the board of education. (345-56.) "Any board of directors may employ one or more school nurses."

The medical inspector, at least once each year, and as early in the school term as possible, shall make a careful examination of all privies, water closets, urinals, cellars, the water supply, drinking vessels, and utensils, and shall make such additional examinations of the sanitary conditions of the building as necessary.

"Physiology and hygiene, which shall include special reference to the effect of alcoholic drinks, stimulants, and narcotics," and "to tuberculosis and its prevention, shall be studied as a regular branch by all pupils." (p. 764.) Health (physical training and physiology) and safety are to be taught in every elementary public and private school. (p. 765.)

Other subjects shall be taught in the public elementary schools and also in the public high schools as may be designated or approved by the State board of education. (Sec. 1607, *School Laws of Pa., 1939.*)

### Organization

The superintendent of public instruction "has the authority to appoint and fix the compensation of such directors, superintendents, bureau or division chiefs . . . as may be required for the proper conduct of the work of the department." (S. L. p. 259.) State officials of the department of public instruction in the field of health and physical education are appointed under this provision. The director is responsible to the director of the bureau of instruction and the adviser in school nursing works under the chief of health and physical education.

### Objectives and Activities

(a) *Accomplishments.*—Directors of health and physical education have in recent years produced detailed courses of study in hygiene and in physical education for all grades and a special publication for rural schools. Among the more recent publications are: *A Tentative Course of Study in Health Instruction for Secondary Schools* (1931); *A Course in Health Instruction and Physical Education for Grade VIII* (1934); *Conduct of Elementary Physical Education* (1939); *Orientation and Guidance in Physical Education for Secondary Schools* (1939); *Health Service in Education* (1939); *Education for Traffic Safety* (1939).

## South Carolina

### Historical Development

In 1924 a law was passed by South Carolina providing for physical education in all schools. In 1935 the State superintendent with the cooperation and financial assistance of the State Tuberculosis Association employed a consultant in health education to prepare courses of study, and in 1939 a special supervisor of health, physical education, and recreation was appointed.

### Legislation

#### (a) *With reference to the State department.*

There shall be established and provided in all the public schools of this State physical education, training, and instruction of pupils of both sexes and every pupil attending any such school, insofar as he or she is physically fit to do so, shall take the course or courses therein. . . . [All] educational institutions giving teacher training shall provide a course or courses in physical education, training, and instruction and any pupil attending any such college, school or educational institution in preparation for teacher service shall take such course or courses. The State superintendent of education shall supervise the administration of this Act and shall prescribe the necessary course or courses in physical education . . . and make such rules and regulations, and prepare or cause to be prepared, published and distributed any such manual of instruction . . . as he may deem necessary or suitable to carry out the provisions thereof. (5343.)

"The State board of education shall provide for instruction in fire prevention in the elementary public schools of the State," (5470) and "a course of instruction in the traffic laws of the State" is to be given in institutions of higher learning. (5341-1.)

#### (b) *With reference to local boards:*

Physiology and hygiene, and especially as to the effects of alcoholic liquors and narcotics [shall be taught,] (1936-5338) [and] taught as thoroughly and in the same manner as other like required branches are. (5339.)

[Boards of Trustees] are authorized and empowered to arrange for, and shall require annually, a medical and dental inspection of all pupils attending the public schools, to ascertain the presence of any contagious or infectious disease, or any defect of eye, ear, nose, mouth, throat, lungs, or skin detrimental to the welfare of any child affected therewith. (5384.)

### Organization

As previously noted, the State superintendent, with the assistance of the State tuberculosis association, employed temporarily in 1935 a consultant in health education. The supervisory activities have, since the passage of the law, devolved upon the elementary and high-school supervisors until the past year when a special supervisor of health, physical education, and recreation was appointed in the State department.

### Activities

An elementary school manual on *Health Education*, prepared by the consultant on health education, was issued in 1936. This publication included material on the sanitary care of the school as well as outlines of instruction in health and safety. In 1937 a *High-School Course of Study in Physical Education*, prepared by a committee of physical education teachers, was published, and in 1938 a course in *Health Education for High Schools* was completed by the consultant. This latter publication includes a section on the school health service and its relation to health instruction. The State supervisors of ele-

mentary and of secondary education cooperated in the preparation of these courses of study.

## Tennessee

### Historical Development and Organization

In 1931 the president of the University of Tennessee and the State commissioner of health, with the financial assistance of the Commonwealth fund, began the development of a training course for teachers in the field of health. A plan was conceived of a program involving the whole educational system from the first grade through college in which the university and teachers colleges, and the State departments of health and education should cooperate.

In 1933 the Tennessee Valley Authority was created and this became an active agent in the project. In 1935 a "coordinator for public health education program" was employed. The TVA pays \$3,700 toward his salary and travel expenses; the department of health furnishes his office space, clerical help, and publishing facilities; the State university contributes \$500 and the department of education, \$1,000. These four agencies serve as a State planning committee on public health education. The program includes not only elementary and secondary school work but adult education and teacher training.

### Legislation

In Tennessee the course of study shall include hygiene and sanitation and physical education.

Instruction in hygiene and sanitation shall include the nature of alcoholic drinks, narcotics, and smoking of cigarettes, and their effects upon the human system. (1936, 239.2381.)

[All pupils in elementary and secondary schools shall] receive as a part of their prescribed course of instruction therein such physical education as may be prescribed by the State Board of Education. (314.2418)

It shall be the duty of the State board of education with the advice of expert physical educators in the service of this State, or available from other sources, to adopt rules and determine the subjects that shall be included in such courses of physical education, the time and credit to be given to each of such courses, and the qualifications of teachers to be licensed for instruction in physical education and publish for free distribution, courses of study and rules and regulations governing certification of teachers. (316.2420)

Every State college, university, or normal school giving teacher-training courses, shall include a course or courses in physical education. (317.2421)

A recent law requires instruction in the "art of safety" in both "elementary and secondary schools." (1933. Ch. 61, sec. 1.) There is no law with reference to medical inspection.

### Objectives and Activities

(a) *Accomplishments.*—More than one division in the State department of education has been active in the promotion of the health

education project. On a circular containing suggestions to high-school principals, appear the signatures of the commissioner, the supervisor of home economics, the State agent for Negro schools, and the superintendent of the division of high schools.

The coordinator feels that the greatest progress can be made only when there are teachers trained in the necessity and techniques of health education. In the second place emphasis is being placed upon curriculum construction and development of materials useful to teachers. Considerable progress has been made along this line. At the present time the university employs one full-time professor of health education and full-time teachers are also employed by two of the teachers colleges.

The State department of health has authorized twenty \$90 summer school scholarships at the State university. The coordinator nominates teachers who are to receive such scholarships. The coordinator himself has taught in the summer school of the University.

During the year 1939-40, the State department of health made available selected kits of scientific materials on tuberculosis for all public elementary and high schools of the State, these materials being used by the teachers in classroom instruction in regular courses in biology, home economics, general science, social sciences, physical education, and other related subjects. Plans are now under development for putting in high schools, which are to be carefully selected and supervised, a teaching unit on syphilis, using the germ-theory of approach rather than that of sex education.

(b) *Limitations.*—The coordinator feels that much more could be accomplished if coordinators were employed in each county. So far only three of these workers have been secured.

#### **Relationship With Other State Agencies**

The division of safety education of the State department of safety has been active in the schools and has consulted the department of education in its work.

### **Utah**

#### **Historical Development**

In 1919 an act was passed by the legislature of Utah "creating the office of director of health education" and the State board of education was authorized to appoint such a director who was to include in his work "hygiene, sanitation, physical education, and recreation." Under this law Utah had one of the first State directors in this field and the only one to be called a "director of health education." He was to look after the health of both school and preschool children. He served for about 3 years. In 1933 this law was repealed. In 1935 a division of health, physical education, and recreation was established and the present director was appointed.

## Legislation

### (a) *Applying to the State board of education.*—

There shall be established in the State school of education, and in the public schools beginning with the eighth grade, a course of instruction upon the subject of sanitation and the cause and prevention of disease. It shall be the duty of the State board of education and the State board of health, acting conjointly, to prepare a course of study to carry out the provisions of this section. (C. L. 17, párs. 4534, 4535.)

The State board of education shall determine the professional requirements of supervisors of health education and school nurses. Health education, consisting of sanitation and personal and school hygiene, shall be required of all teachers in the public schools of the State. (C. L. 19, par. 2, p. 273.)

### (b) *Applying to local boards.*—

It shall be the duty of all boards of education and officers in charge of schools, and educational institutions supported in whole or in part by public funds, to make provision for systematic and regular instruction in physiology and hygiene, including special reference to the effects of stimulants and narcotics upon the human system.

[Boards of education may employ physicians to make examinations of children for diseases or defects, but where such an agent is not employed] it shall be the duty of every teacher engaged in teaching in the public schools to carefully test and examine every child under his jurisdiction to ascertain if such child has defective sight or hearing, or diseased teeth or breathes through his mouth. (C. L. 17, par. 4547.)

### (c) *Applying to local boards of health.*—

Local boards of health shall have jurisdiction in all matters pertaining to the preservation of the health of those in attendance upon public and private schools [and it is their duty to exclude persons having communicable disease], to make regular inspections of school buildings and premises as to their hygienic condition, and to report on forms furnished by the State Board of Health the result of such inspection to those having charge and control of such schools. . . . A copy of said report shall at the same time be sent to the State Board of Education. (C. L. 17, par. 2755.)

## Organization

In 1935 a division of health, physical education, and recreation was established and the present director was chosen by the superintendent under a statute which permits the appointment of "such directors, supervisors, and assistants as are necessary to the administration and supervision of the public-school system." (L. 35, ch. 56, p. 132.) The division is of equal importance and coordinates with the other divisions of the department. Its fields of supervision are the elementary and secondary schools, but the supervisor also participates in the work of teacher training.

## Objectives and Activities

(a) *Accomplishments.*—With the help of a committee appointed by the Utah Health and Physical Education Association, a course of study in health and physical education for all grades was issued in 1935. The director has issued a bulletin on safety education (1935)

and another entitled, "What the Teacher can do to Promote Health and Physical Education in the Elementary School." (1937.) This latter publication presents in outline the functions of the teacher with reference to the health service, the noon lunch, first-aid, the physical and mental environment of the child, health instruction (safety is included), and physical education. Suggestive course of study material for health instruction in secondary schools was issued in 1935, 1937, 1938, and 1940. Circulars on special subjects and news letters have also been issued. A circular outlining the requirements of the State department "in order that the program of health and physical education and policies concerning it may be more thoroughly understood" was issued in 1936, 1938, and again in 1940.

The director has considered the personal visitation of schools of first importance. She has made visits to all school districts and conferred with teachers, supervisors, principals, and superintendents. Individual conferences have been held with practically every special teacher. Training institutes in physical education for elementary teachers have been held in certain districts. Lectures have been given and discussions conducted at teachers institutes, at community leadership conferences, parent-teacher meetings, and physical education district conventions.

Courses in physical education and health education have been taught at summer sessions of the State agricultural college and during the regular term at the University of Utah, and conferences were held with all graduating majors in physical education at the teacher-training institutions in an attempt to secure their proper placement.

(b) *Limitations.*—The work of the division, unsupported by special appropriation, must proceed largely through the ability of the director to personally convert administrators to the activities and standards of the program. The rulings of the State course of study committee that a daily program of health and physical education should be required in 5 of the 6 years in secondary schools, and of the State board of education that school districts shall follow the State course of study in health and physical education in order to be eligible to participate in the State equalization fund have aided materially in establishing programs. However, there are no funds which may be used to subsidize any programs in this field. The absence of special certification requirements to teach physical education is, in some instances, a handicap to placement of trained personnel.

#### **Relationship With Other State Agencies**

The State department of health has been active in promoting better sanitation and in establishing nursing services. It recently employed a coordinator of school health education. The departments of health and of education have cooperated in the development of this work.

The division has assisted in planning recreation projects sponsored by the Work Projects Administration and it has been assisted by this agency in the promotion of school-feeding programs.

The director has participated actively in the work of the State advisory committee of the division of maternal and child health of the State department of health, the committee on qualifications for public health nurses, the board of control of the Utah High School Athletic Association, and the board of managers of the Utah Congress of Parents and Teachers.

## Vermont

### Historical Development

Vermont has had a supervisor of health and physical education since 1935. She works in the fields of health instruction, health service, physical education, recreation, safety, mental hygiene, and school-nursing service.

### Legislation

(a) *The State department.*—There is no specific legislation in these fields applying to the State department of education except that where no medical inspector is employed by a school, the State board of health and the commissioner of education shall prepare and furnish equipment and instruction for the examination of vision and hearing by the teachers.

Vermont has a law requiring instruction in "elementary physiology and hygiene with special reference to the effects of alcoholic drinks and narcotics on the human system and society"—adapted to the needs of the pupils (Sec. 4234), and in high schools instruction shall be given in health and physical education with special reference to the effects of alcoholic drinks and narcotics upon human society.

(b) *Local schools.*—"The board of school directors may appoint one or more medical inspectors" (Sec. 4317) whose duties are "to examine the pupils . . . and comply with all rules and regulations relating thereto which shall be prescribed by the State board of health." (Sec. 4319.) There is close cooperation between the department of public health and the State department of education in regard to health examinations of pupils (see forms attached). The law states that where no medical inspector is employed, the superintendent shall cause the teachers of the schools under his supervision to test the sight and hearing of every pupil 7 years of age and older in the month of September of each even year (4323). The supervisor recommends it annually. As stated above, the State board of health and the commissioner of education shall prepare and furnish the equipment and instructions for such examinations.

In 1935 Vermont passed an act permitting the expenditure by local boards of—

... a sum not to exceed 3 percent of that year's school budget for current expenses for such health service activities as may be necessary to provide for the improvement of the physical efficiency of school children of indigent parents. Expenditures for this purpose may include the purchase of milk for underweight or undernourished children, the purchase of ingredients for hot lunches, also expenditures for glasses, dental service, the removal of tonsils and other health services which are approved by the town health officer and the teacher or public health nurse. (1935, No. 91)

(c) *The State department of health.*—The State board of health “when necessary, shall issue to local boards of health, regulations as to lighting, heating, and ventilation of school houses” and “the health officer shall, under the direction of the State board of health make a sanitary survey of each schoolhouse—and annually report to the board, city council, or town meeting.” The State department of education recommends that superintendents report annually on rating sheets provided for the purpose.

### Organization

The supervisor of health and physical education was appointed under the law which permits the State board to employ “such number of deputy commissioners and such number of trained and competent helping teachers as it may deem necessary.” (Sec. 4134.) The supervisor is directly responsible to the commissioner in charge of instruction.

### Objectives and Activities

(a) *Accomplishments.*—As already noted, the activities of the supervisor include all fields of school health work. She finds the helping teachers (elementary supervisors) of the department of assistance in promoting all phases of her work. She reports cases in need of special care to the supervisor of vocational rehabilitation.

She, at present, is especially interested in the provision of hot lunches, the development of health education programs in high schools, teacher preparation and in-service training, and the stimulation of the appointment of school physicians and nurses.

A detailed suggested course of study in health education for elementary schools (including material on safety) was prepared by the supervisor with the assistance of a committee and was published in 1938. Suggestions for a health and physical education program for high schools were mimeographed in 1937. Since there is a law requiring instruction concerning the effects of alcohol and narcotics, a course of study in temperance education was published in 1938. One for safety education was also published in the same year. The supervisor

finds visiting schools and working personally with superintendents, principals, teachers, and nurses the most effective procedures. She holds group conferences; advises with committees in curriculum construction; works with critic teachers in demonstration schools of teacher-training institutions; and lectures in summer school sessions for teachers. Exhibits of material are prepared and addresses are made at State and local meetings of teachers, parent-teacher association meetings, etc. She works with the teacher-training institutions in preparing their curricula in the fields of health and physical education.

(b) *Limitations.*—The supervisor finds need of more authority on the part of the State department of education to assist in the direction of the interscholastic athletic program.

#### **Relationships With Other State Organizations**

The supervisor cooperates with the commissioner of health in charge of buildings, to whose attention she brings needs of improvement of sanitary conditions. She confers with other divisions of the State department of health and helps with the promotion of dental work and maternal and child health carried on through that department. She cooperates with the department of public welfare in securing the care of blind and deaf children and in clinical work with maladjusted cases. The State department of motor vehicles and a representative of the highway department assisted in the preparation of a course of study in highway safety published in 1937. The State department of public health and the State department of agriculture through its demonstration agents cooperate with the State department of education in developing the school-lunch program.

The supervisor has also had the support and assistance of the State medical association, State dental association, parent-teacher associations, American Red Cross, federation of women's clubs, and service clubs. The WPA and the NYA have cooperated in health projects affecting schools.

### **Virginia**

#### **Historical Development**

In Virginia a supervisor of physical education was appointed in 1920. The promotion of school health activities, initiated by law in that year, was largely assumed by the State department of health. The present supervisor, who was elected in 1925, recognized the importance of the administration of such work by educational authorities and secured the transfer of its direct supervision to his office. His title was changed to that of supervisor of physical and health education.

**Legislation**

The "West law," through which special supervision was provided, was passed in 1920. As revised, this law now reads:

The board of supervisors of the several counties and the councils or other governing bodies of the several cities and towns be, and they are hereby authorized to make appropriations out of the county, or city, or town funds, as the case may be, to provide for the health examination and physical education of school children and the employment of school nurses, physicians, and physical directors, and such appropriations shall be placed to the credit of the county or city school funds. Previous to employment, all said nurses, physicians, or physical directors shall be approved by the health commissioner of the Commonwealth and the State superintendent of public instruction.

An amount not exceeding one-half the annual salary of each physical director appointed in accordance with the provisions of this section may be paid by the State board of education to the local school authorities employing such physical director, and an amount not to exceed one-half the annual salary of each nurse or physician appointed in accordance with the provisions of this section may be paid by the State board of health to the local school authorities employing such nurse or physician.

All pupils, in all the public elementary and high schools of the State shall receive as part of the educational program such examination, health instruction, and physical training as shall be prescribed by the State board of education and approved by the State board of health, in conformity with the provisions hereof.

In order that the teachers of the Commonwealth shall be prepared for health examinations and physical education of school children, every teacher-training institution of the State is hereby required to give a course, to be approved by the superintendent of public instruction and the State health commissioner, in health examinations and physical education, including preventive medicine, physical inspection, health instruction, and physical training, upon which course every person graduating from such an institution must have passed a satisfactory examination.

No applicant may receive a certificate to teach in the schools of this State who does not present, first, satisfactory evidence of having covered creditably an approved course in general physical education in a training school or course for teachers recognized by the State board of education, as a school or course in good standing. But the State board of education may modify or waive entirely the requirements of this section whenever in its opinion such modification or waiver is necessary to prevent the impairment of the teaching force of the public school system.

The State board of education, with the approval of the State board of health, shall appoint a supervisor of physical education, qualified and authorized to supervise and direct a program of hygiene instruction and physical education for the elementary, secondary, and teacher training institutions of the State, and shall appoint such other employees and authorize such expenses for personal service, printing, and so on, as may be necessary to the proper and effective administration of the program authorized by this section. (*S. L. 1936, sec. 705.*)

Physiology and hygiene [are among the] subjects which shall be taught in the elementary grades [and] in connection with some one or more courses in the high school grades of every public school, elementary training in accident prevention [is to be furnished, including] proper conduct on streets and highways, in the operation of motor vehicles and in ways and means of

preventing loss of lives and damage to property through preventable fires.  
(Sec. 688.)

The West law differed from similar legislation in other States in that it placed the responsibility for its enforcement in the hands of both the department of education and the department of health. Also it went to the root of the matter in that it emphasized the training of teachers in all phases of school health work, especially the health examination of children. Instruction in the preservation of healthful conditions in the schoolroom is not specified, but this was doubtless intended by the words "preventive medicine." At any rate it is so interpreted. It is significant that the department of education is the more active agent in this dual direction with the approval of its procedures by the department of health. In practice, the department of health has done much more than merely approve the efforts of its fellow department. It has been an active and helpful, but respectful, ally, concerning itself chiefly with sanitary provisions and the service side of the school program.

### Organization

The supervisor of physical and health education is a member of the Division of Instruction and works coordinately with the supervisors of elementary education, of secondary education, the supervisor of negro education, and the supervisor of music, all of whom belong to the same division. He also has the cooperation of the division of school buildings. In the field he has the aid of the county and city superintendents, rural supervisors, the Jeanes supervisors, and the local health officers. The supervisor is concerned with the elementary and secondary schools and with higher education in the field of teacher training. He offers advisory assistance to private or denominational schools and to residential schools for the handicapped.

### Objectives and Activities

(a) *Accomplishments.*—The West law placed the immediate responsibility for all phases of school health work in the hands of the classroom teacher, but this responsibility falls primarily on the teacher-training institutions. The State supervisor is concerned with this teacher preparation and has prepared material for the training schools which will serve as a guide to the student in first-hand study of the child as to his physical, mental, and emotional traits and of his school and home environment as affecting those traits. This material is presented in a general study outline and a survey form to be used in the observation of the individual child. (1939.) In the field, the supervisor is concerned with the practice by the teacher of what has been learned and the possible improvement of that practice. The annual physical examination of children is a part of the required work of the teacher in connection with the "five point" award to

pupils which has served as a stimulus in securing the correction of defects. The success of the preparation of teachers for this appraisal is evidenced by the remark of the director of the bureau of child hygiene of the department of health that the classroom teachers are better judges of health conditions of the child than the doctor or nurse who make occasional visits from the outside world.

The State supervisor has prepared publications on physical education and health education for both elementary and secondary schools. These have included suggestions for making the most of the school and home environment and for pupil participation in such efforts. In addition, the health department furnished, in 1937, a health manual for teachers. This publication presents its material according to the "following suggested outline of health work to be carried out by teachers" agreed upon by the two departments:

- I. Physical inspection of pupils:
  - (1) Annual.
  - (2) Daily.
- II. Correction of defects:
  - (1) Devices for getting defects corrected.
  - (2) Encouraging normal growth.
- III. Inculcating principles of preventive medicine by:
  - (1) Teaching health habits.
  - (2) Sanitation of premises.
- IV. Providing hygienic environment including:
  - (1) Proper seating, lighting, ventilation, temperature, etc.
  - (2) Good housekeeping.
  - (3) Equipment for hot lunch.

In the realm of safety education, the supervisor of physical and health education and the safety engineer of the division of motor vehicles issued in 1936, a publication containing source material for secondary schools. This covers all phases of safety instruction in school, on the road, at home, and on the farm, and also first-aid.

The supervisor spends about 90 percent of his time in the field advising with administrators and teachers. He participates in institutes, conferences, and round tables, and gives practical demonstrations of sanitary procedures, health teaching, and the making of equipment for, and the conduct of, physical activities. He finds the county institute an especially desirable situation for the in-service training of elementary teachers.

Recreation is promoted incidentally through the physical education program and assistance has been given in planning the use of schools as community centers.

(b) *Limitations.*—The supervisor has had experience of the benefits of a much larger personnel, for at one time the State was divided into 10 districts each with its supervisor of physical and health education. Aside from lack of such assistance (which is not forthcoming in any other State) he regrets most the lack of adequately prepared

special workers. The State department is attempting to secure for each high-school faculty one person who has had health and physical education as a minor subject.

### **Relationship With Other State Agencies**

The Virginia High-School Literary and Athletic League which "fosters and safeguards" interscholastic sports is sponsored jointly by the University of Virginia and representatives of secondary schools. The executive and judicial functions of the league are vested in the State legislative council and the executive secretary. The State supervisor is a member of this committee and also of the executive committee. The executive committee acts as a court of decision in matters of dispute referred to it by the district executive committees.

## **Review and Comments**

### **Legislation**

The Tower of Babel built by school hygienists and physical educators in the past half century is reflected in the laws on which State supervision is founded, and the confusion has increased with the use of the same terms with both a general and a specific meaning. So long as we use our language in the haphazard fashion which now prevails, there is bound to be misconception of what we are driving at, on the part of educators (and, of course, among the laity), and of misunderstanding on the part of those working in other fields of public health. The State of New York is wise in making a definite attempt to clarify the etymological atmosphere by setting down, fundamentally, in its regulations, the sense in which it uses the terms descriptive of its various fields of activity. At least within the borders of their own State, the school people of New York should know what they are talking about.

Legislation with which we are here concerned has, for the most part, come about through an endeavor to correct certain social menaces of which the country had become acutely aware, such as intemperance in the use of alcohol and ill-fitness for the purposes of war. However, the teaching of physiology and hygiene had been a feature of the curriculum long before the wave of lawmaking which connected it with compulsory instruction concerning the effects of alcohol. Physical activities had been conducted (as they always should be) by the pupils, for ages before schools were required to furnish facilities and instruction in this field, while medical and nursing activities are services (not curricular activities) existing in the home but brought into the school in order to assure their application to all children.

Some States have no laws, or very brief laws, concerning fields in which there is active promotion, while others have not only detailed legal requirements but specific regulations, issued by the State department. The former condition allows of much elasticity of procedure

but on occasion, perhaps too much elasticity. There have been complaints from at least one supervisor that he is hindered by lack of specific legislation along certain lines of action and it must be heartening to be backed by detailed statements of what the people, in general, desire as expressed through their representatives. The granting of power to the board of education to make specific regulations under the law as is the case in New York and New Jersey, would seem an ideal arrangement.

Laws concerning health services are varied and, in most instances, general, and it is to be noted that it is only where an examination, annually or less often, is required and where someone in the State department of education or of health is made responsible for seeing that such a requirement is observed, that examinations of all pupils are conducted or attempted periodically. Even so, there is plenty of "educational" work to be done by the supervisors in such States toward improving the quality as well as maintaining the quantity of service. Although not specifically assigned to that field nor vested by law with much authority, it will be evident from the preceding pages that some of the State supervisors of health and physical education are doing a great deal toward the promotion of medical and nursing services along with their other activities.

Unusual legislation in the States considered includes special mention of instruction concerning tuberculosis in Connecticut, Massachusetts, Missouri, New Hampshire, and Pennsylvania, as if any thoroughgoing instruction in hygiene would omit so important a subject. In New Hampshire printed information is to be conveyed to the home. The prevention and treatment of our most common malady, dental decay (something again which would not be overlooked by any well-prepared health teacher) is emphasized by very specific legislation in Missouri. Legislation concerning these two diseases has been brought about by special agencies working in these fields. In New Jersey there is recent mandatory legislation with reference to examinations of children, of students in teacher-training schools, and of school employees for the presence of tuberculosis.

The law of Oregon requires teachers to "impart a desire for cleanliness and the preservation of health." Without that desire we are not likely to get far unless we resort to compulsion.

In Utah the course of study is to be prepared conjointly with the department of health, as if that department possessed knowledge not available elsewhere. Such action might better be left to a mutual helpfulness which needs not to be furthered by law.

In two States there is legislation with reference to the control of interscholastic athletics, which legislation points to the need for such control.

In less than one-third of these States is the supervision of sanitation placed specifically by law in the State department of education,

and in only 4 is it laid at the door of the State department of health. The word janitor, or custodian, is not mentioned at all but then the importance of this official has only begun to be recognized.

Teacher training is specifically mentioned in 12 of these States and yet most of the efforts at supervision in all of them is concerned with graduates of the training schools of the State who, theoretically, should be well prepared for their work. With adequate training, much supervision should not be needed, but from more than one source of information one suspects that the training is seldom all that it should be. The State departments have a powerful means of promoting such training through their certification requirements (in two States the supervisor is also the certification officer) and yet, despite laws and regulations there is, the country over, a deplorable lag in doing a thorough piece of work, a condition which seems the more unaccountable when we consider the total time spent in the training school and the comparatively small percentage of that time needed for preparation in school hygiene and physical education.<sup>11</sup> The apology that teacher preparation is something new will not hold water, for the Lexington Normal School was, for its day, doing a thorough piece of work a hundred years ago.

The law in Missouri which makes the directors of physical education in the two universities and five teachers colleges "deputy State directors of physical education" is of interest. The law interprets the words "physical education" very inclusively and the work of teacher preparation should thus be directly supervised from the State department (the State superintendent is the director of physical education) through its most effective agents.

The legal provision in Louisiana that the parish board of health must have as one of its three members an educator, is unique and worth copying. If a State school officer were made a member of the State board of health, it might often lead to better understanding and mutual helpfulness in the two departments.

Looking over the whole field of legislation we find a remarkable variety of permissions and requirements and it would seem that by a comparison of these laws, and experiences under these laws, the State supervisors might sometime work out recommendations for legislation which would be of most help to them and which would permit of full promotion in all fields of work. It is quite evident that, under certain conditions of collective consciousness, laws are unnecessary, but, unfortunately, such conditions do not usually exist or are subject to change.

Nor can the bounds of public opinion be overstepped with profit as is indicated by the results of legislation in Arizona. A more compre-

<sup>11</sup> U. S. Department of the Interior, Office of Education. Training of elementary teachers for school health work. By James Frederick Rogers. Washington, U. S. Government Printing Office, 1936. (Pamphlet No. 67.)

hensive law (which included State supervision) has not been placed on the statutes in any State than was passed in that State in 1927, but a referendum was demanded and the law was never in effect.

### Organization

A glance at the table on page 99 shows the fields covered by supervision as indicated by the titles of the supervisors. The title, "Health and Physical Education," is indefinite, but it indicates that the supervisor is promoting more than physical activities. In only four departments of education is a special worker in health education to be found, while such persons are employed by some 17 State departments of public health. In Missouri the special worker in the department of education is paid from funds of the department of health which would seem to be a generous and effective placement.

Only in New York State are there special supervisors for the school medical service. Elsewhere this important and distinct field must be covered, if at all, by the director of health and physical education and only in two States is a physician employed in this office. In New Hampshire, New Jersey, and Pennsylvania there are supervisors of school nursing. In New Jersey the school nursing service is supervised by the assistant in health education. Again, only in New York is there a special worker in dental hygiene, although in 35 States divisions or subdivisions of dental health education are to be found in the State department of health. Twenty-two of these divisions have sprung into existence under the Social Security Act and five units were discontinued for lack of funds in the five years prior to that act. The dental education of adults is important, but surely the most productive period for such instruction is that of school attendance.

The placing of the supervisor in the general scheme of organization is indicated below. (Organization charts are to be found in another section of this study.) The location of the supervisor depends somewhat on the number of persons employed.

The supervising agents in the field of health and physical education are placed as follows:

*Under the superintendent—*

Delaware, Illinois, Louisiana, Maryland, Minnesota, Missouri, New Hampshire, Nebraska, Utah.

*Coordinate with the assistant commissioner—*

New Jersey.

*Under assistant or deputy commissioner—*

California, Maine, New York.

*In the division of instruction—*

Alabama, Florida, North Carolina, Ohio, Pennsylvania, Vermont, Virginia.

*In the division of supervision—*

Connecticut.

*In the division of elementary and secondary schools—*

Massachusetts.

In Florida and Nebraska the supervisor of health and physical education is also the supervisor of teacher certification so that his activities in the former fields are very much limited.

In New Jersey the director has the council of an advisory group within the State board of education, while in New York there is a much larger body made up of representatives of organizations outside the board or department. Such a supporting body of sympathetic and informed persons who could be consulted individually or collectively must be most helpful.

*State departments having supervisors in one or more fields of school health work and physical education*

State	Department of Education					Department of health
	Physical and health education	Physical education	Health education	Medical service	Nursing service	
1	2	3	4	5	6	7
Alabama.....	1					"Coordinator" of health education.
Arizona.....						
Arkansas.....	1					
California.....	1	1				
Connecticut.....	2					
Delaware.....	1					Coordinator of health education.
Florida.....	1					
Georgia.....	1					
Illinois.....		1				
Indiana.....						
Kentucky.....						Do.
Louisiana.....	1					Chief and assistant chief, health and physical education.
Maine.....	1					Coordinator of health education.
Maryland.....		2				Do.
Massachusetts.....		2				
Michigan.....						
Minnesota.....	1					
Mississippi.....						
Missouri.....	1		1			Do.
Montana.....						Do.
Nebraska.....		1				Do.
New Hampshire.....					1	
New Jersey.....	1	1	1			
New Mexico.....						
New York.....	1	5	2	5	2	
North Carolina.....	2		1			(1) Coordinator of health education.
North Dakota.....						
Ohio.....		1	1			
Oregon.....						
Pennsylvania.....	1				1	
South Carolina.....	1					(1) Coordinator of health education.
Tennessee.....			1			
Texas.....						
Utah.....	1					
Vermont.....	1					
Virginia.....	1					Do.
West Virginia.....						Do.
Wisconsin.....						

<sup>1</sup> Part-time supervisor.

<sup>2</sup> Has a supervisor of safety education.

<sup>3</sup> Has a supervisor of interscholastic athletics.

<sup>4</sup> Cooperative arrangement.

<sup>5</sup> Has a supervisor of dental service.

<sup>6</sup> Figures do not include director.

<sup>7</sup> Supervisor of health and narcotics.

### Supervisory Activities

A more statistical summary of the supervisory activities in the States concerned is of little value but it would indicate that more ground is covered by most of these officials than they are sometimes given credit for. Omitting the teaching of safety, at least five supervisors are promoting work in four fairly distinct fields. In four States they stick largely to one field, which in two, is the important one of teacher training. But in not covering more ground, such State departments are liable to reproach by some other agency for neglect of certain fields which may lead to usurpation of that field by the reproachful agency.

Only of late has the preparation of custodians assumed interest to anyone and supervision along this line has hardly been born anywhere.

Nutrition is fundamental for health and in at least four States the supervisor of health and physical education is active in the improvement of the school lunch. Pupil instruction in nutrition belongs in the realm of health instruction, but supervision of school feeding would seem to demand the services of a special agent in the State department.

Supervisors are all concerned with the supreme importance of teacher preparation but they do not always have a free hand in making that training all they desire. In-service training comes late, but the need for this is felt, and happy the situation where the supervisor can come in frequent contact with teachers. Unfortunately supervisors are allocated more by States than by population, and the differences between Delaware and Illinois, so far as personal contact with schools is concerned, are very great. Teacher institutes, summer schools, and conferences seem the "next best thing." The annual report which is required of superintendents in New York and in Minnesota is a desirable means of helpfulness in a State where the smallness of the staff does not permit of frequent visitation.

In certification requirements the supervisor has a valuable means of improving the personnel in his field. This instrument is, however, usually applied only to special teachers although more than a half century ago it was used, so far as health education was concerned, to prepare all teachers. They had to know the first principles of anatomy and physiology and the effects of alcohol or they did not teach.

A few States long ago saw the possibilities for educational work by the school nurse, and also her lack of preparation not only for that function but for other school work. Through special educational requirements and by direct assistance from supervisors, California, New York, New Jersey, Pennsylvania, and New Hampshire have raised the services of these workers to a new level and it is unfortunate that other States have not followed this example. The school nurse is a specialized agent, working in and through the schools, and

she should be placed under the supervision of school authorities as is usually the case in cities.

So far as school physicians are concerned, only New York State has, as yet, established special educational requirements and this only in the case of full-time workers.

### Limitations

Naturally an ambitious State supervisor, especially in a large State, feels the need for more funds and more personnel, and certainly the latter is needed where the department attempts to cover the distinct fields of health education and of physical education. If much is to be accomplished in health service there is further need for one or more specialized workers in this field.

Among less general limitations mentioned by more than one supervisor is the overimportance attached by many administrators to interschool sports, and we have in most States a State interscholastic association which functions in the school system but which is hardly an integral part of it. In Delaware there is no such association and interschool sports are managed by the State supervisor as a part of the general scheme of physical education, but possibly this arrangement might not prevail had Delaware been a larger State. In California the State supervisor is legally responsible for the "general control over all athletic activities of the public schools of the State." In Michigan the superintendent of public instruction "shall have supervision and may exercise control over the interscholastic athletic activities of all the schools of the State," and there is a special supervisor on his staff, although in recent years Michigan has had no supervisor of health and physical education. On the other hand, some State directors have no official connection with this State organization. Interscholastic athletics should be a part of the scheme of physical education and subordinate to it, or they should be entirely divorced from school responsibility.

### Relationship With Other State Organizations

Nothing so much indicates the lack of assimilation of health work by the schools as the number of organizations which have been pulling and pushing to place and keep activities of this nature within the school walls. Legislation in this field and the employment of supervisors have been largely due to the work of such organizations. All supervisors receive support, if not active assistance, through these bodies and acknowledge such indebtedness. One supervisor mentions in his annual report a relationship and indebtedness to some 16 National and commercial organizations and a membership on more than 50 committees of State and national groups. In no other field of supervision would we find anything to compare with this situation. We have no

such bodies working to introduce or retain English, biology, or physics in the schools.

The various service clubs and womens' clubs are mentioned as aids in securing the treatment of defective children which all points to a general public indifference to, and lack of adequate organization for, the care of the less fortunate which some day will be looked upon with wondering curiosity by a generation which should take the pains to cast a glimpse backward at social progress in the twentieth century.

*State departments of health.*—The State department of health is, in 11 States, obligated by law to supervise to some extent (varying with the State) the work of medical examinations in all or in certain schools, while in 8 others both departments have a share in its promotion. However, in only 6 of all the States having laws concerning medical inspection is the board of health the local responsible agency.

While the provision of a building and equipment suitable for the maintenance of sanitary surroundings for the child and teacher falls, in part, within the sphere of local or State health authorities, the everyday maintenance of healthful conditions thus made possible, devolves, whether by law or common sense, upon the school authorities and, in particular, upon the custodian and teacher. The preparation of teachers and custodians to this end becomes, of course, the duty of the State and local education authorities.

From the beginnings of health instruction in schools a century and a half ago, such instruction has been by practice and by law a concern of education authorities, as has also been instruction in physical education. Such being the case, it seems anomalous to find in the State department of health of one-third of our States, one or more workers in the field of health instruction in public schools, while in one State the supervision of physical education is also in the hands of the department of health.

Supervision under the department of health is not likely to be less expensive than if done by the department of education so that the matter of cost to the public can be ruled out in any explanation of this latter-day phenomenon. The argument that an official in a department of health is better equipped for the supervision of school health activities, of any kind, does not hold, for persons equipped for such work are equally available for employment by either agency. The claim that health instruction of the preschool child, of the school child, and of the adult should not be divorced is without merit. Departments of health do not educate the preschool child. Their work, through doctors and nurses in clinics and in home visitations, is directed at the education of parents. Before and after school life

they deal with the education of adults. At school age education is, by universal consent, the business of the school and by agents employed by the school.

Aside from the motives mentioned above, there are two conditions which would account for the fact that State departments of health have recently gone into the field of health teaching in institutions which do not fall under their administration. One is, that this department feels that the department of education has neglected its duties or opportunities, and the other incentive is the possession of sufficient funds for the employment of special workers in this field. The two factors go together, for the missionary spirit must, of necessity, be supported in its efforts by material means. Certainly, not without such means can departments of education function in a given field. The question of the importance of health instruction in reference to other supervisory activities is, of course, to be considered and so long as educators proclaim the preservation and promotion of health as their "first objective" they are neither consistent nor dutiful unless they place such preservation and promotion first by the employment of suitable and adequate personnel for that purpose.

This shortcoming (where it exists) being the cause of otherwise unaccountable trespass, it behooves the department of education to repair their fences along these lines by assuming their normal functions and responsibilities in this field.

In Missouri a supervisor of health education, financed by the department of health, is a member of the staff of the department of education. This sensible arrangement might well be followed elsewhere.

The activities of the gymnasium and playground are, or should be, healthful for body and soul. They fall short of their purposes whether educational or recreational if they are not wisely chosen or conducted, or if they are carried on, as is often the case, under unhealthful conditions. Nevertheless, it is difficult to see wherein their supervision is at all a matter of moment to departments of health unless they are not conducted at all, or are badly managed by the department of education.

Where local departments of health maintain clinics or hospitals, the matter of medical inspection seems consistently more a function of these departments since the machinery for examination and for treatment of needy cases is brought under the same administrative roof. But present-day theory emphasizes, for both child and parent, the educational side of medical examinations and the placing of their

administration under school authorities would therefore seem preferable. The trend hitherto has been in this direction, and until social aspects of medicine undergo a radical change there is likely to be a division of opinion on this subject. At any rate, departments of education are obligated to assist in the educational aspect of this procedure.

Whether or not provided by legislative enactment, both departments have a part to play in the promotion of the health of the school child and there should be full cooperation without trespass on the administrative field of the other agency provided, of course, that that other agency is doing its full duty by the child.

The cooperative undertakings recently developed in a few States are described in the statements concerning those States. They will be watched with interest. They should be effective provided the complicated machinery of organization is centered in an executive agent who has a free hand and is helped and not hampered by that machinery. The question of the administration of school health work has recently been discussed in some detail by the commissioner of education in a publication of this office.<sup>12</sup>

*The work of general supervisors.*—Mention should be made that State and district supervisors of elementary education often serve as agents in the promotion of school health work and physical education, and especially where they work under a department which has on its staff special supervisors in these fields. The importance of these agents in the supervisory scheme cannot be overemphasized.

### Recommendations

There should be a division or section in the State department of education devoted to *health work* and *physical education*, with specially prepared personnel in each of the following fields:

- (a) *Health education* (including instruction in health and in safety, and also other activities for the welfare of the child which should be carried on by the teacher. Unless a special agent is located in home economics, the management of school feeding would be included in this field of supervision).
- (b) *Physical education* (including recreation and the general control of inter-scholastic athletics).
- (c) *Health service* (including besides medical, dental, and nursing activities, the safety and sanitation of the school plant and of transportation facilities.)

<sup>12</sup> U. S. Office of Education, Federal Security Agency. *Organization and administration of school health work.* By Fred S. Moore and John W. Studebaker. Washington, U. S. Government Printing Office, 1940. (Bulletin 1939, No. 12.)

We have placed health education first because of its primary historical and general importance, and because it includes the truly curricular material of physiology, hygiene, and safety.

This does not mean that the activities embraced under the term *Physical Education* are less important than those labeled *Health Education*, but they are certainly not more important, and it is because of the seeming neglect of the promotion of health instruction that many State departments of health have assumed its direction.

The division mentioned in the first paragraph should, because of its varied functions, some of which are not instructional, be made directly responsible to the superintendent or deputy superintendent, according to the total staff of the department. However, if only (a) and (b) are included in the work of the department, the section might well be located in the division of instruction.

We have come a long way since the days of Horace Mann and never again can a chief school officer attempt the direction of work in the manifold fields of hygiene and of physical activities. The machinery has become entirely too complicated. All too many administrators in lesser positions are attempting, with little appreciation of the task, and no preparation for it, to manage a school health program for which all too few of those with special training are fully fitted. In the promotion of this program the State board of education cannot afford to do less than to secure the best prepared persons available for at least each of the two distinct phases labeled with the terms "health education" and "physical education." Physical education will always connote "recreation" and the "control of interscholastic sports" while health education will include not only instruction in hygiene and in safety, but the daily appraisal and oversight of pupils and the healthful management of the schoolroom. Granted that public opinion is sufficiently appreciative, there should also be in the State, a third supervisor of the school health service (into whose hands the oversight of sanitary conditions and janitorial service more properly belongs). If health examinations are the educational experiences they are proclaimed to be, their supervision logically belongs in the State department of education. A supervisor in this field will need assistants in school nursing and in dental service.

There remains the very important matter of the school lunch, which, if not taken care of in the home economics section of the State department, may be allotted to the supervisor of health education.

It is sometimes possible to find a person prepared in health education who is also capable of supervisory activities in physical education, but the two fields represent such diverse interests that even with a small State staff there is usually need for separate agents. It is more

rare to find a person who might adequately supervise the activities of the health service along with those of health education and physical education.

In a large State not only should the activities under (a), (b), and (c) be represented by thoroughly prepared personnel but there may well be further specialization in each realm as is the case in New York.

If the State laws do not permit of an adequate program and its proper supervision, they should be modified as early as public opinion will permit and backed by specific regulations. If health is "our first objective" or even of the "first rank after the elementary branches" we should work to achieve that objective in a practical way and not by desultory, hit-or-miss methods and incomplete procedures.