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ABSTRACT

Teachers carry out a variety of responsibilities in comprehensive school health, including health instruction and identification of students who may be experiencing health problems. Teacher education is considered a major factor in the effective implementation of comprehensive school health. A study was conducted, therefore, to investigate preservice teachers' opinions regarding the need for preparation in health education and the desired characteristics of such training. The study also explored whether prospective teachers' ideas about preservice health education were related to the grade level they expected to teach or their prior school experiences. Study participants included 110 California teacher credential candidates who rated the importance of 55 school health topics in preservice teacher training, grouped into 5 general categories: (1) health content; (2) promoting wellness; (3) teaching strategies; (4) identifying and managing student health problems; and (5) healthy school environment. Results indicated that 53 of the 55 topics were judged "important" or "essential" to preservice training. Prospective elementary/middle school teachers rated training in health content knowledge, teaching strategies, and identifying and managing student health problems significantly more important to their preparation than did prospective high school teachers; no significant differences were found between the two groups in the perceived importance of promoting wellness and healthy school environment. Study results indicated that credential candidates believe training in health education at the preservice level can help prepare them to assume more health-related responsibilities such as HIV/AIDS instruction, violence prevention, and conflict resolution. A table provides a list of topics that are included in the five areas of comprehensive health education. (ND)

Teacher Credential Candidates' Perceptions of the Need for Preservice Training in Comprehensive Health Education.

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ED 391 788

Teachers carry out a variety of responsibilities in comprehensive school health, including preventive health instruction and the identification and referral of students who may be experiencing health problems. Teacher preparation is considered a major factor in the effective implementation of comprehensive school health (Butler, 1993). The primary objective of the present study was to investigate preservice teachers' opinions regarding the need for preparation in health education and the desired characteristics of such training. The study also explored whether prospective teachers' ideas about preservice health education were related to the grade level they expected to teach or their prior experience in schools.

Method. One hundred ten California teacher credential candidates enrolled in teacher education courses, including health education completed a paper-pencil survey in which they rated the importance of 55 school health topics in preservice teacher training. (See Table 1.)

Results. Teacher credential candidates rated health education an important part of preservice training. Fifty-three of the 55 health education topics were judged "important" to "essential" to preservice training. Multiple Subjects and Single Subject Credential candidates differed in the value they placed on several of the component areas health education. (See Table 2.) Oneway ANOVA's indicate that prospective elementary/middle school teachers rated training in Health Content Knowledge, Teaching Strategies, and Identifying and Managing Student Health Problems significantly more important to their preparation than prospective high school teachers. There were no significant differences between prospective elementary/middle school teachers and high school teachers in the perceived importance of preparation in Promoting Wellness and Healthy School Environment.

To assess whether candidates' school experience was associated with perceived importance of training in health education, Pearson correlations were calculated between self-reported years working in schools and each of the five composites of comprehensive health education. All correlations were nonsignificant ranging from $-.05$ to $.11$. Similarly, oneway ANOVA's between the socioeconomic levels of the schools in which candidates had worked and perceived importance of the five composites of health education revealed nonsignificant F values ranging from $.78$ to 1.99 .

Discussion. The central finding of the study was that teacher credential candidates valued wide-ranging preservice training in health education, including curricular content, teaching strategies, and the identification and referral of students at risk of health problems.

There were differences in the value that elementary/middle and high school teacher candidates gave to three areas of health education. Significant variance in the perceived value of training in health content and pedagogy may reflect prospective high school teachers' expectation that they are unlikely to teach health. By the same token, prospective elementary/middle school teachers may assign greater value to preservice training in health curricular content and teaching strategies because they are more likely to teach all or a variety of subjects, including health.

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2

In contrast, prospective high school and elementary/middle school teachers equally valued training in the non-curricular specific areas of Promoting Wellness and Healthy School Environment. These areas describe life skills and supportive contexts which foster healthy behavior patterns in youth. Learning ways to teach life skills in connection with their subject area expertise may be more appealing to secondary candidates than training in health curricular content and pedagogy.

It is more difficult to speculate why prospective high school and elementary/middle school teachers differed in perceived importance of training to identify and manage students' health problems. Secondary candidates may believe that health problems are less serious in adolescent populations, that teachers will be less effective in dealing with them, or that these problems are not essential concerns for high school teachers. Secondary teachers' beliefs about helping high school students with health problems is an area needing further study.

Current trends indicate a critical need for health promotion efforts targeting children and youth (Kann, Warren, Harris, Collins, Douglas, Collins, Williams, Ross, & Kolbe, 1995). Teachers have been asked to assume more health-related responsibilities, which recently have included HIV/AIDS, violence prevention, and conflict resolution. The results of the present study suggest credential candidates believe training in health education at the preservice level can help prepare them to fulfill these obligations.

References

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Table 1

Topics Comprising Five Areas of Comprehensive Health Education¹

Health Content Knowledge

Alcohol, tobacco and drugs
 Personal health
 Consumer health
 Injury prevention and safety
 Nutrition
 Environmental health
 Family living
 Individual growth and development
 Communicable and chronic illnesses
 Fitness
 Death education
 HIV/AIDS prevention
 California Health Framework

Promoting Wellness

Abstinence
 Self-esteem
 Goal-setting
 Healthy body image
 Dealing positively with emotions
 Conflict resolution
 Resiliency
 Assertiveness skills
 Stress management
 Resistance skills
 Sexual harassment and date rape

Teaching Strategies

Integrating health topics with other
 academic areas
 Creating an emotionally positive classroom
 environment
 Responding to students' personal questions
 about themselves
 Responding to students' personal questions
 about the teacher
 Values clarification
 Facilitating classroom discussion of
 controversial topics
 Health education strategies, such as role
 playing, decision-making, question box

Identifying and Managing Student Health Problem

Eating disorders
 Suicide prevention and intervention
 Child abuse identification and reporting
 Teachers' possible liability
 Depression in youth
 Common infectious diseases
 Attention Deficit Disorder
 Student and family health referrals
 Collaborating with health professionals
 Students with special health problems
 Students in families with alcoholism or
 substance abuse problems
 Universal precautions
 CPR certification
 First AID training

Healthy School Environment

Peer education programs
 Improving parental involvement
 Multicultural sensitivity
 Violence prevention
 Respect for lifestyle diversity
 Drug search and seizure laws
 Gang prevention strategies
 Laws regarding *in loco parentis*
 Laws regarding informed consent
 Health promotion for teachers

¹Fifty-five topics were presented in random order without reference to areas of comprehensive health education.

Table 2
 Multiple Subjects and Single Subject Credential Candidates' Mean Ratings of the Importance
 of Health Education in Preservice Teacher Training

<u>Health Education Areas</u>	<u>Multiple Subjects Candidates^a</u>	<u>Single Subject Candidates^b</u>	<u>F</u>
Health Content Knowledge	2.44	2.23	6.76 **
Promoting Wellness	2.56	2.45	1.77
Teaching Strategies	2.45	2.29	4.31 *
Identifying and Managing Students' Health Problems	2.44	2.22	7.32 **
Healthy School Environment	2.41	2.29	2.50

Note: $a_n = 77$. $b_n = 29$.

* $p \leq .05$. ** $p \leq .01$.