



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

Introduction Of Health Education Benefits Behaviors Of Teenage Students In Schools

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Abstract:

Health education is one strategy for implementing health promotion and disease prevention programs. Health education provides learning experiences on health topics. Health education strategies are tailored for their target population. Health education presents information to target populations on particular health topics, including the health benefits/threats they face, and provides tools to build capacity and support behavior change in an appropriate setting.

School health education, as the name implies, primarily involves instructing school-age children about health and health-related behaviors. School children are groups of young people with similar background and environment. School based health promotion is the most crucial approach needed to improve the wellbeing of the children, teenage students and the adolescent. Introduction of Health Education in school provides solutions to health problems. Develop health habits through what the child has learnt about health at home. A knowledge about the importance of health activities and the transference of that knowledge to health habits are very important.

Key Words: schools, Health education, Health activities and teenage students.

Introduction:

School is a small society Responsibility of skill health does not lie on any one's shoulders. Even some cause of skill health has their origin in social conditions which require action on the part of community as a whole in order to eradicate them. It aims at realizing the people to make combined efforts and work for community health.

Health education is a social science that associates itself from the organic, environmental, psychosomatic, material and medical sciences to endorse health and prevent disease, disability and premature death with the help of education-driven controlled behaviour adjustment actions. Health education is the expansion of individual, group, institutional, community and systemic planning to develop health awareness, persona, skills and behaviour. The intention of health education is to optimistically influence the health behaviour of individuals and communities as well as the livelihood and working environment that hold sway over their health.

Health education is a social science that draws from the biological, environmental, psychological, physical and medical sciences to promote health and prevent disease, disability and premature death through education-driven voluntary behavior change activities. Health education is the development of individual, group, institutional, community and systemic strategies to improve health knowledge, attitudes, skills and behavior. The purpose of health education is to positively influence the health behavior of individuals and communities. The objectives of the Health Education is to help support students as they embark on or continue their individual and collective journeys to build and improve their wellbeing. Environmental factors contribute to the health of adolescents. Adolescent behaviors are influenced at the individual, peer, family, school, community, and societal levels.⁸ Because many sectors of society contribute to adolescent health, safety, and well-being, a collaborative effort that engages multiple partners is necessary. Such joint efforts can also help to promote a more collaborative approach to addressing adolescent health—one that views each adolescent as a whole person, recognizing and drawing upon his or her assets and not just focusing on risks. The National Curricular Framework 2005 by NCERT has categorically stated that health is a critical input for the overall development of the child and it influences significantly enrolment, retention and completion of school.

It is important to educate the children early in life, about their health and the right behaviours, so that they lead a healthy life and realize their full potential. These educated, healthy and productive adults, will form the base of resilient, prosperous and sustainable communities. One of the key strategies to reach children and adolescents is through schools as schools serve as an ideal platform to impart education on health issues, instituting in them healthy behaviours, forge linkages with services and reach parents and community through the students. Evidence shows that school health programme offer high cost benefit ratio and schools can be used to efficiently implement health activities.



History:

The history of organized modern health education goes back just a few decades. However, the entire field of health education and promotion has been around for millennia in one shape or another. The roots of health education lie with the ancient Greeks. These guys were super smart. They were the first people to, at least partially, realize that a person's health was not influenced by some supernatural mumbo jumbo and that things like a person's activities, environment, and diet played a role in diseases. Inasmuch, the ancient Greeks organized concepts related to public health policy, education, and the development of skills related to promoting an individual's and a community's health.

Health education can be defined as the principle by which individuals and groups of people learn to behave in a manner conducive to the promotion, maintenance, or restoration of health.

In 1826, to offer Indians the opportunity to learn and practice Western medicine, an Indian medical school was started in Southern Bombay with surgeon John McLennan as the superintendent. This school, however, did not run beyond 6 years.

It was in the year 1835 that a more comprehensive system of training was instituted in India. The evolution of public health in colonial India has been chronicled earlier. The Calcutta Medical College was established by an order in 1835 to fulfill the growing need for health professionals

The health education in its modern form started to come into existence around the in 1970.

In 2013, Government of India launched the Rashtriya Bal Swasthya Karyakram (RBSK) under the National Health Mission for early detection and timely management of illnesses among children (0-18 years) by periodic screening through the platform of Schools and Anganwadi centers.

The Indian Medical Services was formed in 1896 and the subsequent transfer of public health, sanitation, and vital statistics to the provinces took place in 1919. A new department to cater to education and health was constituted in 1912, with public health physicians in medical colleges entrusted with teaching hygiene. In the late 1990s the World Health Organization launched a Global Health Initiative which aimed at developing "health-promoting schools", which would enhance school health programs at all levels including: local, regional, national, and global level.

Aims :

- To provide information about health and its value as community asset
- To maintain norms of good health
- To take precautionary and preventive measures against communicable diseases.
- To render assistance to the school going children an understanding of the nature and purpose of health services and facilities
- To develop and promote mental and emotional health
- To develop a sense of civic responsibility.
- Early diagnosis , treatment and follow-up of defects
- Awakening health consciousness in children
- To create healthful environment

Objectives:

To enable the student /To helps the students

- To develop a scientific point of view of health with reference to traditional and modern concept of health.
- To understand their own role on health and to medical agencies in meeting those problems.
- to take interest in current events related to health.
- To protect and maintaining and promoting individual and community health.
- to set an example of desirable health behaviour.
- to gain sufficient knowledge of first aid.
- To provide desirable knowledge about marriage sex and family planning to the students.
- To understand the importance of Physical training sports, games, yogic exercises as well as their relationship with health education programme.
- To work for the maintenance of health.
- To understand the increased the hazards of life and health problems and also how to face and prevent them.
- To Protect and promote health of children and staff
- To Promote safe and healthful environment
- To Educate on public health practices

Types of adolescent development:

- own identity development and to prepare for adulthood.
- Physical Development.
- Intellectual Development.
- Emotional Development.
- Social Development.

Health education curriculum should include:

- A set of intended learning outcomes or objectives that directly relate to students' acquisition of health-related knowledge, attitudes, and skills.
- A planned progression of developmentally appropriate lessons or learning experiences that lead to achieving health objectives.
- Continuity between lessons or learning experiences that clearly reinforce the adoption and maintenance of specific health-enhancing behaviors.

- Content or materials that correspond with the sequence of learning events and help teachers and students meet the learning objectives.
- Assessment strategies to determine if students have achieved the desired learning.

Examples of health education activities include:

- Lectures
- Courses
- Seminars
- Symposium
- Webinars
- Workshops
- Conference
- Classes

Aspects Of School Health:-

- Health appraisal of school children & personal
- Remedial measure & follow up
- Prevention of communicable diseases
- Healthful environment
- Nutritional services
- First Aid & emergency care
- Mental health
- Dental health
- Eye health
- Health education
- Education of handicapped children
- Proper use & maintenance of school health record.

Emotional Changes of Teenage Students

- Their school performance
- Their appearance, physical development and popularity
- The possible death of a parent
- Being bullied at school
- School violence
- Not having friends
- Drugs and drinking;
- Hunger and poverty in the country
- Their inability to get a good job
- Nuclear bombs and terrorists attacks on the country
- The divorce of their parents and dying.

Importance of Health education:

- It stimulates people's awareness and skills
- Health education elevates the student's understanding of health
- It inspires the youth to boost and keep up their health
- Health education improves the quality of life
- It also reduces premature deaths

Quality of school Health Education:

- Health education that concentrates on developing health-related skills and imparting health-related knowledge and attitudes is more likely to help youth practice health enhancing behaviors.
- Skill development is more likely to result in the desired healthy behavior when practicing the skill is tied to the content of a specific health behavior or health decision.
- The most effective method of skill development is learning by doing – involving students in active, participatory experiences, rather than passive ones.

Strategies of school Health Education:

- Utilizing school health education programs that adhere to the recommendations from the National Health Education Standards.
- Employing highly qualified and effective health educators.
- Ensuring recommended health education instruction time at the elementary and secondary levels.
- Having a national plan and budget to support school health education.

Components of school Health Education:

- Choice of technologies
- Acceptance of technologies
- Planning for facilities installation (siting, timing, etc.)
- Installation of facilities (funds, labor, materials)
- Repair and maintenance of facilities
- Appropriate use of facilities

Main Health Issues in adolescent period:

- Injuries
- Violence
- Mental health
- Alcohol and drug use
- Tobacco use
- HIV/AIDS
- Other infectious diseases
- Early pregnancy and childbirth

Characteristics of health education strategies:

- Participation of the objective population.
- Completion of a community wants evaluation to recognize community aptitude, resources, priorities, and requirements.
- Systematic learning actions that increase participants' understanding and skills.
- Execution of programs with incorporated, well-planned curriculum and resources that take place in a setting fitting for participants.
- Presentation of information with audiovisual and digital means such as slides and projectors, videos, books, CDs, posters, pictures, websites, or software applications.
- Ensuring expertise of program staff, through training, to maintain faithfulness to the program model.
- Lastly, health education minimizes both human and financial costs

Health Programme for Adolescent development in School:

- Adolescent Friendly Health Clinics (AFHCs)
- Weekly Iron Folic Acid Supplementation(WIFS)
- Menstrual Hygiene Scheme(MHS)
- Peer Education Programme.
- Supportive supervision checklists (RKSK)
- School Health & Wellness Programme.
- Guidelines for RKSK.

Application of Health Education:

- poster campaigns to encourage the construction of latrines;
- presentation by the district administrator to a community group on the capital costs of alternative water supply technologies;
- radio talks on the etiology and transmission of water and sanitation-related diseases;
- demonstration of the operation of a hand-pump;
- booklets describing the various types of excrete disposal systems and the criteria for choosing ones and
- popular theater and puppet shows to dramatize the relationships of water supply and sanitation to health status.

Elements of high-quality school health programs:

- A focus on priority behaviors that affect health and learning.
- A foundation of support for every child and adolescent.
- A complete set of program components.
- Multiple interventions.
- Program coordination and oversight
- Systematic program planning
- Ongoing staff development
- Active student involvement.

Conclusion:

In conclusion, health education is a notable feature of health, with big benefits to both the single and the community. There are many advantages to good health. The government must increase their expending in educating people concerning health. Similarly, the public should apply training opportunities for health to improve their awareness and ability.

Because the health of students is unresolvable linked to educational achievement, it is critical that schools promote health. Schools can provide the nurture and support needed to facilitate the adoption of health-enhancing behaviors. This helps assure that the educational gains achieved by a student will be maximized by a long and healthy life as an adult. A comprehensive, well-coordinated school health program can promote the optimal physical, emotional, social, and educational development of students.

There are certain factors such as learning disorders or behavioural disorders which need appropriate diagnosis by a health professional. If detected at the right time and at the right age, they can be addressed and remedial action taken to ensure improved performance in school.

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