



## **Health Education For Adolescents - Teachers Opinion**

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***Abstract:***

*Approximately 80% of worlds children live in developing countries ,their well being as adults depends heavily on the education they receive. The developing country like India has to opt for education as one of the most important and useful tool to achieve National development. India adopted the National policy for children in Aug 1974,The policy declares, It shall be the policy of the state to provide adequate services to children both before &after birth& through the period of growth ,to ensure their full physical, mental &social development and recognized children as the ‘Nations Supremely important asset’ School education has been described as a “Social Vaccine” and it can serve as a powerful preventive tool. Teachers play vital role in the teaching set ups As they play unique role in molding the personality of the students during their formative period of school life Which will intern effect the future generation in their overall development. Introduction of Health education at this stage is very important attempt has been made to know the teachers opinion regarding the same.*

***Key words :***Adolescents Health education Teachers High Schools

### 1. Introduction

Teachers have a special role of “GURU” in Indian socio cultural setup .Teachers in many developing countries are well respected leaders and viewed as role models by students and their families and they therefore have important impact on learning and actions. Teachers play vital role in the teaching set ups As they play unique role in molding the personality of the students during their formative period of school life Which will intern effect the future generation in their overall development<sup>1</sup>. In India there are school teachers in most villages and their number is five times more than health workers .Teachers when committed and trained can be an invaluable resource for health education both in school and in the community. The twin goals of “Education for all and Health for all” are inseparably linked .Good health is essential for effective learning and education is a means of empowering children and adults to attain and maintain health and ensure wellbeing<sup>2</sup>

Role of teachers in health education. Health education for all is an essential component and it can only succeed if teachers take this onerous responsibility the role of primary school teachers in health and other aspects of education is pivotal. The teachers task should go beyond imparting of basic knowledge to include equipping children with skills and shaping attitude towards learning<sup>3</sup> .

Health education is complex activity in which different individuals and organizations play a oart. Among them are parents, teachers, friends, physicians, nurses, health workers and various organization, governmental and non-governmental. No country in the world, least of all a country with a large population and small resources such as India can afford to employ institutionally trained health workers therefore health education should be the concern of everybody engaged in any form of community welfare work.<sup>4</sup>

During the past few decades a number of health education models have been developed they include Medical model, Motivational model, and Social interventional model.<sup>5</sup>

Whatever model can be utilized to render health education, the scope of health education extends beyond the conventional health sector. It covers every aspect of family and community health while no definite training curricular can be proposed, content of health education may be divided into the following deviations for the sake of simplicity, since health education has a limited impact when directed from general education most of the needed information must be integrated in to the educational system and must have the young population as the Principle target, Human biology, Nutrition, Hygiene, Family health Disease preventional and control, mental health prevention of accidents and use of

health services.<sup>6</sup> Approximately 80% of worlds children live in developing countries ,their well being as adults depends heavily on the education they receive<sup>7</sup> The developing country like India has to opt for education as one of the most important and useful tool to achieve National development. India adopted the National policy for children in Aug 1974,The policy declares, It shall be the policy of the state to provide adequate services to children both before &after birth& through the period of growth ,to ensure their full physical, mental &social development and recognized children as the ‘Nations Supremely important asset’<sup>\*8</sup> School education is a complex process and many multidimensional factors influences the teaching process School education has been described as a “Social Vaccine” and it can serve as a powerful preventive tool<sup>\*9</sup>

To know and probe what actually are the opinion of teacher dealing with Adolescents students at high schools, the present study title “High School Teachers opinion about Health Education for Adolescents” intends to elicit the teacher opinion about health education who are working in high school of Bijapur district of Karnataka state which is one of the Socio economically backward district.<sup>10</sup>

## **2. Aims and Objectives**

- To focus on the opinion of teachers about health education in schools
- To know the relationship between gender and subject of teachers with their opinion about health education in schools

## **3. Material and methods**

- Study area: Bijapur District Karnataka
- Study design: Cross sectional
- Study setting: High schools total 30 schools covered
- Sample size : 162 teachers
- Study period: Nov2010 to March 2011
- Study technique: Questionnaire
- Statistical analysis: Percentage and chi square

## **4. Results and Discussions**

Out of total 162 teachers 114[70%] male and 48[30%] female. teachers participated in the study 79[49%] were from rural schools and 83[51%] were from urban schools.

Among 162 teachers language teachers were maximum i. e 61[38%] followed by science teachers 55[34%], e 27[17%] .Sports 13[8%] and Gk/Draw/comp were only 6[4%] ,104[64%] were full time permanent teachers and 58[36%] were temporary/part time teachers

Type of school	Necessary		Not Necessary		Not answered		Total	
	NO	%	NO	%	NO	%	NO	%
Govt School	27	(18)	1	(50)	2	(29)	30	(18)
Private Unaided	34	(22)	0	-----	2	(29)	36	(22)
Pri vate Aided	92	(60)	1	(50)	3	(42)	96	(60)
Total	153	(100 )	2	(100 )	7	(100 )	162	(100 )

Pooled  $\chi^2=1.482$   $P=0.477$  no association found

*Table1:Distribution of teachers according to type of school and their opinion about Health education in school*

#### 4.1.Table No 1

Distribution of teachers according to type of school and opinion about health education in schools, among the total 162 maximum 96 ( 59% )were from private aided schools 36 (22% ) were from private unaided school teachers and 30 ( 19% ) belonged to government schools .Maximum teachers 153(94%) opined that health education is necessary and 60 % teachers working in private aided schools felt Health education is necessary at schools followed by22% private unaided school teachers , 18% government school teachers Pooled  $\chi^2=1.482$   $P=0.477$  No association found between type of school and the teachers opinion about health education at schools

Medium of Instruction	Necessary		Not Necessary		Not answered		Total	
	NO	%	NO	%	NO	%	NO	%
English	54	(35)	1	(50)	-----		55	(34)
Kannada	60	(39)	1	(50)	4	(57)	65	(40)
Urdu	39	(26)	0	-----	3	(43)	42	(26)
Total	153	(100)	2	(100)	7	(100)	162	(100)

Pooled  $\chi^2=13.228$   $P=0.01$  no association found

Table 2: Distribution of teachers according to Medium of instruction and their opinion about Health education in school

#### 4.2. Table No 2

Medium of instruction of teachers and their opinion about health education It is found in this study That. Maximum teachers 60 (39%) were from Kannada medium schools followed by

English medium 54 (35%) and Urdu medium teachers were 39 (26%) were of the opinion that health education is necessary in the schools  $\chi^2=13.228$   $P=0.01$  there is No Association between medium of instruction of teachers and their opinion about health education at schools

Gender	Necessary		Not Necessary		Not answered		Total	
	NO	%	NO	%	NO	%	NO	%
Female	46	(30)	01	(50)	01	(14)	48	(30)
Male	107	(70)	01	(50)	06	(86)	114	(70)
Total	153	(100)	02	(100)	07	(100)	162	(100)

Pooled  $\chi^2=0.2251$   $P=0.617$  no association found

Table no 3: Gender of teachers and their opinion about Health education in school

## 4.3. Table No 3

Gender of teachers and their opinion about health education among the 162 teachers 114 (70%) were Male teachers and 48 (30%) female teachers. Maximum 107(70%) male teachers and 46(30 %) female teachers have opined that health education is necessary in schools. Pooled  $\chi^2=0.2251$   $P=0.617$  There is No Association between gender of teachers and their opinion about health education.

Experience in years	Necessary		Not Necessary		Not answered		Total	
	NO	%	NO	%	NO	%	NO	%
1 -5	37	(24)	01	(33)	3	(43)	41	(30)
5 -10	30	(20)	01	(33)	-		31	(19)
10 -15	30	(20)	01	(33)	2	(29)	33	(20)
15 -20	17	(11)	-		-		17	(10)
20 -25	14	(09)	-		1	(14)	15	(09)
25 -30	17	(11)	-		1	(14)	18	(11)
>30	07	(05)	-		-		07	(04)
Total	152	(100)	03	(100)	07	(100)	162	(100)

Pooled  $\chi^2=4.693$   $P=0.5837$  no association found

Table no 4: Experience of teachers and their opinion about Health education in school

## 4.4. Table No 4

Experience of teachers and their opinion about health education it is found that the highest percentage of teachers i.e 37 (24%) who had 1 to 5 yrs of experience felt the need of health education at schools followed by 20% of teachers who had 5 to 10 and 10 to 15 yrs experience and Only 5% those who had more than 30 years of experience opined health education at school is necessary Pooled  $\chi^2=4.693$   $P=0.5837$  No association was found between number of years of experience and their Opinion about health education

## 5. Conclusion

- Teachers have opined that health education at schools is necessary ,study shows that

Teachers are very much concerned about health of adolescents The concerned authorities

have to utilize this resource

- There is utter need to orient , Train and refresh teachers on important issue like Health

education at schools

- Whatever IEC material comes to Government hospitals PHC/CHC must be made available to school teachers for dissimilation of health message .
- Participation of Medical colleges , Education department ,NGO's ,SHG's, NSS volunteers and local leaders can play the role of catalyst in this issue like health education at schools

**6.Reference**

1. 1VeenaSAlgurSAKazi Teachers observation regarding health problems of adolescent students in Bijapur International journal of health science research( IJHSR) vol-1issue 2 jan,2012 p117
2. Textbook of community medicine Sunderlal Adarsh Pankaj<sup>2<sup>nd</sup></sup> edn p147
3. UNICEF, The state of worlds children 2007
4. K Park TB of Preventive and social medicine p 729
5. WHO,TRS 690 p 8 1983
6. ibd p714
7. Glewwe, Paul & Michael kreme -2006'Schools,teachers &education out comes in developing countries' Hand book of the economics of education by Eric A Haushek and Finis weleh Hugh Hawes ,Christine Scotchmer, children for health Jan 2003
8. P Lal ,Anita Nath S Bachan &Gopal K Ingle'A study of awerness about HIV/AIDS
9. Among secondary school children of Delhi Indian journal of community medicine July2008 33[3] 1-4
10. Dr Nanjundappa report-Chairman The High Power Committee for Redressal of Regional imbalances (HPCRR) submitted to Karnataka State government 2002