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AUDIO-VISUAL AIDS IN SCHOOL HEALTH EDUCATION

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I INTRODUCTION

The objectives of health teaching must naturally coincide with those of education in the general sense of the word and must therefore be made an integral part of the total education programme. When complete physical, mental and social well-being result, the aim of health education has been accomplished.

Both in his day-to-day work with his pupils and in applying his school health curriculum, a teacher must adopt the general process of education by getting his pupils to know, to love, to do and to want.

After the pre-school age, school age becomes the most propitious for habit formation and this gives the teacher a unique advantage over other educators. In order to be able to help his pupils to form good health habits and develop a sense of the social values of good health and a sense of responsibility to the public health, he must have at his disposal suitable aids and materials and be familiar with communication media in school health education. He must be also able to use these aids with intelligence and discretion and with due regard to their respective functions and to the particular aim in mind.

II AUDIO-VISUAL AIDS NEEDED BY THE TEACHER

A matter of primary concern to the class-room teacher is to have at his disposal such audio-visual aids as are suitable to the purpose of the health education programme of his grade. The problem of acquiring these aids is a fairly easy one in countries which possess institutions of their own for producing the aids required in carrying out the national health education programme. But in countries where no such institutions exist the problem of acquiring the required aids becomes really difficult and assumes a challenging aspect to all conscientious educators.

If a country does not produce the required aids or produces them on a very inadequate scale, can it effectively and successfully adopt such aids as are produced and effectively used in a different country ?

A number of foreign-made flannelgraphs were studied with the purpose of exploring the prospects of utilizing them in the implementation of the education programme of the Syrian Arab Republic. They were found to be very

cleverly and conscientiously designed for stimulating class-room discussions which would bring to light the students' motives of behaviour and leave a favourable effect on their future behaviour. It soon became evident, however, that those flannelgraphs which were used in a country of different cultural and economic setting could not so effectively be used in the new environment and that a great deal of the general design pattern of those flannelgraphs would have to be changed or modified to suit the characteristic local conditions. But if such adaptation is sometimes possible, as in flannelgraphs, it is very often out of the question in the case of most foreign-produced motion pictures where usually no degree of technical skill would be enough to adapt them successfully to the needs of the local environment.

In his book "Education sanitaire", Dr. Jules Gilbert warns against one country borrowing the health education programme of another. If this is true with respect to programmes, it is certainly true also with respect to the aids and means that are specifically made for a particular programme. Each country will then have to rely on itself in making whatever aids and means are needed for the implementation of her own programmes. This does not mean, however, that a country should not try to profit from the experiences acquired by another country in the field of planning, production, pre-testing and evaluation of audio-visual materials, neither does this exclude the possibility of one country profiting from the educational materials made by another when both have similar social and cultural characteristics. On the contrary, when such is the case, the exchange of educational materials should be encouraged.¹ If such similarity does not exist, the use of only those materials which could be adapted to the importing country's characteristics should be encouraged.

III PREPARATION OF EDUCATIONAL AIDS FOR SCHOOLS ON THE NATIONAL LEVEL

The first step in preparing audio-visual aids must set forth from the fact that children of a given age are alike in their basic needs, but different in their behaviour patterns.

Thus, it would be wrong to speak of typical children of any age level although there are so many boys and girls who at a given age share in common various needs, interests and characteristics. In this sense it has quite

truly been said that children of a given age are usually more alike than they are different. Differences in children's behaviour are accounted for by the different behaviour patterns of their homes and parents and, as Dr. A. Foord mentions in Rosenau's "Preventive Medicine and Public Health", a child's concept of health will, at the time of his entrance into school, be largely that of his or her parents.

When preparing audio-visual aids, the responsible educational institution must take into account:

- a. The ability of these aids to help the teacher in developing his pupils' physical, mental and social health within the scope of their particular age-group, needs and characteristics.
- b. Their ability to help the teacher in correcting such bad habits as a pupil may have acquired at home.
- c. Their ability to introduce such new experiences to his pupils as would conduct them on the road of a healthy adult life.

These aids will, however, fail to stimulate the children to the desired course of action unless their preparation is based on a factual understanding of the children's needs and habits. The children themselves constitute the subject matter of health, and without a good understanding of our subject matter, how could we hope to plan out an appropriate health education programme or to provide those audio-visual aids that would best serve the teacher in his work ?

1. Social Surveys

Our second step in preparing class-room aids will be to carry out such social studies and surveys as would help to provide the required information about the children's pre-school acquired habits and beliefs, with a view to showing how far these habits and beliefs have been influenced by the school health education programmes both at the elementary and secondary levels. This is an indispensable step for preparing the aids that a teacher will need in his work. Such aids must obviously be more than mere pretty drawings or fanciful pictures and must be able to help in acquainting the students with the true nature of their everyday problems and in suggesting practical solutions to them. With the help of these aids a teacher must be able to make his pupils want to practise regularly in their every-day life the new

experience until they adopt it and it becomes part of their health habits.

In the light of these guiding principles and in collaboration with a number of educators and school teachers, a representative survey study of fourth, fifth and sixth elementary grade pupils in Damascus schools was carried out in 1959. The purpose of this survey study was to appraise the children's health knowledge and habits with a view to drawing up an experimental health education programme for Syrian elementary grades and for determining what audio-visual aids should be used in the implementation of this programme.

Pupils were asked to answer a wide range of questions relating to such matters as cleanliness, hygiene, communicable diseases, safety precautions, rest, play and daily meals. It would be out of place here to dwell on the statistical results of that survey, but it should be mentioned that the information obtained from the pupils' answers have opened up new horizons in planning out many of the audio-visual aids needed in the implementation of the basic health education programme on the levels of the family, the school and the general public.

This survey has also been of great use in preparing a number of television programmes directed to the family and to various age groups of children up to the age of thirteen. The information obtained from the answers of the children supplied the substance of those programmes which took the form of dramatical representations portraying the habits, manners and problems of a typical Damascus family and suggesting solutions to their problems.

In one programme in connection with communicable diseases, the number of responses received by mail from children of age group 10 - 12 of Damascus, totalled 422.

Considering the fact that not all the children who wished to respond were, for a number of reasons, able to do so, and that in case of children who did actually respond, parents and siblings had assisted in finding answers to questions posed one will realize the great interest shown by television audience in following health programmes.

IV COOPERATION BETWEEN HEALTH AND EDUCATIONAL AUTHORITIES

From the foregoing it becomes apparent how important it is to establish active cooperation between health and educational authorities for the purpose of planning a school health education programme, preparing its materials,

pre-testing the quality of these resources and evaluating the effectiveness of the programme during a certain period of time after the beginning of its application, and for introducing whatever modifications may be considered imperative to make it answer the changing conditions in the light of the achieved results.

V AUDIO-VISUAL RESOURCES IN SCHOOL HEALTH EDUCATION

School health education has numerous audio-visual resources at its disposal. Each of these is used in a manner characteristic of the objective aimed at and the environment it is supposed to serve. These resources have developed so greatly that it is no longer admissible to confine education to the old method which depended largely on theoretical lessons. Every teaching situation now has its own methods and media and, however good a method or a medium may be, it can only be effectively used by a competent and well-trained teacher who can make his pupils take an active part in finding solutions to their health problems. He must not forget, however, that these instruments are designed to aid him and not to take his place in the class-room. A teacher who is satisfied with displaying health posters, films and film-strips can hardly claim to have performed his duties in health education. Such aids are meant to help him in his teaching and in stimulating group discussions aimed at solving his pupils' problems. Talking things over gives children an opportunity to share experiences, develop the capacity of feeling for and with others, find wholesome solutions to the common problems that inevitably accompany each stage of their growth, and integrate new concepts into their own background of experience.

Some of the best audio-visual aids for stimulating such discussions at school are the following:

1. Booklets and Leaflets

Booklets and leaflets used in teaching health are usually intended to serve as reinforcing material for the spoken word and should, therefore, be written in short, simple terms and illustrated with pictures or sketches for attracting the interest of the children.

It is needless to stress the importance of selecting these booklets and leaflets on the strength of their suitability to the mental faculties and needs of the various age groups. The information in them should not be

confined to the rules of physical health and safety but should also cover the rules of mental health, with special emphasis on the children's emotional and social life. With this aim in view, the problem should preferably be presented in story form and illustrated with pictures. This method enables the child to grasp the purpose of the lesson in a ready and easy manner and to comprehend the motives, reactions and behaviour of the characters of the story. After that, the children's observations would naturally lead them to consider and correct their own behaviour patterns. The more the children are encouraged to discuss their own behaviour patterns, the more it becomes possible for the teacher to understand particular aspects of the children's problems, the solution of which will depend to a large extent on the degree of cooperation between parents and educators.

2 Practical Demonstration

The method of practical demonstration is certainly the easiest, cheapest and most effective in school health education. The animal-feeding experiment is an excellent example that can be used at any learning level.¹ Children might, for example, be requested to demonstrate the effect of a well balanced diet on health by watching the growth of a number of chickens fed by them over a period of time.

This kind of practical experiment is recommended in demonstrating such health topics such as house flies or the method to be followed in bathing a baby, but practical experiments remain impossible in many other fields in mental and social health, communicable diseases, sex education and so on.

3. Motion Pictures

Motion pictures have a great appeal to children. A film can show skill, action, background information and facts. It can also assist in building attitudes, stimulate emotions and demonstrate solutions to problems.

In order to perform its function as an excellent visual aid to school health education, a film must be clear and to the point. The teacher must prepare the questions which he will put to his pupils on the subject of the film with the aim of stimulating group discussions. In this way the subject of the film will be more vividly incorporated into the children's experience.

1 Teacher's Activity Book for a Programme in Nutrition and Health (1954)

It is possible for the health educator to film very successful and cheap motion pictures dealing with local health education problems. The author has filmed a great number of silent motion pictures on such problems as cleanliness, flies, and quack medicine. While each of these films was being shown, personal comments were given on the particular occasion and discussions which followed were even more stimulating than he had dared to hope.

Motion pictures used in health education are of the 16 mm size. A film of 130 meters of length needs 10 minutes to be shown at the rate of 24 pictures a second. My personal experience has shown me that the comments on each scene of the film must not exceed half of the period needed for the scene. When a film is accompanied with the appropriate comments of the teacher himself, it becomes more personal and flexible and a very effective aid in fulfilling the objectives of health education.

4. Film Strips

The film strip is a very practical aid to the teacher and can be made to deal with any topic of human relationships and many aspects of health education. This aid has also the advantage of not requiring so many technicians and specialized personnel as are required in producing motion pictures. All we need for producing a film strip is a 35 mm camera and a simple device to permit taking two shots simultaneously. The film strip projector has, on the other hand, the advantage of being cheap and simple to handle. Another advantage of the film strip is its great flexibility. Any one picture can be retained on the screen or returned to later in the lesson.

Film strips have their own commentaries and questions suggested for discussion. They are usually of great help to the teacher, but a well-experienced teacher will have no difficulty in framing questions of his own to suit the demands of the local environment and occasion.

5. Slides

Films and film strips are sometimes not available with respect to one or other of the topics which touch upon school health education. In such cases the film slide can be used very effectively by the teacher. He can make his own collection, either in colour or in black and white, on any number of subjects needed for stimulating the interest of his class. These

film slides which are snapped by the teacher himself will moreover have the advantage of bringing into the class-room such informative and stimulating pictures as are really called for by the occasion. Being designed by the teacher himself and not by a foreign and remote hand, their appeal to the students will in all likelihood be very considerable. Many students will also like to make their own collections of slides and, with the local scenes and characters they represent, the group discussions which follow would be most effective in illustrating some of the most important points in health education.

6. The Flannelgraph

The flannelgraph is certainly the most flexible aid in school health education. The flannelgraph forms a picture with moving parts which can be constructed very easily at school. All we need is a sheet of flannel to cover the blackboard. The illustrations used may be symbols or outline pictures mounted on thin lint, sand paper or blotting paper. Talented students may be asked to help in preparing the pictures or symbols which will form the mobile parts of the illustration. Flannelgraphs can be purely symbolic to illustrate any health or anatomy subject such as the structure of the eye, or can be made in the form of a story on such subjects as malaria or home safety. But the most interesting of these is the multiple-choice flannelgraph, as it allows most participation from the group. It can be designed on any number of topics such as nutrition, personal hygiene, chain of infection, child development and so on.

A flannelgraph can be constructed within a few hours. When the multiple-choice flannelgraph is used with the full participation of the group, discussion is almost inevitable, since there is bound to be disagreement in the group about the relative positions of the pictures or symbols and when every member of the group has to make his choice, this will help to involve the entire group in the learning situation.

7 Posters

Posters are used to reinforce certain fundamental points explained in lessons, or to draw attention to some project or aspect of school work. A poster gives a purely visual message and its success will depend on its ability to attract attention to itself by its design, originality and challenge.

Posters can also be used to explain the various phases of a health problem with the aim of educating the viewer to adopt a new course of action or mode of behaviour.

Posters can be displayed singly or in a series, depending upon the message it is desired to convey. When film strips are not available, a series of simple expressive posters can be made to perform some of the important functions of the film strip.

The children can be encouraged to design their own posters on a suggested health topic and this would further stimulate their interest and thus add to the effectiveness of this visual aid.

8. Photographs

Ordinary photographs can also serve as a stimulating aid in school health education. These can be taken by the teacher himself or he may ask his students to take pictures on certain subjects of interest to illustrate the exact point he wishes to drive home. The pictures can then be enlarged and displayed to serve as health posters.

9. The Blackboard

The blackboard is no longer restricted to writing and illustration but is also used as a base for flannelgraphs, screens, poster and pictures. A movable board must therefore be added to it, on one side of which a black cinematographic screen is fixed to be used in broad daylight and a sheet of flannel on the other. In this way it becomes more flexible than the ordinary blackboard and can be used as a very useful teaching aid

10. Models

School health education can also make use of the three-dimensional model. It forms a real aid in stimulating the children's interest as it gives them an opportunity to feel as well as see new material. Models would further help the learning process in the children if they are encouraged to make their own models, which might be small replicas of large objects or enlargements from the original made to show some important details.

-- 11. The Tape-recorder

The uses of the tape-recorder are considerable in school health education. It encourages participation both during the recording session and playback and furnishes the group with recorded discussions for later analysis.

Recordings should not be too long. One minute is recommended as the time limit in amateur recordings. If a recording must for some reason be longer, it should be interrupted with discussions.

12. Role-playing

Boys and girls at any grade level are very fond of role-playing, which in fact serves to offer reassurance to the children that their experiences and feelings are shared by others. If children are encouraged to act out their problems, this may help them to discover better ways of handling them. Children also like to act the parts of their parents, teachers and all those who occupy an important place in their lives. Besides satisfying the children's emotional need to feel "grown-up", role-playing can also conduct them to gain a better understanding of the grown-up point of view. This in its turn will make the children want to improve their behaviour so as to get along well with others.

13. School Exhibitions

It would be a very good idea to invite the pupils' families to a school health exhibition displaying the school's achievements in the field of health education and to stress the importance of continued cooperation between parents and teachers in this field.

All students should be encouraged to take part in the organization of the exhibits along with their teachers, each group of students to be responsible for a certain line of activities according to their capacities and talents.

The exhibits may be organized on a general health education basis, or on more specialized ones such as nutrition, malaria control or healthy homes.

A school exhibition also provides an occasion for discussions between parents and teachers on whatever health problems may confront them in common. Such discussions may be very helpful in planning cooperation and solving some of the most difficult problems confronting schools and homes in matters relating to health education.

VI CONCLUSION

There is no end to the resources and materials on which a well-qualified teacher can draw in the course of his work at school, regardless of whether it is located in village or town. He can make good use of the many occasions that present themselves to him if he takes into account his students' interests, needs, experiences and intelligence. He will never fail to find some way for stimulating the active participation of his students with a view to solving their health problems and making health education more functional and meaningful.

Almost all children are naturally creative. They love to make things, to draw pictures, to write stories and to find out by doing. This intense curiosity on the part of children makes it easy for the teacher to provide a rich and varied programme of individual and group projects on health problems, and to promote those activities that would make each pupil come through his school experience with the best possible physical, mental and social well-being.

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