



You have downloaded a document from
RE-BUŚ
repository of the University of Silesia in Katowice

Title: Teachers' knowledge, professional qualifications and limitations within the scope of children's and teenagers'

Author: Joanna Bulska

Citation style: Bulska Joanna. (2007). Teachers' knowledge, professional qualifications and limitations within the scope of children's and teenagers'. "The New Educational Review" 2007, No 3-4, s. 99-105.



Uznanie autorstwa - Użycie niekomercyjne - Licencja ta pozwala na kopiowanie, zmienianie, remiksowanie, rozprowadzanie, przedstawienie i wykonywanie utworu jedynie w celach niekomercyjnych. Warunek ten nie obejmuje jednak utworów zależnych (mogą zostać objęte inną licencją).



UNIwersYTET ŚLĄSKI
W KATOWICACH



Biblioteka
Uniwersytetu Śląskiego



Ministerstwo Nauki
i Szkolnictwa Wyższego

Teachers' Knowledge, Professional Qualifications and Limitations within the Scope of Children's and Teenagers' Health Education

Abstract

The article presents an important and vital role of a teacher in a school where the fundamental law of every child is health education. It underlines the importance of a proper substantive and methodological preparation of people making the most profitable, long-run investment in human health. Special attention was paid to a holistic approach to health and a conception of versatile health education recommended by WHO, UNESCO and UNICEF.

Key words: *teacher in health education, functions of health education, teacher's basic features, role, qualifications.*

What is stressed in a holistic conception of health education is the importance of the integration of health-related issues with a general curriculum of human education and personality shaping, realized at every stage of a person's physical, psychic, social, cultural as well as moral and aesthetic development (M.M. Śliwa, 2001, p. 17). Thus, a human being in every phase of their life needs knowledge of health and ways to protect it. Health education is the most effective in the period of childhood and youth (T.B. Kulik, 1997, p. 91). It is part of education about themselves and the world and should be present on a daily basis in the life and experiences of a child (B. Woynarowska, 2000, pp. 417–443). Teaching health care cannot be understood as realization, through an educational process, of a given model of a human being caring for their health but instead shaping of a human-creator with regard to their body and health. Health is created by human beings themselves, in a place where they live and work, employing at the same time earlier life experiences (A. Krawański, 2004, p. 145).

Due to that, the exceptional role of a teacher since the earliest years resolves itself into stimulating and shaping a child's activity, providing conditions for the acquisition of desired and needed knowledge and developing abilities and shaping attitudes of protection of one's own and others' health, as well as levelling psycho-physical deficiencies. It is a discipline of education which is very complex and difficult, yet indispensable. Therefore, it should not be omitted as early as in the preschool period of a child's development, as this period is the most proper and basic for efficient health education (Frątczak, E., Frątczak, J. 1996, p. 6). Its task is preparation of society for a conscious modification of its behaviour and a tendency towards health-conscious behaviour eliminating unhealthy tendencies. Intentional state actions directed in this subject were entrusted to many institutions (Szewczyk, 2006, p. 354) and, among others, to kindergartens and schools.

The key element of the system of health education is still the teacher and their level of readiness to realise the aims of this education in particular. The national education system reform demands from the contemporary teacher to meet many new obligations, and the same applies also to health education. The complex goals and tasks of education demand proper knowledge and professional qualifications from the teacher, especially being conversant with pupils' health needs and an ability to read and interpret the core curriculum of health education, an ability to construct a curriculum of this education and an ability to select and use proper methods and means of health education (Lewicki, 2006, p. 175). Qualifications are understood as a range of one's knowledge, abilities and responsibilities (Kopaliński, 1980, p. 510). Thus, there is a need to specify more detailed directives which should be granted to a teacher of health education, who is not only an educator, but also a creator of models of health behaviour for students, as well as their parents (Żukowska, 1999, p. 179).

Therefore, for the realisation of the aims of health education a teacher should be in possession of:

- firstly, knowledge concerning health and factors influencing it, preventive measures against the most common dangers, disorders and illnesses, health education and health promotion.
- secondly, abilities to diagnose health knowledge, abilities and acts and pupils' needs in health education, drawing up a health education curriculum based on these premises, realisation of the basic issues of health education, cooperation with and searching for allies to realize health education at school, use of stimulating teaching methods and creating the atmosphere supporting pupils' comfort, participation and stimulation as well as an ability to evaluate the process and results of health education,

- thirdly, they should present the attitude which is characterized by the conviction that health is a value and a resource for a human being and society, readiness to improve their own health and to develop both individually and socially, openness to the needs of others, empathy, readiness to create models for health-conscious acts and readiness to create a healthy environment for work and studying (Woynarowska, 2001, p. 17).

Following Heliodor Muszyński several functions can be listed (**organisational, managerial, advisory and partnership**) which a teacher has to perform within the process of health education (Muszyński, 2001, pp. 143–148).

The organisational function becomes the more effective the more planning, forecasting and acting covers the future. Through integration and coordination it embraces, as one entity people, things and relationships important for a given educational-health act as well as conditions necessary for its functioning, it also shows ingeniousness, initiative and flexibility in the use of different solutions and undertaking decisions, aptly and fully formulates the tasks, delegating them among students and gives precise rules of their realisation controls, not allowing to undertake new tasks without careful performance of the earlier tasks.

The managerial function. Effectiveness of management depends not only on the way managerial tasks are performed but it is also subjected to the character of a group under educational-health management.

The advisory function can be performed by a teacher not only in reference to a pupil but also it can include all other environments where a pupil exists, a pupil's family in particular. The performance of a guide's and advisor's functions undoubtedly demands particular personal predispositions which must find their expression in an educator's proper health operation.

The partnership function refers to the element in a health teacher's role which consists in influencing a pupil through an individual interpersonal approach. The partnership conception rests on building up a bond joining both parties in any sphere being an important section of their activity. Partnership in health education demands, beside a certain amount of external conditions, proper psychic predispositions of both pupils and a health educator as well.

It also seems plausible to make a skills classification proposed by Hanna Hamer dividing skills into **specialist, didactic** and **psychological** ones, and to consider them separately due to different ways of their manifestation in contact with a pupil and different ways of their development (Hamer, 1994, pp. 25–125).

Specialist skills are knowledge and abilities in the scope of a subject being taught which need to be constantly developed, improved through constant learning, reading specialist books and magazines and, as far as possible, participating in

varied seminars and conferences. Besides that, it seems that the everyday, constant exchange of experiences between teachers of the same subject and accepting that it is possible not to know something are very important.

Another kind of skills indispensable for difficult work in teaching are **didactic skills**, for which exceptionally important seems: development of an ability to logically construct lessons; proper planning of lessons with an introduction, main part and summary; specifying goals; operationalisation of the teacher's goals (clear statement of what exactly pupils are to do to obtain the goals, and determination in what way it can be checked); taking into account the learning cycle, starting with a concrete experience, through observation and reflection, finishing with generalisations and active experimentation and planning following cycles, techniques of encouraging pupils to be active; an ability to place pupils in the classroom in a way supporting the teacher's goals and facilitating learning through joining or separating the desks; use of audiovisual aids; preparation of handouts which make tedious noting down of every teacher's word obsolete; adjustment of teaching method to the topic, goal and style of learning preferred by a given group of youth for every particular time, an ability to refer to the way of youth's learning, i.e. changing the pace of talking, voice modulation, allowing students to ask questions, giving them an opportunity to fantasize, repeat, draw, moving from concrete to abstract ideas and vice versa; an ability to carry out lessons in an attractive way. It must be stressed that didactic qualifications based solely or mostly on knowledge are not skills.

In the particular phases of learning the teacher has certain tasks to be fulfilled: In the starting phase – the teacher has to be together with students, see and hear them, concentrate the attention on them and establish contact. In the recognition phase – the teacher should accept students' various emotions, show the reasons for excessive fear or anxiety, comfort them, not judge them – it is easier then to follow to the next phase. In the understanding phase – the teacher's task is to help students in setting their goals and prepare them for an activity. In the activity phase – the teacher's task is to initiate a concrete activity divided into stages.

The basis for an effective didactic field of activity of every teacher are **psychological skills** understood by the author as abilities to inspire, motivate students to learn, integrate them as well as managerial skills.

In the teacher's psychological skills the following elements can be included: a positive attitude towards people; an ability to avoid the most frequent reasons for miscommunication between people, an ability to communicate in general, and with students in particular; an ability to motivate students to learn; ability to set an efficient team out of a random group of students; flexibility in adapting one's own managerial style to the level of students' maturity and an ability to control stress.

A health teacher, organizer and popularizer of the health knowledge should, therefore, develop the following features (Wentlandtowa, 1980, pp. 37–38):

- continuous aspiration to shape their own character through self-observation, self-assessment and self-control,
- moral qualities, uprightness, reliability, conscientiousness, responsibility, conscience sensitivity, strength of will, persistence,
- communication skills, kindness, friendliness, patience, leniency,
- respect for people and their personalities, tolerance,
- objectivism, restraint, calmness, coolness, tact,
- intellectual vigour, life optimism, sense of humour,
- social sensitivity, unselfishness, engagement,
- personal culture, honesty, naturalness,
- educational abilities, ability to organise educational environment.

Besides the basic moral-intellectual features a health teacher as an inspirer and organiser should also develop (Wentlandtowa, 1980, p. 38):

- ability to set the goals and tasks based on recognition of the needs of the environment for which they work, planning skills;
- decision making and organisational sense;
- ability to act based on rules of praxeology; organising proper interpersonal relationships and team work;
- ability to inspire and organise health-educational activity.

Besides that, as B. Woynarowska states, a teacher of health education should (Woynarowska, 2000, p. 439):

- be a guide (leader, animator) of learning but also learn from them (have courage to say, “I do not know, let us check together”);
- watch over work dynamics of a group – organise its work, establish goals, questions, motivate for work, control the time, etc.;
- be able to use all means and abilities in group-work and not assume the role of “an expert” (limit judgements, commentaries, imposing one’s own opinions);
- have an ability to communicate with people, to establish the atmosphere of trust and safety;
- be able to keep the balance between established curriculum and participants’ needs, and also between the needs of a group and its particular members’ needs.

Thus, the teacher’s role resolves itself in this process to a role of a tutor, minder, advisor and guide for a child and supporting a student in their versatile development. A head-teacher and class tutors are responsible for the implementation and realisation of health education in a school. Unfortunately, a contemporary teacher due to being overloaded with other responsibilities and low remuneration has

lesser and lesser possibilities of being a health creator in a kindergarten, a school or an environment. However, a teacher, for example in a school can realize goals and contents of health education through rational physical education, airing the rooms, developing hygienic habits, paying attention to children's nutrition, and also introducing cooperation in a group (Lewicki, 2005, pp. 135–136).

Bibliography:

- Hamer, H. (1994). *Klucz do efektywności nauczania. Poradnik dla nauczycieli*. Warszawa: Veda.
- Frątczak, E., Frątczak, J. (1996). *Edukacja zdrowotna dzieci przedszkolnych*. Toruń: Turpress.
- Kopaliński, W. (1980). *Słownik wyrazów obcych i zwrotów obcojęzycznych*. Warszawa: Wiedza Powszechna.
- Krawański, A. (2004). Interakcje socjologii i pedagogiki zdrowia. In: W. Piątkowski (Ed.). *Zdrowie choroba społeczeństwo. Studia z socjologii medycyny*. Lublin: Wyd. Uniwersytetu Marii Curie-Skłodowskiej.
- Kulik, T.B. (1997). *Edukacja zdrowotna w rodzinie i w szkole*. Stalowa Wola: Oficyna Wydawnicza Fundacji Uniwersyteckiej.
- Lewicki, Cz. (2005). *Czynniki determinujące przebieg, jakość i efekty wychowania zdrowotnego dzieci 6-11-letnich w rodzinie*. Rzeszów: Wyd. Uniwersytetu Rzeszowskiego.
- Lewicki, Cz. (2006). *Edukacja zdrowotna – systemowa analiza zagadnień*. Rzeszów: Wyd. Uniwersytetu Rzeszowskiego.
- Muszyński, H. (1980). *Zarys teorii wychowania*. Warszawa: PWN.
- Śliwa, M.M. (2001). *Wychowanie zdrowotne, zarys teorii i metodyki*. Katowice: Polskie Towarzystwo Oświaty Zdrowotnej.
- Szewczyk, T. (2006). Pedagogika zdrowia. In: B. Śliwerski (Ed.). *Pedagogika subdyscypliny wiedzy pedagogicznej*. Vol. 3. Gdańsk: Gdańskie Wydawnictwo Pedagogiczne.
- Wentlandtowa, H. (1980). Systemy kształcenia i doskonalenia pracowników oświaty zdrowotnej. In: H. Wentlandtowa (Ed.). *Oświata zdrowotna. Teoria. Metodyka*. Warszawa: PZWL.
- Woynarowska, B. (2000). Program edukacji zdrowotnej w szkole. In: W. Wrona-Wolny, B. Makowska (Ed.). *Wypisy z wychowania zdrowotnego*. Part. I. Kraków: AWF im. B. Czecha w Krakowie.
- Woynarowska, B. (2000). Edukacja zdrowotna w szkole. In: B. Woynarowska (Ed.). *Zdrowie i szkoła*. Warszawa: PZWL.

Woynarowska, B. Sokołowska, M. (2001). *Ścieżka edukacyjna – edukacja prozdrowotna i promocja zdrowia w szkole*. Warszawa: KOWEZ.

Żukowska, Z. (1999). Nauczyciel kreatorem zdrowia w reformującej się szkole. *Wychowanie Fizyczne i Zdrowotne*, 5.