HEALTH AS A VALUE AMONG PUPILS

Beata Fedyn, Martina Cichá

Summary

The paper deals with the concept of health education that is an integral part of future teachers' professional training. It presents results of a questionnaire survey of 429 elementary school pupils from Raciborz, Poland, who were 10, 13 and 15 years of age. The research focused on children's attitude towards the issue of protection and maintenance of health. It proved that the attitude of elementary school pupils towards their own health changed very little over the years and that they did not attach any particular value to protection and maintenance of their health. It appears that health education provided at elementary schools does not yield desired effects.

Key words

Pupils, teachers, school, health, value, health education

INTRODUCTION

A human is able to realize his or her goals and aspirations if subjective and objective conditions conducive to it exist. One can classify one's health as one of the subjective conditions. Within the approach mentioned, as an important aspect of it, health is perceived as a value. One should also put emphasis on the fact that, forming pupils' personality by didactic and educational means, a teacher also influences an "axiom-normative system" in a pupil, can teach a pupil to perceive health as a value of utmost importance. A necessary condition to it is to acquaint pupils with the definition of health as it appears in current health philosophy approaches. They describe health as:

- a value enabling individuals and groups to realize their goals, aspirations, to satisfy their needs, as well as to change and cope with the environment;
- any society's wealth resource which guarantees its social and economical development as only a healthy society can create material and cultural goods, develop and achieve a satisfying life quality;
- a means of everyday life but not its goal. Thanks to health every human can assure himself or herself a satisfying and happy living (Woynarowska, 1989).

Research assumptions

Having taken into consideration the idea mentioned above, we conducted a questionnaire-based study examining pupils' (aged 10, 13 and 15) opinions on health and its ranking as a value in an "axiom-normative system". Research results might serve as an indicator of achieving educational goals in the field of health education. Research population consisted of 429 elementary school pupils from Raciborz, Poland. There were 145 10-year-old, 134 13-year-old, and 150 15-year-old children.

RESULTS

Research results allow to state that an unquestionable majority of pupils perceives health as the most important value and that this conviction became part of pupils' awareness. The value of health among other values, such as a respect among friends, good school results, good relations with parents or a positive teachers' opinion, is ranked first by 82,08% of children in the age group of 13, and by 80% of children in the age group of 15. The rest of these classes of children also think highly of health and put it to the second place (7,47% of the sixth class pupils, and 8% in the age group of 15), or the third place (10,47% in the age group of 13, and 4% in the age group of 15), respectively. A good relationship to parents and schoolmates and good school results are those values which, most frequently, are perceived as more important than health. Placing health in line with other values important among children is characteristic both for boys and girls. Place of residence also does not, in a significant manner, influence the degree of perceived importance of health (Table 1, 2, 3).

Other authors also report this phenomenon consisting of an increase in perceived health value importance within the life goals hierarchy in children and youth. They value love, health, family and life the most (Kojs, Mrózek, Studenski et al., 1999).

High importance of health perceived as a part of pupils' own evaluation is a crucial goal of the health education process in schools. We care not only about its theoretical, but also its practical character. The main goal of this education is to make pupils conform to health recommendations, to teach them, in achieving other goals, to make the best of the physical, psychological, and social potential of health, to treat health as a resource and wealth of a man. That is why health topics should always be an object of concern, leading to health's protection, enhancement, its growth and development (Heszen-Niejodek, Ratajczak et al., 1997). However, many other results of our research, with respect

Table 1Opinions of ten year old students referring to health and its role in human life according to gender and place of residence

Underline statement you	Town	Town	Country	Country	M	M	W	W
agree with		%		%		%		%
Health is the most impor-	53	85,48	72	86,74	58	87,87	67	84,81
tant in human life								
Human should care about	35	56,46	69	83,13	52	78,78	52	65,82
health from childhood								
Only old and sick people	6	9,67	4	4,81	4	6,06	6	4,59
should care about health								
Healthy man can achieve	25	40,32	45	54,21	37	56,06	33	41,72
a lot in life								
Health is not worth of care	3	4,83	2	2,40	3	4,54	2	2,53

Source: Self-calculation on the grounds of analysis of respondents' results

Table 2Opinions of thirteen year old students referring to health and its role in human life according to gender and place of residence

Underline statement	Town	Town	Country	Country	M	M	W	W
you agree with		%		%		%		%
Health is the most im-	52	81,25	58	82,85	47	81,03	63	82,89
portant in human life								
Human should care	46	71,87	59	84,28	43	74,13	59	77,63
about health from								
childhood								
Only old and sick peo-	5	7,81	3	4,28	4	6,89	4	5,26
ple should care about								
health								
Healthy man can	39	60,93	38	54,28	36	62,05	41	53,94
achieve a lot in life								
Health is not worth	4	6,25	5	7,14	5	8,62	4	5,26
of care								

Source: Self-calculation on the grounds of analysis of respondents' results

Table 3Opinions of fifteen year old students referring to health and its role in human life according to gender and place of residence

Underline statement you	Town	Town	Country	Country	M	M	W	W
agree with		%		%		%		%
Health is the most impor-	60	83,33	64	82,05	47	81,03	77	83,69
tant in human life								
Human should care about	55	76,38	62	79,48	46	79,31	71	77,17
health from childhood								
Only old and sick people	4	5,55	6	7,69	4	6,89	6	6,52
should care about health								
Healthy man can achieve	47	67,27	41	52,56	35	60,34	53	57,60
a lot in life								
Health is not worth of	4	5,55	1	1,28	3	5,17	2	2,17
care								

Source: Self-calculation on the grounds of analysis of respondents' results

to health behaviour, indicate that most pupils did not quite endorse the health value: they treat health only as a declared, externally accepted, yet not fully interiorized value.

Health is commonly thought of as a crucial life condition that should be respected. In practice though, respondents do not adhere to their theoretical knowledge. The situation results from many factors, one of them being a behavioural pattern influence by their parents, teachers and schoolmates. Emphasis should be also put on the causes of the dissonance between the theoretically high position of health among other values and real health-related behaviour, namely the fact that frequently, other goals gain more importance in people's lives. Thus, health is not always the most important one: sometimes adventures, games with schoolmates or even difficult economical situation at home become more important.

We assume that at a elementary school, when a child enters an institutionalized way of education, its personality begins to get shaped in an intensive manner at the same time. It is a very important period of forming attitudes and values. Although a child leaving elementary school is not a mature human yet in terms of physical, psychological and social maturity, a defined opinion on surrounding world, phenomena as well as certain attitudes towards the world have already been formed in him (or her). The older children are, the more mature the way they assess different ideas, objects and qualities. That regularity should suggest us a direction in our work so as to focus on forming different personality traits. Presence of a period in life forming an "axiomatic-logical system" and emphasizing the health issue within our educational efforts give us the opportunity of bringing up people possessing rational attitudes towards life, health and diseases (Szecówka, 1994). That is why we were interested in pupils' opinion on health and its role in human life. Favourable changes in attitudes towards health, resulting, among others, from educational influence, have been noticed.

According to an analysis of pupils' answers, health is esteemed highly in all age groups. There is also a group of people who do not completely realize the importance of health in human life, because only a half of respondents agreed with the statement implying that healthy people can achieve a lot in their lives. The rest is not convinced as to the relationship between health and a high life quality. As a matter of fact, percentage of such people does not change in principle during the whole of the elementary school education period (Table 4).

 Table 4

 Students' opinions referring to health value and its role in human life

	10 year old		13 year old		15 y	ear old
Opinions that student agree with		%		%		%
Health is the most	125	86,21	109	81,43	124	82,67
important in human life						
Human should care about health	104	71,72	101	75,37	117	78,00
from childhood						
Only old and sick people should	10	6,90	11	8,21	10	6,67
care about health						
Healthy man can achieve a lot	70	48,28	77	57,46	88	58,67
in life						
Health is not worth of care	5	3,45	10	7,46	5	3,33

Source: Self-calculation on the grounds of analysis of respondents' results

Each pupil should be aware of the fact that health is not a static entity but rather a dynamic one, changing over time. That is why human should promote, protect, save and help to cure it through all life stages. Based upon the research, beliefs of one fourth of respondents, who think that there is no need to care about health in childhood, do not offer much optimism. Some people (6,67–8,21%) even think that only old and sick people should care about it.

CONCLUSIONS

Based upon pupils' answers, as quoted above, the research population can be divided into four groups:

- The first group is composed of about a half of respondents who attach high
 importance to health, being well aware that good health enables achieving
 life goals and stating people should care about it all their lives.
- The second group consists of respondents who perceive health as the most important quality, agree with the statement implying people should care about it all their lives, though are not aware of the benefits resulting from a good state of it. This group constitutes about one fourth of respondents.
- The third group, constituting about 20% of respondents, thinks that health is an important quality, but does not think people should care about it in childhood and does not perceive it as a means and a condition for everyday life.
- the fourth group consists of a minority of children who do not attach any value to health. They think it is not subject to a particular care.

It seems that in about half of the population sampled the "axiomatic-logical aspects" of health philosophy have not been completely formed and that health as a value, and a crucial personality element, has not been fully accepted and perceived.

Yet another, very important feature of the research presented, is worth noting. Namely, if health education is a process, then we assume some progress would take place. That progress should gradually show up as an evolvement of pupil's personality, changes in his or her needs, attitudes, value system, as well as convictions regarding health. It seems however that, as regards health, opinions and statements by respondents have not been changing significantly over different education stages. Thus, we can conclude that in the field of health education satisfying results have not been, as yet, achieved.

BIBLIOGRAPHY

- CZAPLICKI, Z., MUZYKA, W. et al. Nauki o wychowaniu a promocia zdrowia. Olsztvn: WSP, 1997.
- GOLDMANN, R., CICHÁ, M. Základy pediatrie pro pedagogy. Učební text. 2. rozšířené vyd. Olomouc: Univerzita Palackého, Pedagogická fakulta, 2006.
- GNIAZDOWSKA, I. Postawy maturzystów wobec zdrowia jako wartości. Zeszyty Naukowe Uniwersytetu Opolskiego, Pedagogika 32, Opole: 1995.
- HAVLÍNOVÁ. M et al. Program podporv zdraví ve škole. Praha: Portál. 1998.
- HAVLÍNOVÁ, M et al. Kurikulum podpory zdraví v mateřské škole. Praha: Portál, 2000.
- HESZEN-NIEJODEK, I., RATAJCZAK, Z. et al. Promocja zdrowia. Psychologiczne podstawy wdrożeń. Katowice: Wyd. Uniwersytetu Ślaskiego, 1997.
- KOJS, W., MRÓZEK, R., STUDENSKI, R. et al. Młodzież w sytuacji zmian gospodarczych, edukacyjnych, społecznych i kulturowych. Cieszyn: Wyd. Uniwersytetu Śląskiego, Filia w Cieszynie, 1999.
- MARÁDOVÁ, E. Výchova ke zdraví školní vzdělávací program: metodická příručka pro 6.-9. ročník základní školy. Praha: Fortuna, 2006.
- SZECÓWKA, A. et al. Dzieci i młodzież Raciborza. Analiza biomedyczna i pedagogiczno - społeczna. Wrocław: Wyd. Alta, 1994.
- WOYNAROWSKA, B. Filozofia zdrowia końca XX wieku a szkoła. "Wychowanie Fizyczne i Zdrowotne" nr 1, 1989.

Dr. Beata Fedyn Państwowa Wyższa Szkoła Zawodowa ul. Słowackiego 55 47 - 400 Racibórz Poland

Telephone: + 48 32 415 50 20

E-mail: beata.fedyn@pwsz.raciborz.edu.pl

Mgr. Martina Cichá, Ph.D. Katedra antropologie a zdravovědy Pedagogická fakulta UP v Olomouci Žižkovo nám. 5 771 40 Olomouc Telefon: + 420 58 563 55 06

E-mail: martina.cicha@post.cz