

# M I S C E L L A N E O U S

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## HEALTH EDUCATION

### Precept and Teaching

*The importance attached to health education today is well known. In every country it is linked to civil defence and the problems involved are investigated by Government institutions set up for the protection of public health. It is a subject which also interests National Societies, as was observed during the XXth International Conference of the Red Cross.*

*Health education, moreover, constitutes the first phase of a five year plan in the League's Development Programme. It is already an important part of Junior Red Cross activities in many National Societies.*

*For that reason we consider the following study worthy of reproduction. It is taken from the French Red Cross Review Vie et Bonté (Paris, April 1959). Its author, Dr. Pierre Delore, who died six years ago, was a professor at the Lyons Faculty of Medicine. We are publishing his study with a sense of gratitude for a man whose humanitarian values were unfailing.*

#### I. Definition

Health education may be defined as the whole body of concepts and processes by which man learns how to keep fit. Man's health therefore is the aim of health education.

What is health ? The academic definition given in the dictionary, " absence of illness ", is narrow and negative. Health implies positive values : harmony of functions, development which is orderly and balanced : balanced with environment, a balance of impulses and reactions.

Health is a capacity to adapt, compensate and resist. The man in good health is capable of exerting effort, of withstanding certain trials or physical and psychical stress.

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That is not all. Our concept of health extends not only to the body but to the mind. The reciprocity of physical and moral influences is undeniable. No man is truly physically sound without being also mentally healthy. Hygiene of the body is inseparable from that of the mind, and mental health, like physical, is a matter of balance and a whole set of attributes. Moral health may be looked upon as a capacity to resist and even to overcome evil.

Health thus defined is first and foremost a matter of hygiene, for if we admit that health is dependent on two primary factors : heredity and healthy living conditions, we must also admit that hygiene is the basis of these factors : hygiene of parents and of the person concerned.

It is a widely accepted misconception that illness is a matter of chance and fate. It is most often the result of ignorance or negligence of the rules of healthy living. Predisposition to illness resides especially in neglect of hygiene such as : insalubrious housing, improper food, alcoholism, overwork, excesses of all kinds, work in unhealthy conditions, bad mental hygiene and immorality.

## II. Reasons for health education

Now hygiene itself is a matter of education. Indeed the implementation of the rules of healthy living requires knowledge and will and therein lies the justification for health education. Health cannot be abandoned to inexperience any more than to bad habits, whim or passion. It requires daily attention and discipline, both personal and collective. Healthy living postulates wise living. Some of the factors on which health depends are educational by their nature : cleanliness and orderliness, purity and moral simplicity, sober habits and, last but not least, will-power. Conversely, at the origin of health troubles (illness or accident) there is, more often than is thought, a human element of an intellectual or moral order : ignorance, improvidence, imprudence, negligence, immorality, intemperance or lack of will-power. There are illnesses which are due to deficiency of knowledge and of will.

One of the most educational aspects of our task therefore consists of showing the part played by the human element in illness,

in the causation of sickness or accident, rather than those factors too readily blamed which we call misfortune or fate.

Let us not confuse training and education. The teaching of hygiene must be completed by education in the widest sense of the word. Similarly, all sanitary legislation should be accompanied by appropriate education. Teaching and enforcement : these two means of action evoke a third : education. This implies the integration into every-day life of the precept of hygiene. This cannot be restricted to the distribution of notices, rules of hygiene, forms, technical indications, nor even a catalogue of do's and don't's. The simple curt injunction " do not spit " is not health education ; it is a police order. Education explains and motivates ; it prepares opinion for decrees and laws.

Certainly it is true that in matters affecting public hygiene, authority must often be imposed ; and yet tomorrow's citizen will have greater respect for sanitary regulations because he will have understood the reasons for them early in life.

By contrast, individual hygiene is not in practice subject to authority and regulations ; this applies in particular to cleanliness and temperance. It is therefore necessary by appealing to reason to bring home to one and all the underlying why and wherefore of hygiene. Without this, administrative regulations and medical prescriptions are inadequate.

There are yet other reasons for health education. We give special recognition to three of these :

### *1. Factual or psychological reasons*

Can it be denied that apprenticeship to healthy living has still to be undertaken almost entirely from the beginning ? Ignorance in matters of health is still wide-spread. It is found among all social strata. The practices of town and country doctors, drawn from the masses of the population, as well as experience in hospitals, speak volumes. They typify the ignorance and negligence of personal hygiene in most sections of the public. This is not a reference to even the elementary notions of anatomy and physiology : the human organism is a factor which is unknown or misunderstood by most people ; yet so many today are familiar with the internal combustion engine.

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Even worse than ignorance are false ideas and prejudice. How numerous these are in questions of feeding, consumption of alcohol, and sun bathing ! How many wrong opinions there are also on the ways in which we fall ill, and the real beginning of illnesses !

Health education has not yet been given the place which is its due. Youths reach maturity insufficiently prepared for the various problems of life, particularly those which affect their own health and that of their future children.

### *2. Timeliness*

This reason is particularly valid today. Can the ever-growing lack of good sense and moderation prevalent nowadays be denied ? Whilst death is postponed by progress in certain aspects of hygiene and preventive medicine, particularly as they affect communicable diseases, today's way of life aggravates all kinds of imbalance which weigh, if not on life, at least on the health and well-being of us all.

Man's health is thus constantly threatened by conditions of modern life which often run counter to nature or are artificial, as well as by the excesses and vices made more accessible by so-called progress.

### *3. Economic reasons*

Nothing is more costly than illness. Financial outlay on hygiene is productive ; hygiene pays and pays well. Money and time devoted to health education are a deferred but certain economy, avoiding expenses which would be made necessary later by sick people, disabled and perhaps criminals. Health education is a sound investment both for the community and for the individual.

## III. Health education principles

### *1. Realism*

Health education is eminently realistic and practical. It draws its essence from life and humanity. It finds guidance in the laws of healthy living, in the needs of man and the risks to which he is exposed. It cannot be confined to book-learning. It is not the preaching of morals. It is not subservient to ideology or to dogma such as racial distinction.

To see things as they are, to speak the truth even though it may displease or conflict with self-interest or prejudice, to discard the shackles of routine, convention, false modesty and demagoguery, whenever required by the public good ; these are some of the properties of healthy education.

### *2. Health and normality first*

We have expounded elsewhere the theme that medicine and hygiene were first developed in the framework of pathology and abnormality. This was due to the fact that the teaching of health-orientated biology did not have the place in the forefront it deserved in the curricula of medical faculties. Even text books on hygiene dealt with microbes and toxins before considering health which, if dealt with at all, was relegated to a few pages at the back.

Consider the normal man. Show how health can be safeguarded before telling how illness can be cured.

The teacher of health education must retain his optimism. He should inculcate confidence in the value of resistance conferred by hygiene, rather than fear of the inevitability of sickness and a terror of microbes.

In general, health education concentrates more on health than on illness ; it confers a mental propensity to health more than an outlook centred on illness. For a fear of microbes, draughts or cold, it should substitute confidence in a healthy body, a resistant constitution.

We cannot over-emphasize the importance of this attitude and of framing health programmes related to sound health and physiology, for it is in this way that such programmes will be the most educative.

### *3. Environment and public health needs*

Our health educational programme will be based on a study of environment and the needs it engenders. Consequently accurate data is required, particularly vital statistics. It is obvious that in a region where tuberculosis is a serious problem, our work will be orientated as a consequence. The same applies if such problems as typhoid, syphilis or alcoholism, etc., are prevalent.

This implies of course that health education must closely, intel-

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ligerly and opportunely give support to such general and local health schemes as may be devised by the public health authorities in the light of local conditions.

Our educational programme should be constantly flexible so that, if necessary, it can be adapted to sanitary conditions. In this way any unforeseen disaster such as an epidemic can be parried by an immediate and appropriate educative campaign.

### *4. Accessibility to all*

Health education is a matter of concern to the public at large, in other words it must be put over in a simple and direct manner in such a way that it strikes the imagination and retains attention, leaving aside technical terms which are the province of the doctor and any debatable points.

### *5. Adaptation of means to conditions of psychological and instructional level*

This implies for instance that some subjects may not be presented to children, teachers, workers and agricultural labourers in the same way. Social conditions, circumstances and even the season must be taken into consideration : for example it would be bad timing to organize educational films in the country-side during the harvest or grape gathering : the bad weather season would be more appropriate. If it is desired to arrange for a lecture with film projection in a factory, at least part of the last working hour of the day should be chosen to do so, if workers are asked to stay an hour late at the end of the day, you may be sure that most of them will not do so.

### *6. Tact*

There are some things which should not be said, or rather should be said only at the proper time and in the proper place. Sex education for instance is not sex initiation ! Talks on venereal diseases require tact : there is the story of an elderly country doctor who, when called upon to lecture on this subject to young country girls, described the dangers of venereal diseases in such a manner that most of his listeners were so upset that they ran home to their mothers for reassurance. Abortion is also a subject to be broached

with prudence : the risks must be explained but not the process. Recently in the north of France, a newspaper report on a medical comment on 17 cases of corrosive oesophagitis was followed by the admission to the Lille hospital of two persons having attempted suicide by swallowing caustic products.

These few examples show with tact and common sense health education must be conducted in order to achieve its aim.

### *7. First educate the educators*

It has always been our considered opinion that in health education the teacher should be the doctor's main assistant. If it is up to us in the first place to prepare the young to lead a healthy life, then it is to the schools that we must first address ourselves. It can never be too frequently stated how necessary and fertile is such a partnership of doctor and teacher in this task of ours. After having been briefed, teachers will in turn transmit to their pupils in appropriate language the ideas which they have been given. It need hardly be emphasized that health education in school is no mere book-learning, it should be as practical and realistic as possible, as already mentioned.

The mother being the child's first educator in hygiene, it is important to make special efforts in women's circles. Instruction in child welfare and domestic science is of primary importance in this connection.

### *8. Integral character*

Health education is intended particularly to reach youth. Considered from this point of view it should not be isolated from education as a whole. It is inseparable from intellectual, moral and character training. It is correlated to natural science, physical training, leisure and morals. It addresses itself to man in all his aspects as a psycho-physiological being. For health education, man is an individual living not in isolation but in close association with various physical and social environments.

### *9. Co-ordination*

Health education demands close co-ordination of sanitary, educational and social activities at all levels. In particular it implies

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confident co-operation between health education centres and regional Public Health Departments, between health education centres and the State education system, as well as harmonious relations with the social security services.

### 10. Humanitarianism

Tangible humanitarianism lies at the basis of health education, which endeavours to prepare man for healthy living, to produce and maintain human beings in good health and balance.

It thereby gives factual expression to the concept of health security and social justice. Social justice, from the angle of health education, involves measurable positive values, e.g. so many cubic feet of fresh air ; so many gallons of fresh water in every home, no matter how humble ; the pursuit of healthy leisure activities ; a diet of so many calories for all, irrespective of class.

Health education postulates rights and duties, it should complete the 1789 Declaration of the Rights of Man.

Health education is for all, not only for a privileged class. I stated this in the first issue of the *Declaration des droits sanitaires de l'homme* in 1937<sup>1</sup>:

“ The preservation of health and the prevention of disease being first and foremost matters of knowledge and education, every citizen is entitled to protection against ignorance, to instruction in the laws and needs of health, and to elementary health education.

Teenagers have a special right to health education.

Young men are entitled to sex, health and moral education. Future parents have a right to biological and moral education for sound and planned procreation.

Young women, the mothers of the future, are entitled to instruction in child welfare and domestic science.

The least educated and the poorest of citizens have a particular right to expect from the State wide and active teaching courses on these subjects.”

In addition, it is evident that health education must have regard for human dignity and freedom. Education is better than enforcement. Our aim is to win the public over to the cause of health.

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<sup>1</sup> P. Delore and F. Perroux, *Projet pour une déclaration des droits et des devoirs sanitaires de l'homme*. Paris, Musée social, 1937.



Education is concerned with man in all his aspects. Without integrating health as a subject in school curricula, full education cannot be achieved ; nor that humanitarianism expressed already before 1789 by Lakanal and others but which has remained a dead letter.

The scope of health education is worldwide, for it is required to broach all problems affecting human life from the cradle to the grave. What is more, eugenics is a branch of health education concerned with man even before birth, through his progenitors.

#### **IV. Health education value and field of application**

##### *Results*

Health education does not show immediate or spectacular results. The road it has to travel is long and strewn with obstacles such as ignorance, scepticism, indifference, routine, prejudice, wrong ideas and self-interest. Health education is a long-term undertaking ; it is slow to show results, but sure. The health educator works for posterity.

Ideas sown in fertile soil sooner or later bear fruit, and the masses, who are so frequently offered unsound ideas, are not impervious to wholesome ideas when they are understandable and represent progress and disinterested service to humanity.

The financial gains are no less sure. As stated earlier, expenditure on hygiene is productive ; it is a sound investment.

##### *Healthy and peaceful outlook*

Any nation with thought for its own future—in other words for its youth—will have to give more and more attention to health education, as to all aspects of hygiene and physical well-being.

Health education development is linked to general policy in public health, of which it is a sector.

But it has not only a national, but also an international, aspect. Not being a matter of controversial politics, it can be a contributory factor in bringing people together. In every country there is an enormous task facing educators.

In addition, health education is part and parcel of education for peace, in that it is orientated to harmony, order, reason, justice,

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balance and happiness. The interrelation between a healthy disposition and a peaceful one is not fully appreciated. There are analogies to be drawn between health and peace, just as there are between sickness and war. Health education of the masses can contribute to their peaceful disposition.

### *Civilizing Influence*

But health education has an even greater range of possibilities in that development of civilization we call "progress" and in modern living conditions. Do these conditions, it might well be asked, satisfy the rules of healthy living? Do they not present a serious danger to human health: fatigue, imbalance, absorption of poisons of all kinds? For we have no illusions about the present and it is our duty to ask ourselves these questions affecting the health of generations to come. Now the reply is ineluctable: the pace of modern life is contrary to nature. So-called civilization loses sight of more and more of nature's laws of health, which first and foremost postulate balance and moderation. Man cannot with impunity transgress the laws of biology. This he must learn and never be allowed to forget.

Herein lie the value, influence and scope of the health educators in modern life. They must therefore not consider themselves mere agents of dissemination and purveyors of propaganda. Let them be aware of their social mission. Let their work and themselves be raised to a high ethical level.

Then, if all health educators in all countries unite their views and efforts, they will be capable of guiding to some extent the progress of civilization.

Health education is an art and a science, and is in continuous evolution.