

# The Necessity for Inclusion of Adolescent Health Education in B. Ed. Curriculum

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## Abstract

Having good health is the prerequisite for students for their satisfactory academic achievement, and it is more so during the early age of the children i.e., when they pursue their elementary education. This is the time when the foundation of their life is laid. Whereas we find that globally more than about 80% of our adolescent (children between the age of 10 and 19 years) are unhealthy today. Due to lack of promotion of good health in their adolescent they underperform in academics and many of them develop chronic health problems and many even lose their lives. In a recent survey in one of the public schools in Karnataka it was found that the children had educational problems about their concentration in study (61.12%); poor memory (13.51%); stress while attending classes and writing examination (6.65%) and poor performance in academics (1.70%). The types of psychological problems they had were anxiety (9.98%), depression (5.41%) and excessive concern about physical appearance (2.91%). The health problems that came into surface were headache (8.31%), eye problems like low vision, watering and irritation (3.71%) etc. The skin and hair related problems were acne, whitening of hair and hair fall (2.91%). The types of sleeping disorder found among the students were - feeling very sleepy, having less sleep and disturbed sleep (1.66%). The study detected fear and concern about future and surrounding world (2.70%) among the students too. Several other studies have also revealed similar health state of adolescent of India. In our academic system the teachers play a pivotal role and the teacher of elementary education are prepared for the professional work through the university designed B. Ed. (Bachelor of Education) curriculum. It would be a positive step forward if the adolescent health programme is included in the B. Ed. Curriculum and school educational professionals are prepared to look after the health of the adolescent in India.

**Keywords:** Adolescent Health, B. Ed. Curriculum, Elementary Education, Rashtriya Kishor Swasthya Karyakram, WHO

## Introduction

The schools hold the children for the longest period for their formal elementary education than the other academic institutions. The school education commences at the age of about 3 years and goes on up to 16 or 17 years of age. The formative and impressionable age of the children therefore pass in schools. In other words the early, middle and some parts of the late adolescent of children are spent in schools. It is the fact that the foundation of child's life is

laid in his adolescent. It is, therefore, very essential that a children's health is promoted and life skills are provided to them at their adolescence under the care of the schools for their growth to the fullest potentials.

As per the World Health Organization (WHO), a child, who is groomed well as the adolescent, shall have the strong possibility of leading a healthy, happy and successful life. "Healthy children who become healthy adolescents are more likely to become healthy adults", records WHO.<sup>1</sup>

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The good health of students at the adolescent is the true indicator of the child's better future. While this is the state for an individual, it holds good for a nation. If the Government of a country takes measures for promotion of health of its adolescents that country would be able to get the benefit of fully grown human resources.

### **The Definition of Health by WHO**

The World Health Organization defines health to be "a state of complete physical, mental and social well being and not merely the absence of diseases or infirmity".<sup>2</sup> The WHO believes in a comprehensive overall growth of a child who is not only physically and mentally healthy; but also has full awareness about his and her geographical surroundings and the emotional and psychological state of the people around.

### **The Definition of Adolescence and Understanding of Its Importance**

The Adolescence is the period between 10 and 19 years of the children. It is the transitional stage of physical, psychological and social development from puberty to adulthood. Worldwide, more than 1.2 billion people are adolescents: this indicates that roughly one in every six persons is an adolescent.<sup>3</sup> About 21% of Indian population is comprised of adolescents (about 243 million).<sup>4</sup> Adolescents are considered to be the future of the nations who form the major demographic and economic force. It is noteworthy that the adolescents have some specific needs which vary from gender to gender, life circumstances and socioeconomic conditions.<sup>5</sup>

### **The Role of Teachers at Elementary Education Level**

In the elementary education system the teachers hold the most significant position. It is the teacher around whom the entire academic activities revolve. Teachers work as the model for the students to be emulated. A well trained teacher can mould the students whatever way the teacher wishes to. That is the reason an aspiring person who wishes to be a teacher is first trained and then assigned the task of a teacher so that the elementary education goes on in the right way. The Government of India lays a very high importance in preparing a teacher and it is done through B. Ed. course. "Teachers cause desirable and anticipated revolution in the society silently. In short, a teacher inspires and shapes the destiny of the nation in class rooms", says Vadivelu. He further states, "The nature of training that one undergoes in such a teacher training institution transforms him not only as a good teacher but also a good citizen, administrator, substitute for parent and social worker."<sup>6</sup> The teachers are prepared to take the complete care of the student as the friend, philosopher and guide to ensure all aspects of growth and wellbeing of students.

In case of Indian the Council for Teacher Education, which was established in 1995 as per the National Council for Teacher Education Act 1993, provides the broad guidelines as to what should be the role and responsibility of the teachers. It broadly prescribes the framework of teachers' training through B. Ed. Courses and according the universities of India frame the curriculum and train the teachers.

### **The General State of Adolescent Health in India**

We observe that the adolescent of our country are deprived of their proper health care. They are malnourished; and their psychological and social well beings are not being systematically managed. As a result we often hear the students of even school levels becoming subjected to depression. They underperform in academics due the effect of ill health, go in for drinking, smoking, bullying the peers, start taking harmful substances, venture into rash driving, develop various chronic diseases and many of them eventually commit suicide. The adolescent ill-health of India is nothing better than the global state as per which about 80% of adolescents globally are of ill-health today. The rate of depression among the adolescent in our country is to the tune of 3%.

On a survey carried out by Indian Association of Adolescence Health (IAAH), New Delhi in a public school in a semi-urban area of Karnataka near Bangalore on 24 November 2015, found that out of 481 students studied as large as 475 students had some problem or the other. The study was carried out on the students of the age group of 14 to 16 years studying in VII to X standard. During the study, various educational, health and society related problems were observed. The problems were classified by the Association in four categories namely:-

1. Educational Problems (found in 61.12% children).
2. Psychological Problems (found in 18.30% children).
3. Physical Health Problems (found in 16.63% children).
4. Fear about Future and Surrounding World (found in 2.7% children).

On further analysis of the problems within the categories, it was found that the children had educational problems about their concentration in study (61.12%); poor memory (13.51%); stress while attending classes and writing examination (6.65%) and poor performance in academics (1.70%). The types of psychological problems they had were anxiety (9.98%), depression (5.41%) and excessive concern about physical appearance (2.91%). The health problems that came into surface were headache (8.31%), eye problems like low vision, watering and irritation (3.71%) etc. The skin and hair related problems were acne, whitening of hair and hair fall (2.91%). The types of sleeping disorder found among the students were - feeling very sleepy, having less sleep and disturbed sleep (1.66%).

The study detected fear and concern about future and surrounding world (2.70%) among the students too.<sup>7</sup>

In course of examining ninety six thousand students in schools in the city of Bangalore in 2016, a team of doctors from an organization named 'Address Health', Bangalore have found 20% students overweight and 9% of them underweight. As to the diseases, 13% students were found to be having some chronic diseases or the other. While 30% were having oral health problems, about 14% children had vision related problems too.

Several others studies carried out by IAAH, New Delhi across the country over the years also received the similar results. It is established that the health problems exist in our society among the adolescents in some degree or the other.

### **Experts' View on Adolescent Health Promotion**

The experts are of the opinion that the adolescent period health disorders especially the depression is preventable, detectable and curable. It is further said that the mental health problems and the depression is not detectable through the pathological tests but have to be done through observation. It is convenient to make such observation by the school through teachers by training the teachers. However, if remedial measures are taken on time the catastrophes of students' drop in academic performance and children's suicide may be avoided. Agreeably, the first remedial measure in this regard is the launch of 'Adolescent Health Programme' in schools. Right from the beginning of the schooling of a child, a school should take interest in protecting children's health.

It is essential that the schools start the process immediately after the admission of a student and continues to support the students. The school should have the programme going on during the entire period of the schooling. And the teachers should be professionally prepared to undertake this task.

### **Prevailing Concept of Students' Health Care in India**

As per the prevailing concept of the students' health care in our country, the Health Department of the Government carry out 'Health Check' of the students of the school limited to the physical health. In this programme there is no arrangement of checking the state of mental and social health. Our country has not yet framed suitable policies to subject the students to systematic compulsory 'Mental Health Check'. As a result, we have been observing drop in performance of the students as they grow, depression and occurrences of suicide by a large number of students due to mental ill-health. And allowing the state of keeping the unhealthy adolescents is resulting in creating unhealthy youth. As a result, besides having various diseases among

the youth, we find increased number of crimes in the society committed by the youth. It has been found out that 80% diseases that the adults are suffering from are due to their problems that they had in their adolescence.

### **Emphasis on Children's Health Promotion by the UNESCO**

The United Nations' Educational Scientific and Cultural Organization (UNESCO), the specified agency of the United Nations' Organization, has emphasized that education and health have the fundamental role to play in development of a country. And good health and education are the fundamental rights of every child. As a result, all channels through which the UNESCO normally works including the WHO have been utilized by the UNESCO to promote health and quality of life of all people. It is evident that various programmes and projects that the organization undertakes, therefore, encompass health related matters such as:-

- Healthy school environments.
- Health education within the curriculum and
- Delivery of school health services.<sup>8</sup>

### **The WHO's Directives on Promotion of Adolescent Health**

The WHO's expert body namely, 'The Division of Health Promotion, Education and Communication' has been making efforts to strengthen the WHO's capacities to promote health through schools. With the joint efforts of 'The School Health Team', 'The Working Group' and other designated organizations, the WHO has launched its 'Global School Health Initiative' in 1995. The WHO has undertaken this move on the basis of its research in both developing and developed countries which demonstrated that 'The School Health Programmes' can simultaneously reduce common health problems, increase efficiency of the education system, advance public health education and promote social and economic development in each nation.<sup>9</sup> The WHO believes that "with more children than ever receiving a formal education, schools in an efficient way, can reach school-age youth and their families in an organised manner to ensure the individual growth essential for national development."<sup>10</sup>

With 'The Global Health Initiative: 1995', WHO seeks to mobilize and strengthen health promotion and educational activities at the local, national, regional and global levels. The initiative is designed to improve the health of students, school personnel, families and other members of the community through schools. Each school that adopts the programme is called as, 'A Health Promoting School' which could be characterised as the school constantly strengthening its capacity as a healthy setting for living, learning and working.<sup>11</sup>

### **Measures to be taken by a Health Promoting**

## School

The school that launches the school health programme is called a 'Health Promoting School'. The health promoting would need to do the following:

- Foster health learning for staff and students with all the measures at its disposal.
- Engage health and education officials, teachers and their representative organizations, students, parents and community leaders in efforts to promote health.
- Strive to provide a healthy environment, school health education and school health services along with school/community projects and outreach, health promotion programmes, opportunities for physical education and recreation, and programmes for counseling, social support and mental health promotion.
- Implement policies, practices and other measures that respect an individual's self-esteem, provide multiple opportunities for success, and acknowledge good efforts and intentions as well as personal achievements.
- Strive to improve the health of school personnel, families and community members as well as students and work with community leaders to help them understand the community contribution to health and education.<sup>12</sup>

## The Government of India's Policies on Adolescent Health

In the line of the norms of the WHO, the Government of India in its National Education Policy 2016 has emphasized on promotion of adolescent health by the schools. It is stated in the policy that "the implementation of the school health component, generally administered by the Health Department, will be supported by the education departments and schools. The schools will draw up a roster for check-ups and ensure that the schedule is followed". The Government of India has also launched its 'Rashtriya Kishor Swasthya Karyakram' on 07 January 2014 to tackle nutrition, reproductive health and substance abuse issues of the adolescent of the country. The programme envisions enabling all adolescents of India to realize their all potentials by making informed and responsible decisions related to their health and well-being and by accessing the services and support they need to do so.

## Concept of Adolescent Health Promotion Prescribed by the IAAH

It is pleasant to note that one of the Indian organizations named 'The Indian Association for Adolescent Health (IAAH)', has been working in India in this field since 1989. The organization lays down that a school should launch its school health programme. The steps the organization has prescribed is the conduct of 'General Well-being Check', 'Physical and Mental Health Check', 'Violence Tendency

Check' etc. of the students and conduct lecture sessions and workshop to develop among them the concept of healthy life style and healthy food habit. Besides, the students should be involved to carry out health state survey in the locality to create their awareness about the health status of the surrounding. The IAAH suggests promotion of staff health of the schools too.<sup>13</sup>

## The Challenges on the Adolescent Health Programme

It is easier said than done. The school health programme faces several challenges as there are several stake holders of a school such as students, parents, community, government and the management. The health programme needs the following:

**Determination of the Management.** First and foremost factor is that schools or the academic institution going to implement this program must have the will to implement the programme.

**Motivation of Students.** The students are the main stake holders in the 'School Health Programme'. The students have to be convinced that they need to abide by the norms of good health. They should be turned into a health conscious community.

**School Time Slot:** The 'School Health Programme' is a not a one time job. The programme requires to be pursued as a part of the curriculum to be followed throughout the year. Therefore, a lot of time across the year from students, teachers and staff have to be created curving out from academic hours of the school. For that a lot of planning and adjustments of the school programmes would be required.

**Interest of the Staff:** The administration of the 'School Health Programme' involves participation of the staff to a great extent. In fact they need to take certain amount of responsibility in this work. Only when the staff members take the task with interest the programme can go through well. The staff should be made the participants in the adolescent health promotion movement.

**Acceptability of the Parents:** The 'School Health Programme' needs acceptance of it by the parents especially when the students have to be subjected to taking their responses for surveys.

**Availability of Fund:** Some amount of fund is needed to execute the 'School Health Programme'. The school should be willing to spare its funds to carry out the programme.<sup>14</sup>

## Conclusion

It is necessary that the adolescent health education is made a part of the B. Ed. curriculum. It is expected that the inclusion of adolescent health education would orient



the future teachers to undertake the responsibility to implement of the school health programme and make the schools 'Health Promoting Schools'. That would make our future generation healthy and our society and the country strong and prosperous.

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