School health program appraisal and student behavior patterns of a selected group of eighth grade students in the Liberty County High School, McIntosh, Georgia, 1965-1966

Bessie H. Williams
Atlanta University

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SCHOOL HEALTH PROGRAM APPRAISAL AND STUDENT BEHAVIOR

PATTERNS OF A SELECTED GROUP OF EIGHTH GRADE

STUDENTS IN THE LIBERTY COUNTY HIGH

SCHOOL, MCINTOSH, GEORGIA,

1965-1966

A THESIS

SUBMITTED TO THE FACULTY OF THE SCHOOL OF EDUCATION,

ATLANTA UNIVERSITY IN PARTIAL FULFILLMENT OF

THE REQUIREMENTS FOR THE DEGREE OF

MASTER OF ARTS

BY

BESSIE H. WILLIAMS

SCHOOL OF EDUCATION

ATLANTA UNIVERSITY

ATLANTA, GEORGIA

MAY, 1966
DEDICATION

To

My Husband  Clarence Williams, Sr.
My Children  Clarence Williams, Jr.
              Jacqueline Williams
              Marshe Williams
My Mother    Bessie Herbert

For their inspiration, encouragement and understanding during the period of my study and during the writing of this research.

B.H.W.
ACKNOWLEDGEMENTS

In the planning and preparation of this study, the writer is especially indebted to Dr. Laurence E. Boyd for his guidance, patience and valuable suggestions throughout the writing of this research. Further, the writer wishes to express her appreciation to Dr. Linwood D. Graves, co-advisor, for his full assistance during this study.

Grateful acknowledgement is also made to the staff members and sixty eighth-grade students who served as subjects for this study, also, to the Georgia Department of Health for supplying the health forms used to collect data for this study.

B. H. W.
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CHAPTER I

INTRODUCTION

Rationale.--The twentieth century has been notable for its accomplishments in behalf of child health. At the turn of the century, the present program of health activities evolved gradually from the early days of public education when the school was concerned with little beyond purely factual instruction. For schools this meant a new approach based upon the fact that the whole child comes to school, that the school is an official health agency even as it seeks the intellectual development of the child, and, that, in fact of optimum intellectual development will be achieved only in the presence of optimum health status.¹

The purposes of the school health program are distinctly educational in nature and remain within preview of the school as an educational institution: (1) to inform, (2) to assist in fitting children to receive an education, (3) to give them experience with the best scientific health services, and (4) to secure for them a school environment favorable in every respect to their growth and development.

Health education as both process and program implies changes in individual development, attitudes and behavior. It seeks no ends

other than the improvement of individual and community health.

School health activities should be developed in response to recognized needs. Experiences that enable the individual to develop his abilities for such action toward improved individual and group health should grow out of the discovery and appraisal of health needs. These may be related to many elements in school life, such as student-teacher relations, class scheduling, ventilation, lighting, fire hazards, traffic safety, and many more that have a bearing upon the welfare of students. Consideration should also be given to student needs as they relate to medical, dental, nutritional and psychiatric activity.

For an individual to achieve and maintain a reasonable level of health, requires knowledge of himself - how his systems and organs work; what must be done to maintain them. He should have a knowledge of nutrition and physiological process. He should be aware of disease processes; those caused by malfunctioning organs. He should know his community's resources for health and how they can be used. He should also have an appreciation of his role as a citizen of the community and his responsibility to support community health resources.

In order to protect the gains made over the years, the school should accept the challenge to contribute generously to the preparation of children for life in a world that is complex and ever changing. School health education, particularly classroom instruction relative to the facts of health and healthful living, should be provided all children and youth, of a kind and quality that will enrich the
individual and the nation. These efforts will be demanding of the best possible teaching methods if sound health attitudes are to be developed and the facts of health science translated into desirable behavior patterns.

The conduct of the total program of health requires the talents of many health education personnel, teachers and administrators working together in a cooperative manner to achieve the ultimate goal of health and healthful environment.

The solution of the problem of health depends upon activities which are planned and administered in relation to a realistic appraisal of the needs of children and the nature of their problems. Full development for every child should be the goal, and the best school health programs now should be geared to the child as an individual and adopt their content and direction to up-to-date revelation about changing problems and conditions.

This whole issue is summed up by Baumgartner in a statement about the child. She asserted:

What we are after, both educators and doctors, is to help in rearing a new generation of human beings who are buoyantly healthy in body and spirit; whose creativeness and sense of social responsibility are given the possible opportunity for expression; who have an unshakeable conviction of their own worth and the worth of other people.

...This is the quality of people who, we are convinced, can build a truly democratic society. 1

---

The facts which appear in almost every news media indicate that the major health problems today are associated with mental illness, the degenerative diseases and accident prevention. The problem of mental illness is complex at best. The neuroses and psychoses increase at a rate which seems wholly inconsistent with the potential of our society for ameliorating the problem of adjustment.

These many problems and others suggest the need for a realistic approach to the health education of the schoolage group. The school must accept the challenge to contribute generously to the preparation of children for life in a world that is complex and ever changing, yet holds the promise of happiness which is the life purpose of all mankind. School health education, particularly classroom instruction relative to the facts of health and the ways of healthful living, must be provided all children and youth, of kind and quantity that will enrich the individual and the nation. These efforts will be demanding of the best possible teaching methods if sound health attitudes are to be developed and the facts of health science translated into desirable behavior patterns.

The control of communicable diseases, public understanding of the values of pasteurization and immunization is reflected today in the dramatically reduced incidence and mortality rates caused by diphtheria, smallpox, typhoid fever, and streptococcal infections; and the extreme decline in tuberculosis.

Evolution of the problem.--The writer participated in a School
Health Workshop at Atlanta University. As a result of the experiences gained from participating in the Health Workshop, the writer was instrumental in setting up a school health program in the Hineshaw Elementary School, Hinesville, Georgia.

Later, the writer was assigned as health instructor in the Liberty County High School. She became interested in this problem and more concerned about the health of boys and girls with whom she worked and felt the need of upgrading the quality of health instruction in the school so as to improve the knowledge and health status of the children with whom she worked.

**Contribution to educational knowledge.**—It is the desire of the writer that the value of this study will provide information which will serve as a basis for improving the health program and at the same time recognize the health needs of the total school population at the Liberty County High School, McIntosh, Georgia.

**Statement of the problem.**—The problem in this proposed study was to make an appraisal of the school health program and to identify the factors of student health behavior patterns of a selected group of eighth-grade students enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966.

**Limitation of the study.**—The major limitation of this study inheres in the fact that it was solely an appraisal without any endeavor to identify any causative factors of concern to the health status of eighth-grade boys and girls enrolled in the Liberty County High School, McIntosh, Georgia.
Purposes of the study.--The major purposes of this study were to: (a) identify the factors of health status, knowledge and practices, (b) to appraise the health program and facilities, and (c) to ascertain the statistical differences in health experiences between boys and girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966.

The specific purposes of this study were as follows:

1. To identify the kinds of health practices manifested within the school environment.
2. To identify the types of health knowledge possessed by the students.
3. To determine the nature of health attitudes held by the students.
4. To determine the extent to which adequate facilities for a health program are available.
5. To determine the extent of healthful conditions about the school plant.
6. To determine the significant differences, if any, in health knowledge, health practices, health assets, health liabilities between the eighth-grade boys and girls.
7. To formulate significant implications for educational practice as may be derived from the analysis of the data.

Definition of terms.--The significant terms used throughout this study are defined as follows:

1. "Health Appraisal" refers to the evaluation of health status of the individual through the utilization of varied organized and systematic procedures such as medical and dental examinations, health history, teacher and nurse observations, screening test and psychological examinations.\(^1\)

\(^1\) Joint Committee on Health Education Terminology, Journal of Health, Physical Education and Recreation, XXXIII, No. 8 (November, 1962), p. 27.
2. "School Health Program" refers to the composite of procedures used in school health services, healthful school living, and health science instruction to promote health among students and school personnel.¹

3. "Health Education" refers to the translation of what is known about health into desirable individual behavior patterns by means of the educational process.²

4. "Health Services" refers to the school procedures which are established to: (a) appraise the health status of pupils and school personnel; (b) counsel pupils, parents and other persons involved concerning appraisal findings; (c) encourage the correction of remedial defects; (d) help plan for the health care and education of handicapped children; (e) help prevent and control diseases; and (f) provide emergency service for sick or injured.³

5. "Healthful School Living" designates provision of a safe and healthful environment, the organization of a healthful environment, the organization of a healthful school day and the establishment of interpersonal relationships favorable to emotional, social and physical health.⁴

6. "Behavior Patterns" a sequence of actions which the organism employs to adjust to a situation; for each behavior pattern there is an underlying neural pattern.⁵

7. "Health" refers to that state in which the individual is able to mobilize all his resources - intellectual, emotional and physical for optimum daily living.⁶

¹Ibid.
8. "Knowledge" refers to collective facts, information, understanding know-how and experience in general whether obtained directly or vicariously as through a class discussion or through reading a book.\(^1\)

9. "Practices" refer to the actual performance, an application of knowledge, conduct and responses. Practices habitually engage in and often repeated.\(^2\)

Locale of the study.--This study was conducted at the Liberty County High School, which is located in the lower coastal plain, in Southeast Georgia, between Midway and McIntosh on Highway 38-82, the county seat being Hinesville.

Liberty County High School has an enrollment of 670 and serves high school students throughout the county which means that practically all of the students are transported to this school by bus.

Liberty, a historical county, is noted for its resources of timber, sea foods, wild life and mild climate which is exciting to people far and near for recreation and sports in the form of fishing and hunting. The county is rural, consisting of a population of 14,787. Fort Stewart, a military reservation and Hinesville Anti-Aircraft area occupy almost one-third of the county's land area.

Fort Stewart and nearby industries of Savannah and Brunswick, the highway department and other local businesses furnish employment for non-farmers and part time farmers.

Historical sites found in the county are Fort Morris, Lyman Hall

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\(^1\) H. F. Kilander, Testing Health Information for Students and Adults," Journal of School Health (January, 1954), presented before the Health Association November 9, 1953, reprint.

Knoll, Midway Cemetery and Midway Church which is the oldest church in Georgia.

This study was conducted in the school during the 1965-1966 school term.

Method of research.--The Descriptive Survey Method of research, employing the technique of the questionnaire, standardized test and statistical analysis, was used to collect and interpret the data necessary for this study.

Description of the instruments.--The instruments used in this study were: (1) a questionnaire - An Appraisal of the School Health Program; (2) Mental Health Analysis Test; (3) Health Behavior Inventory Test.

The questionnaire was devised by Health Educators of the Georgia Department of Public Health. The questionnaire is designed to help schools evaluate and improve their health programs. There are two main divisions: (1) The Organization and Administration of the School Health Program, which consists of five (5) main headings and questions relative to the organization and administration of the school health program; (2) Scope of the School Health Program, which consist of five (5) main headings; healthful school-community environment, health services, physical education, and special education, with questions relative to the scope of the school health program.

Mental Health Analysis Test (Junior High Level) was devised by Louis P. Thorpe and Willis W. Clark. The Mental Health Analysis Test is organized into two categories, Mental Health Assets and Mental Health Liabilities, each with five components.
There are two hundred (200) items which are distributed equally between the two categories and among the ten (10) components of the analysis. The questions are designed to sample the individuals adjustment in ten important areas of behavior. The questions are classified according to two broad categories, assets and liabilities.

Assets: Mental Health Assets are attitudes, beliefs, aspirations, skills and achievements which contribute to a sense of well-being and which support progress toward realizing one's fullest potentialities.

Liabilities: Mental Health Liabilities are threats to emotional security which impede the attainment of needed satisfactions and objectives. The manual of instruction discusses the validity of the test in detail.

Health Behavior Inventory (Junior High Level), was devised by Albert D. Colebank. The inventory has three parts designed to evaluate a student's practices, attitudes, and knowledge about health, and to measure the effectiveness of health teaching.

The Health Behavior Inventory is composed of one hundred (100) multiple choice items divided into three parts - Practices, Attitudes and Knowledge. The inventory items are designed to identify strengths and weaknesses in regard to one or all three aspects of health behavior as well as general deficiencies in health knowledge.

Validity techniques utilized in the development of this instrument included: selection of items from authoritative sources; screening of items by subject matter authorities, teachers, health service personnel, and health administrators; statistical validation
of items through discrimination indices; and several refinements resulting from administration of trial revisions of the inventory.

Description of subjects.--The subjects used in this study were a selected group of eighth grade boys and girls and 15 teachers of the Liberty County High School, McIntosh, Georgia.

Research procedure.--The following procedural steps were executed in order to achieve the purposes of this study:

1. Permission to conduct this study was secured from the proper school authorities.

2. The related literature pertinent to this study was reviewed, summarized and presented in the final thesis copy.

3. Sixty (60) subjects were selected at random from the official attendance records; and subjects were orientated to the nature and purpose of this study.

4. A questionnaire - an Appraisal of the School Health Program was administered.

5. The Mental Health Analysis and Behavior Inventory Tests were administered.

6. The data from the questionnaire and standardized tests were assembled in appropriate tables for analysis and interpretations required for this study.

7. Conclusions, implications and recommendations were made in accordance with the analysis of this data.

Survey of related literature.--A survey of the related literature pertinent to this study reveals that the maintenance of good health has been a fundamental objective of education and that it is generally impossible for an individual to attain the other objectives of education unless he possesses reasonably good health. Learning and social adjustment and a general zest for living are all conditioned by health. In children as adults, health affects the drive, emotional tone and
intellectual efficiency necessary for successful living.

In this survey, the literature will be organized and presented under three broad areas; namely,

1. Scope of School Health Program
   a. School Health Services
   b. Health instruction
   c. Healthful School Living

2. Behavior Patterns of Health

3. Research Findings

Scope of the school health program.—The school health program represents a major concern of a community for the health of its children. Its purpose is manifold. It consists of the total activity which is planned, organized and developed in favor of the preparation of pupils for healthful living. It is a program of instruction, counseling, guidance and services which seeks through a variety of activities to protect and improve the health of children while providing experiences which are both informative and suggestive of desirable personal and social health practices.

The elements of the school program are commonly grouped in the three areas of school health services, school health instruction and healthful school living.

The modern school health program has expanded to the point where the personnel consist of several persons who contribute to the school as specialists. They include physicians, nurses, physical educators, counselors and health coordinators.\(^1\)

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School health programs are no longer aimed solely at the prevention of communicable diseases. Intellectual and emotional power, strength of tissue, adjustment to the fears and complexities of this world are the subject of though now as well as the prevention of diseases.

In discussing the school health program, the School Health Guide of Georgia states that the school must function as a part of the total community; so, also, must the school health program be a harmonious part of the over-all community health program. The school system, the superintendent, principal, teachers and other personnel, should carry the major responsibility for instruction and training in health. Likewise, the health department, the health officer, public health nurse, sanitation personnel and other staff, should get standards for and develop progressionnal, medical and technical services.¹

Oberteuffer asserts that the modern scientifically conducted program seeks the facts; it uses neither sentiment nor fiction as its base, but seeks to learn through careful individual appraisal the status of its students and to construct whatever kind of programs necessary on the basis of the revealed findings.²

Health service.—School health services are the joint responsibility of the school, health department and the community. Representatives from all these may form an advisory council to assist in

planning and policy making. We must remember, however, that parents have the responsibility for the health and welfare of their children.

School health services constitute those activities directly concerned with appraisal of the pupils and parents, follow-up services, prevention and control of communicable and other diseases and provisions for emergency services in case of injury or sudden illness.¹

Anderson points out the following aspects of the evaluation and/or appraisal of health services; circumstances make it desirable to evaluate health services independently of other phases of the health program. Such an evaluation would include the nature and frequency of health examinations, dental examinations, screening of vision, hearing, weight and height and teacher's appraisal of the child's health. The follow-up program and correction of defects must be included.²

In discussing school health services, Schneider states that:

School health services are conducted with the object of protecting and improving the health of pupils and school personnel. The range of this service activity is wide and includes measures aimed at the prevention and control of diseases, the appraisal of pupil and personnel health status, and the care of the correction and remedial defects.³

The effectiveness of health services depends upon the cooperation of schools, departments of health, non-official health agencies, medical and dental societies, parents, nurses, physicians and dentists

¹Turner, op. cit., p. 364.
in private organizations. Certain activities of the health service program are carried out by health specialists while others are best done by teachers or other school personnel. Provisions for excluding students who are ill, and readmitting them after recovery, are also considered part of the health service program.1

Supporting this belief, Oberteuffer, in discussing the use and availability of scientific health services, indicates that one mark of the level of civilization of a people is the availability of medical and dental services and the use which they get. Civilization means, among other things, intelligent arrangements for the health of the people. As a health problem, then, the use of professional health services has three aspects: the education of people to use scientific agencies, the distribution of the services throughout the population and the education of people away from the unscientific fad and quack.2

Health instruction.--For over a half century school programs have included some health information. It has been limited in amount and usually formal in character, somewhat interesting as curiosity items, but seldom tied to daily life or so incorporated into habits as to greatly affect health practices. The rapid advancements in science, medicine and public health make it necessary that individuals have sufficient knowledge to take advantage of and to understand and to make wise selections and decisions concerning the most recent development.

1 Ibid., p. 410.
2 Oberteuffer, op. cit., p. 18.
The content of health instruction should be to secure favorable behavior or conduct in all situations involving an individual’s health. Broadly put, the aim of health instruction is to teach people to live well, to live scientifically, economically and happily. Behavior is what counts. In the last analysis it is what we do that is of greatest significance. As Durant says, "We become what we do." \(^1\)

Hicks believes that in order to determine properly the scope of health instruction in the school program, it is necessary to consider the needs of children and youth at all age levels from kindergarten throughout the elementary, junior and senior high school and that organized health instruction should be provided for all at all grade levels throughout the elementary and secondary schools. \(^2\)

The gullibility of the public in spending millions of dollars each year on unnecessary and harmful treatments, drugs, vitamins and patent medicines points up the need for better understanding of healthful living. Reports from national groups state that approximately one half billion dollars each year is spent by the American public on various kinds of food fads which further points up the need for greater health knowledge in preparing people to make the best and most intelligent use of available health services.

Another need for health education is shown by a study of the extent and level of knowledge of a large number of typical fifth and sixth grade pupils. Dzenowagis and Irwin found that health and safety

\(^{1}\) Ibid., p. 52.

\(^{2}\) Dora A. Hicks, "A Scope of Health Instruction, Grades One to Twelve," Journal of School Health, XXIII, No. 6 (June, 1953), p. 93.
misconceptions are widespread among upper elementary children.1

In another study, similar to the study done with fifth and sixth grade pupils, Dzenowagis, Irwin and McPherson, using a group of tenth grade girls, found that the percentage of the 216 misconceptions which were believed true by the 250 tenth grade girls included in the study, indicated that there is strong evidence that even high school students lack proper education concerning health, hygiene and safety.2

Anderson, in his book, *School Health Practices*, indicates the direction or emphasis in a program of health instruction:

Through all phases of the school health program runs one central theme: preparation of every youngster to make the necessary decision relating to his health. Education means growth in the individual’s ability to distinguish, to discriminate, to appraise, to interpret and to evaluate. Applied to health, education means self-growth in one’s understanding of health and in one’s capacity to apply the fundamental principles of health to specific life situations.3

Healthful school living.—The health of school children is directly affected by the environment of the school. As has been said: "The authority which requires pupils to attend school implies the responsibility to provide an environment as evocative as possible of growth.

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3 Anderson, op. cit., p. 271.
learning and health.\textsuperscript{1}

Schneider describes the scope of healthful school living as a program which encompasses more than sanitary inspection. This program is concerned with environmental health and safety in the general sense, and it includes the mental health of pupils and teachers. It takes into consideration the health of the school personnel as it recognizes the impact upon the pupils of health and personality of the teacher. It recognizes the importance of adapting the curriculum to the needs, interest and capacities of individual pupils and the importance of sound grouping, testing, marking and recording procedures. It gives necessary attention to the psychological factors which necessarily or otherwise accompany the educational process.\textsuperscript{2}

Emphasis is placed upon the activities and practices in the school as factors in the healthful environment of children.

Anderson states that:

\begin{quote}
Any assessment of the school environment must extend beyond the mere static physical environment. It must encompass the activities and practices in the school which affect health promotion, disease prevention, social adjustment and esthetic appreciation appraisal must include factors affecting physical and mental health in terms of dynamic school living. An appraisal of healthful school living must be extended to the total school program.\textsuperscript{3}
\end{quote}

The competent teacher and administrator should not assume that the existing practices in school health services, in health instruction, and environmental conditions are effective; an appraisal of the

\begin{footnotes}
\item[2] Schneider, op. cit., pp. 24-25.
\end{footnotes}
over-all school health program is necessary as a measure of the completeness of the program, its functioning and its effectiveness.

Through health services, a sound school health program affects desirably the distinctly biological characteristics of the pupil. The climate of the classroom in which he spends the greater part of the day has an effect on his emotional development and his attitudes. The instructional program should influence his attitude toward health matters and through the acquisition of an understanding of them which enables him to choose well.

**Behavior patterns of health.**--The survey of literature seems to indicate that there is a certain unity in the organization of behavior at birth.

Cruz states:

> Early behavior results from the stimulation of organic and physiological factors of the individual and that learned behavior develops when physiological nature has been modified by contact with environmental situations. Any modifications of the neural structural of an individual will change the organization of the total living organism and will influence the subsequent patterns of behavior.¹

Many of the basic patterns of behavior that produce happiness are learned in childhood particularly the patterns which involve relationships with other individuals. Consequently, school experiences become basically important in the establishment of desirable emotional attitudes and fundamental behavior patterns.²

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Driscoll states:

Children’s behavior patterns develop out of the interaction of emotional and physical constitutions and environmental pressures under which they are living. Children in the public schools come from many different kinds of environments. Therefore, the impact of the neighborhood and the home environment are tremendous factors in developing the patterns of health behavior needed for success.¹

Sliepcevich’s study in health education, which also included an investigation into health behavior (which included knowledge, practices and attitudes), of the boys and girls in the sixth, ninth and twelfth grades, points out the strengths and weaknesses of health-behavior inventories which included the following:

In grade six, exercise, sleep and relaxation; cleanliness of body care; and food were the three strongest areas; while dental health, mental health and safety education were the weakest areas.

For ninth grade students, the areas of greatest strength were community health, care of special senses and nutrition. The weakest areas were consumer health education; habit forming substances; fatigue, sleep and rest.

High school seniors excelled on questions related to stimulants and depressants, personal health and mental health. Their greatest deficiencies were in health areas concerned with nutrition community health, chronic diseases and consumer health.

Student’s knowledge and attitudes about health in the ninth

grade were better than their health practices.¹

Strang points out that there comes a time when the child must learn that certain behavior is not socially acceptable and that he cannot always have what he wants when he wants it. Some frustration is an inevitable part of his life. In a culture demanding inhibition an individual who acts solely on his impulses often hurts himself and other people. Mild frustrations which confront any individual with repeated failure are disintegrating.²

Strang further points out the following danger signs of incipient mental illness of which the teacher should aware:

1. Readily recognized extremely aggressive and antisocial behavior.
2. Often overlooked shyness, extreme withdrawal tendencies, over conscientiousness.
3. Discrepancy between intellectual ability and school achievement.
4. Sudden changes in attitudes, feelings, behavior and scholarship.³

Walker concludes that the personality of the teacher exercises a dominant influence on the behavior manifestations of children in her charge. Fears, frustrations and other disturbed emotional conditions should not be allowed to influence the emotional tone of a classroom.⁴

Research findings.—Research in this field has given helpful

¹ Elna M. Sliepcevich, "Health Education in the Curriculum," The Education Digest, XXX, No. 3 (November, 1964), pp. 50-53.
³ Ibid., p. 38.
⁴ Walker, op. cit., p. 190.
insight to both students and teachers in obtaining guidelines to follow in working toward healthful living in an environment which contributes to physical, mental and social health which exemplifies sound health principles.

Some researchers indicate that an appraisal of health denotes a positive approach in which major emphasis is placed upon the assets of the individual with deviations and deficiencies appraised in terms of the degree to which they obstruct or interfere with effective and enjoyable living.

Strang and Smiley believe that appraisal of a program involves both theoretical standards and facts about the health program, changes in the health conditions in the community and changes in health and growth of the individuals.¹

According to Adams:

The teacher holds a very strategic position in all areas of the school health program. The knowledge a child gains about personal and community health, his health habits and attitudes depend upon how well the teacher has carried out the implementation of the total health program in the classroom.²

Research findings seem to indicate that many studies are based upon direct observation of the behavior of children who were placed in controlled experimental situations and detailed stenographic records of behavior were taken. Others depend on ratings of traits of behavior

on checklists carefully worked out to cover the total range of possible behavior.

Jones, in his studies of child development, found that over, or observable behavior of children do not tell enough of the story of emotional reactions or inner feelings in social situations.¹

Goodenough, who earlier in her work used methods of sampling children's behavior over short periods of time, expressed doubts as to the value of such samples because of neglect of the total personality of the child and of the setting in which the behavior is stimulated.²

The overall findings related to the appraisals of health behavior resulting from Colebank's study of health behavior included the following:

1. How students feel toward health education determines to a large extent what they do about their health behavior.
2. The administration of pre-test and post-tests before and after instruction provided evidence of the effectiveness of instruction and student growth particularly in health attitude and knowledge.
3. It was shown that health behavior can be changed through instructional programs. Such programs must have: (a) objectives carefully formulated in terms of behavior, (b) teacher interest and (c) provisions for evaluation.
4. Testing of pupils indicated: (a) health knowledge scores were higher than health attitude and health practice sources in most instances, (b) health practices appeared to lag behind knowledge and attitudes and (c) more improvement was noted in knowledge and attitudes than in practices as a

² Ibid., p. 405.
result of the testing accomplished after a period of time and instruction.\(^1\)

Palmer found that standardized tests can be useful as a desirable means of determining the worthwhile levels of the acquisition of health knowledge, discipling in health practices and developing health attitudes pertinent to health and healthful environment.\(^2\)

Oberteuffer states:

> In order to appraise effectively all aspects of a school health program, it requires many tests, surveys, checks, follow-ups, retests and other devices. The field does not provide means to accomplish an evaluation complete in every respect.\(^3\)

Additional research further indicates that health appraisal is a continuing process and that new techniques are continually being developed through research and experience and its value comes in its use.

**Summary of related literature.**—The literature for this study was discussed under three broad areas; namely: (a) Scope of School Health Program, (b) Behavior Patterns of Health and (c) Research Findings.

The study reveals that the modern health program evolved at the turn of the century from the early days of public education when the school was concerned with little beyond purely factual instruction.

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\(^3\) Oberteuffer, op. cit., p. 434.
As public health developed, the school broadened its whole perspective and health became a major concern.

The researcher finds that studies in school health and health education have been carried out, the school health program has become a more integral part of the community health program and it has become increasingly apparent that facts alone will not produce hygienic living. She further finds that health education involves real training and problem solving, not merely instruction. Modern teaching involves trying to understand the child.

It is important that the school know the academic status of each child at a given time. It is equally important that the school know each child's health status. School success and health status are related. The school program and the health of the child must be in adjustment. To enable the child to obtain most benefits from his school experience the teacher should know the child's health endowment, the child's limitations and his likely possibilities. Once the teacher has a unified concept of a child's health status, she not only can understand the child's performance and behavior, but quickly be aware of any deviations from the child's normal condition.

Authorities agree that health education is an educative experience for increasing the knowledge, improving the attitudes and influencing the behavior of children in relation to health problems.\(^1\)

There is considerable evidence that comfort and efficiency are

fostered by good practices in school lighting. Facts revealed by many studies, point to the need for more effective school health services.

The relationship between the physical plant of the school and the mental health of its occupants is now widely recognized. The American Association of School Administrators state, "Educational growth of children to the fullest potential cannot be achieved unless every aspect of the physical environment is so controlled that it contributes to the comfort and health of the pupils and professional staff."

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1 American Association of School Administrators, Health in Schools (National Education Association, 1951), p. 89.
CHAPTER II

PRESENTATION AND ANALYSIS OF DATA

Organization and treatment of data.--The presentation, analysis and treatment of the data of this research report on the problem, school health program-appraisal and student behavior patterns, were analyzed and interpreted as a basis for the formulation of conclusions for this study.

The subjects used in this study were 15 teachers and 60 eighth-grade pupils who were divided into two groups: 30 boys and 30 girls.

The data for this study are compiled from the three (3) instruments used. A questionnaire: Appraisal of the School Health Program; Health Behavior Inventory Test, which includes practices, attitudes and knowledge; and the Mental Health Knowledge Test, which include assets and liabilities. There are twenty-six (26) distribution tables on the questionnaire data and nine (9) frequency tables with nine (9) companion comparison tables on the test data.

The treatment of data are organized and presented under the following major divisions: (1) data on the questionnaire, which is based on the opinions of fifteen teachers, (2) data on the Health Behavior Inventory Test, which includes the significant differences between the 30 boys and 30 girls of the eighth-grade at the Liberty County High School, and (3) data on the Mental Health Analysis Test.
which include significant differences on the same sixty (60) subjects.

The criterion of reliability for the test of significant difference was established as a Fisher's "t" of 2.58 at the .01 percent level of confidence at 58 degrees of freedom.1

Appraisal of the School Health Program

The first section of this research study presents the data derived from the fifteen respondents on the questionnaire, Appraisal of The School Health Program and the extent to which the program at Liberty County High School measures up to the determined criteria.

Distribution and Return of the questionnaire. --The data on the questionnaire which involves the percentages, based on the opinions of the fifteen teachers of the Liberty County High School, are presented in Tables 1 through 26.

Organization and administration of the school health program. --Table 1, page 29, shows that there is a person who is directly responsible for the administration and promotion of the health program in the Liberty County High School. There is a health committee which includes administrators, teachers, and lay people, but does not include medical personnel. Table 1 further shows that health knowledge and health attitude test are used to a moderate extent. The percentages of "no responses" items reflect the ineffectiveness of the organization and administration of the school health program.

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Is there a person directly responsible for the administration and promotion of the health program in your school?</td>
<td>15</td>
<td>100</td>
<td>3</td>
<td>20</td>
<td>20</td>
<td>100</td>
</tr>
<tr>
<td>B. Is there an active health committee?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td>20</td>
<td>100</td>
</tr>
<tr>
<td>1. Are teachers members of this committee?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>2. Are administrators?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>3. Are pupils members?</td>
<td>11</td>
<td>73</td>
<td>4</td>
<td>6</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>4. Are lay people members?</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>87</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>5. Is there a physician included?</td>
<td>15</td>
<td>100</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>6. Is a nurse included?</td>
<td>15</td>
<td>100</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>7. Is a dentist included?</td>
<td>15</td>
<td>100</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>8. Are sanitation personnel included?</td>
<td>1</td>
<td>7</td>
<td>13</td>
<td>87</td>
<td>13</td>
<td>100</td>
</tr>
<tr>
<td>9. Does this committee help plan, activate and evaluate the health program in the school?</td>
<td>2</td>
<td>13</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>10. Does this committee meet regular?</td>
<td>2</td>
<td>13</td>
<td>11</td>
<td>73</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>a. Does the evaluation include:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Health Knowledge test?</td>
<td>9</td>
<td>60</td>
<td>6</td>
<td>40</td>
<td>4</td>
<td>27</td>
</tr>
<tr>
<td>(2) Health Attitude tests?</td>
<td>8</td>
<td>53</td>
<td>3</td>
<td>20</td>
<td>4</td>
<td>27</td>
</tr>
</tbody>
</table>
Attitudes and practices of pupils.--The data on the health attitudes and practices of pupils are presented in Table 2, page 31. It is noted that 7 or 47 per cent of the teachers rated pupils attitudes and practices toward the health program as fair; 8 or 53 per cent as excellent to this item; 5 or 33 per cent rated attitudes and practices in the home poor; 10 or 63 per cent excellent; 6 or 40 per cent rated attitudes in the community as poor; 9 or 60 per cent excellent; 9 or 60 per cent rated interviews and conferences with pupils, parents, health personnel and other teachers poor; 6 or 40 per cent excellent; 2 or 13 per cent rated training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries as poor; 4 or 27 per cent poor; 8 or 53 per cent excellent; 1 or 7 per cent made no response to this item. Responses also indicated that 4 or 27 per cent indicated that when the above information is obtained it is used to improve the health program; 10 or 67 per cent rated this item as excellent and 1 or 7 per cent rated it as none.

Basic training of school personnel.--The data on the basic training of school personnel are presented in Table 3, page 32, which shows that 9 or 60 per cent of school personnel have training in the school health program and 13 or 87 per cent indicated that this training includes mental and social health as well as physical health; 15 or 100 per cent indicated that they feel that each person has responsibilities in the school health program.

Thirteen or 87 per cent of the teachers indicated yes and 2 or 13 per cent indicated "no" to the question, "Is there an in-service
TABLE 2

DISTRIBUTION OF RESPONSES CONCERNING PUPILS' ATTITUDES AND PRACTICES TOWARD THE HEALTH PROGRAM AS OBTAINED FROM THE FIFTEEN TEACHERS IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>None</th>
<th>Per Cent</th>
<th>Fair</th>
<th>Per Cent</th>
<th>Good</th>
<th>Per Cent</th>
<th>Excellent</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Attitudes and practices in the school?</td>
<td>7</td>
<td>47</td>
<td>8</td>
<td>53</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Attitudes and practices in the home?</td>
<td>5</td>
<td>33</td>
<td>10</td>
<td>67</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Attitudes and practices in the community?</td>
<td>6</td>
<td>40</td>
<td>9</td>
<td>60</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Interviews and conferences with pupils, parents, health personnel and other teachers?</td>
<td>9</td>
<td>60</td>
<td>6</td>
<td>40</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries, etc.</td>
<td>2</td>
<td>13</td>
<td>4</td>
<td>27</td>
<td>8</td>
<td>53</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. When the above information is obtained is it used to improve the health program?</td>
<td>1</td>
<td>7</td>
<td>4</td>
<td>27</td>
<td>10</td>
<td>67</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 3
DISTRIBUTION OF RESPONSES ON THE BASIC TRAINING OF SCHOOL PERSONNEL IN THE SCHOOL HEALTH PROGRAM AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Do school personnel have training in the school health programs?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. All?</td>
<td>9</td>
<td>60</td>
<td>6</td>
<td>40</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>2. More than half?</td>
<td>8</td>
<td>53</td>
<td>6</td>
<td>40</td>
<td>11</td>
<td>93</td>
</tr>
<tr>
<td>3. Less than half?</td>
<td></td>
<td></td>
<td>1</td>
<td>6</td>
<td>14</td>
<td>93</td>
</tr>
<tr>
<td>4. None?</td>
<td></td>
<td></td>
<td>1</td>
<td>6</td>
<td>11</td>
<td>93</td>
</tr>
<tr>
<td>B. Does this training include mental and social health as well as physical health?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Do they feel that each person has responsibilities in the school health program?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Is there an in-service training program in school health for all school personnel as part of total school program?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Does this program consists of study and planning during pre- and post planning weeks?</td>
<td>8</td>
<td>53</td>
<td>7</td>
<td>47</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does the program consists of study groups during school year?</td>
<td>7</td>
<td>47</td>
<td>8</td>
<td>53</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
training program in the school for all personnel," nevertheless, 8 or 53 per cent of the teachers indicated that the program consisted of study and planning during pre-and post-planning weeks; and 7 or 47 per cent of them indicated that the program consisted of study groups, and 8 or 53 per cent of the teachers indicated no, to this factor.

The data in Table 3 would suggest that improvement is needed in the training of school personnel in school health programs and that more emphasis could be placed on study and planning during pre-and post-planning weeks for a more effective health program.

Written health program.--The data in Table 4, page 34, reveal that 12 or 80 per cent of the teachers indicated that there is a written program of health at Liberty County High School, 8 or 53 per cent of them that the program is reviewed and improved annually, 15 or 100 per cent of the teachers indicated that this written program conforms to the county written program of health; 10 or 67 per cent indicated that school personnel and public health personnel jointly carry on the responsibilities of the program. In planning and writing the program, 8 or 53 per cent of the teachers indicated that students and public health personnel shared in the planning. On the other hand, 7 or 47 per cent of the teachers indicated that PTA, school personnel and public health personnel and 9 or 60 per cent of community, PTA, school personnel and public health personnel also share in the planning and writing of the program of school health.

Table 4 shows that the written program conforms to the standards set up by the county and the services of public health personnel are
TABLE 4

DISTRIBUTION OF FACTORS RELATING TO THE WRITTEN HEALTH PROGRAM
OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA,
1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Is there a written program of health for your school?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is this written program revised and improved at least annually?</td>
<td>8</td>
<td>53</td>
<td>7</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does this written program of health for your school conform to the county written program of school health?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do school personnel and public health personnel jointly carry on the responsibility of the health program in schools?</td>
<td>10</td>
<td>67</td>
<td>2</td>
<td>13</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>4. In planning and writing the program of school health, did the following participate:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. School personnel, students and public health personnel?</td>
<td>8</td>
<td>53</td>
<td>4</td>
<td>27</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>b. PTA, school personnel and public health personnel?</td>
<td>7</td>
<td>47</td>
<td>5</td>
<td>33</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>c. Community, PTA, school personnel and public health personnel?</td>
<td>9</td>
<td>60</td>
<td>4</td>
<td>27</td>
<td>2</td>
<td>13</td>
</tr>
</tbody>
</table>
Healthful school-community environment.--Table 5, page 36, indicates that 15 or 100 per cent of the teachers reported that the grounds are suitable in size to meet state standards at Liberty County High School. Thirteen or 87 per cent of the teachers indicated that landscape for beautification and drainage are excellent; 8 or 53 per cent of them indicated that grass, flowers and shrubbery are in the proper places and well kept; 15 or 100 per cent of the teachers indicated that there are no objectionable commercial or industrial areas nearby creating noise, dust or other hazards, and all teachers indicated that the grounds are clean and well kept.

Buildings.--Table 6, page 37, shows that 12 or 80 per cent of the teachers indicated that the buildings are attractive and in a good state of repair at the Liberty County High School; 3 or 20 per cent of them felt that the buildings were not in a good state of repair; 5 or 33 per cent of them indicated that classrooms are adequate and suitable, whereas 10 or 67 per cent of them felt that the classrooms and other buildings are inadequate; 15 or 100 per cent of the teachers indicated that a separate restroom for teachers is available and buildings are clean and well kept. Table 6 further indicates that there is a ramp that will accommodate a wheelchair.

Table 6 also shows that the buildings are sanitary, attractive, and in a good state of repair which are desirable factors conducive to good emotional health of pupils and staff. Table 6 also shows that suitable classrooms are inadequate to meet the needs of the increasing school population.
TABLE 5

DISTRIBUTION OF RESPONSES CONCERNING THE SCOPE OF THE SCHOOL HEALTH PROGRAM (HEALTHFUL SCHOOL-COMMUNITY ENVIRONMENT) AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>None</th>
<th>Per Cent</th>
<th>Fair</th>
<th>Per Cent</th>
<th>Good</th>
<th>Per Cent</th>
<th>Excellent</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Healthful School-Community Environment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 1. Grounds suitable in size to meet state standards? | | | | | | | | | | %
| 2. Landscaped for beautification and drainage? | | | | | | | | | | %
| 3. Grass, flowers and shrubbery in proper places and well kept? | | | | | | | | | | %
| 4. Are there objectionable commercial or industrial areas nearby creating excessive noise, dust or other hazards? | | | | | | | | | | %
| 5. Are grounds clean and well kept? | | | | | | | | | | %

---

*Note: The table is incomplete with missing data points.*
TABLE 6
DISTRIBUTION OF RESPONSES ON THE BUILDINGS LOCATED ON THE LIBERTY
COUNTY HIGH SCHOOL CAMPUS, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are buildings attractive and in good state of repair?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are there adequate, suitable classrooms?</td>
<td>5</td>
<td>33</td>
<td>10</td>
<td>67</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are other necessary buildings adequate?</td>
<td>6</td>
<td>40</td>
<td>9</td>
<td>60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Is there a separate rest room for teachers where they may relax during free periods?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Are buildings clean and well kept?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Is there a ramp entrance that will accommodate a wheel chair?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Sanitation.--Table 7, page 39, presents the data on provisions at the Liberty County High School, which reveals that 15 or 100 per cent of the teachers felt that the quantity of water was adequate, had been tested, and the distribution system approved by the health department. It may be noted, that 3 or 20 per cent of the teachers indicated that paper towels were always plentiful; liquid soap or soap powder properly dispensed and used for handwashing. Thirteen or 87 per cent of them indicated that toilets were approved by the Department of Public Health, 8 or 83 per cent of the teachers indicated that the children were trained in proper use and maintenance of toilets, one hundred per cent of the teachers indicated that there is no toilet that will accommodate a wheel chair patient; seven or 47 per cent of them felt that drinking fountains were adequate and available with heights adjusted to age groups using them.

Table 7 further shows that most of the sanitation facilities meet the standards set up by the Department of Public Health, but are inadequate according to the number of pupils using them.

Heating, ventilation and lighting.--The data on heating, ventilation and lighting in the Liberty County High School are presented in Table 8, page 40. Nine or 60 per cent of the teachers indicated that there is an adequate central heating system; 6 or 40 per cent felt that the heating system is inadequate; 15 or 100 per cent of them made no response as to jacket stoves; 8 or 53 per cent of the reactions showed that there are properly vented individual heaters; 2 or 13 per cent indicated no, and 5 or 33 per cent of the teachers gave no response to this item. Thirteen or 87 per cent of
### TABLE 7

**DISTRIBUTION OF RESPONSES REGARDING SANITATION AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>1. Is drinking water available on school grounds?</td>
</tr>
<tr>
<td>a. Is source of water approved by the Health Department?</td>
</tr>
<tr>
<td>b. Has it been tested and approved by the Health Department?</td>
</tr>
<tr>
<td>c. Is the quantity sufficient?</td>
</tr>
<tr>
<td>d. Is the distribution system approved by the Health Department?</td>
</tr>
<tr>
<td>2. Are adequate sanitary-type drinking fountains available with heights adjusted to age groups using them?</td>
</tr>
<tr>
<td>3. Are there always plenty of paper towels?</td>
</tr>
<tr>
<td>4. Is either liquid soap or soap powder, properly dispensed, used for hand-washing?</td>
</tr>
<tr>
<td>5. Are toilets approved by the Department of Public Health?</td>
</tr>
<tr>
<td>6. Are children trained in proper use and maintenance of toilets?</td>
</tr>
<tr>
<td>7. Is there a toilet that will accommodate a wheel-chair patient?</td>
</tr>
<tr>
<td>Factors</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1. Is there an adequate central heating system?</td>
</tr>
<tr>
<td>2. Are there adequate jacketed stoves?</td>
</tr>
<tr>
<td>3. Are there properly vented individual gas heaters?</td>
</tr>
<tr>
<td>4. Can adequate portion of windows be opened to provide sufficient ventilation?</td>
</tr>
<tr>
<td>5. Are the rooms free from drafts?</td>
</tr>
<tr>
<td>6. Is there an adequate supply of fresh air?</td>
</tr>
<tr>
<td>7. Is there an accurate thermometer in classrooms?</td>
</tr>
<tr>
<td>a. If so, is it properly located?</td>
</tr>
<tr>
<td>8. Are there electric lights?</td>
</tr>
<tr>
<td>a. If so, are they properly located?</td>
</tr>
<tr>
<td>9. Are translucent window shades used?</td>
</tr>
<tr>
<td>a. If so, are proper light controls used to shield the windows adequately, so arranged that light enters from the upper part of windows?</td>
</tr>
</tbody>
</table>
The teachers indicated that adequate portion of windows can be opened to provide sufficient ventilation; the rooms are free from drafts and window shades are used to shield the windows adequately, so arranged that light enters from the upper part of the window; 2 or 13 per cent of the teachers indicated no to these items.

Fifteen or 100 per cent of the teachers indicated that there is an accurate thermometer in the classroom; it is properly located, and there are electric lights in the Liberty County High School.

Furniture.--Table 9, page 42, reveals that 15 or 100 per cent of the respondents felt that desks are arranged for minimum of glare and maximum of light, reading tables are thus placed, desk and furniture are natural wood, floors are free from glare and walls and ceiling are of light shade. They also felt that chalkboards had a dull finish, may be used without facing the light and teachers stand away from windows when teaching so pupils will not have to face the light.

Table 9 indicates that the standards for furniture, chalkboards, floors, walls and ceiling meet the minimum requirements at the Liberty County High School. It may be assumed that teachers are conscious of their positions when teaching for the health and safety of children involved.

Classroom arrangement and cleanliness.--Table 10, page 44, shows that 15 or 100 per cent of the teachers indicated that janitorial service is provided and that the janitor realizes his importance in the general scheme for school sanitation and child welfare. Four or 27 per cent of the teachers felt he had had special training for his job, 6 or 40 per cent felt he had no training, and 5 or 23 per cent of the
TABLE 9

DISTRIBUTION OF RESPONSES CONCERNING FURNITURE AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are desks arranged for minimum of glare and maximum of light?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Are reading tables also thus placed?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Are desks and furniture natural wood?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Are floors natural wood, or light green marbleized linoleum or asphalt tile and free from glare?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are walls and ceiling a light shade?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do chalkboards have dull finish?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. May they be used without facing the light?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Do teachers stand away from windows when teaching so pupils will not have to face light when looking at them?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
teachers made no response to this item.

Fifteen or 100 per cent of the respondents showed that the custodian has supervision and adequate equipment and supplies are provided for cleaning.

All 15 or 100 per cent of the respondents indicated that the room arrangements are orderly and attractive and that there are growing plants in the room.

According to one hundred per cent of the respondents, screens are not provided for all windows; all desks are movable and suitable in size for the age group using them; all or 100 per cent of the teachers indicated that satisfactory facilities are not provided for wraps and other garments. Fourteen or 93 per cent of them indicated that the floors are finished for beauty and ease of cleaning.

School lunch program.--The data in Table 11, page 45, revealed that adequate facilities for a school lunch program are available at the Liberty County High School. The lunch program is receiving Federal aid; the lunchroom is inspected regularly by the Department of Public Health. Fourteen or 93 per cent of the teachers reported that soft drinks and packaged foods are sold at the school. One hundred per cent of the respondents affirmed that the lunchroom is inspected regularly by the Department of Public Health; 13 or 87 per cent of them indicated that physical examinations are required for lunchroom personnel and student help; 10 or 13 per cent of them indicated that lunchroom personnel have training in sanitation and proper methods of food handling; 5 or 33 per cent of the teachers
### Table 10

**Distribution of Responses Concerning Classroom Arrangement and Cleanliness at the Liberty County High School, McIntosh, Georgia, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is janitorial service provided?</td>
<td>15</td>
<td>100</td>
<td>6</td>
<td>40</td>
<td>5</td>
<td>33</td>
</tr>
<tr>
<td>a. If so, does the janitor realize his importance in the general scheme for school sanitation and child welfare?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Has he had special training for his job through the State Department of Education's custodial training program or elsewhere?</td>
<td>4</td>
<td>27</td>
<td>6</td>
<td>40</td>
<td>5</td>
<td>33</td>
</tr>
<tr>
<td>c. Does he have supervision?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are there adequate equipment and supplies for cleaning?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is room arrangement orderly and attractive?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are there growing plants in the rooms?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Are screens on all windows?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Are desks and seats movable?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Are desks and seats suitable in size for the age group using them?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Are satisfactory facilities provided for wraps and other garment, either in classrooms or halls?</td>
<td>15</td>
<td>100</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Are floors finished for beauty and ease of cleaning?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 11

**Distribution of Responses Regarding the Lunch Program at the Liberty County High School, McIntosh, Georgia, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong> Does the school have adequate facilities for a school lunch program?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is the school lunch program receiving Federal aid?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is the school refraining from selling soft drinks and packaged foods?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>14</td>
<td>93</td>
</tr>
<tr>
<td>3. Is the lunchroom inspected regularly by the Department of Public Health?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are physical examinations required for school lunch personnel and student help?</td>
<td>13</td>
<td>87</td>
<td></td>
<td></td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>5. Do school lunch personnel have training in sanitation and proper methods of food handling?</td>
<td>10</td>
<td>67</td>
<td></td>
<td></td>
<td>5</td>
<td>33</td>
</tr>
<tr>
<td><strong>B.</strong> Do all children eat in the lunch room?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is anything being done to increase the participation in the lunch program?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are the children who bring packed lunches given an opportunity to eat in the dining room?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
<td>Per Cent</td>
<td>No Response</td>
<td>Per Cent</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
<td>----------</td>
<td>-----</td>
<td>----------</td>
<td>-------------</td>
<td>----------</td>
</tr>
<tr>
<td>3. Is pasteurized milk provided for every child daily?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are free meals given to children who need them?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Are 20 minutes or more allowed for children to eat lunch exclusive of time consumed in washing hands and standing in line?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Is there evidence that the school lunch program is bringing about positive learning experiences to pupils either directly or through classroom integration?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
made no response to this item.

The data further reveal that every child does not eat in the lunchroom; 12 or 80 per cent of the teachers indicated that something is being done to increase the participation in the lunchroom. Fourteen or 93 per cent of the teachers indicated that children who bring packed lunch are given an opportunity to eat in the dining room.

All or 100 per cent of the teachers indicated that pasteurized milk is provided daily for all children, 20 minutes or more are allowed for children to eat lunch and the school lunch program is bringing about positive learning experiences to pupils either directly or through classroom integration of living experiences.

Organization and administration.—The data on the organization and administration of the Liberty County High are presented in Table 12, page 48. Fifteen or 100 per cent of the teachers indicated that the school day is long enough to prevent too much hurry, and 7 or 47 per cent of them felt that there is enough time given for rest, relaxation and play; whereas, 6 or 40 per cent of them said no, and 2 or 13 per cent of them made no response to the item.

As indicated in Table 11, 3 or 20 per cent of the teachers indicated that pupils are overburdened with homework and extra-class activities; whereas, 12 or 80 per cent of them said no to this item.

Ten or 67 per cent of the teachers indicated that examinations, marks, and reports to parents are emphasized to the point where children are subjected to an undue amount of fear and failure; 3 or 10 per cent of them felt differently, and 2 or 13 per cent of them made no response to this item. Fifteen or 100 per cent of the
## TABLE 12
### DISTRIBUTION OF RESPONSES CONCERNING ORGANIZATION AND ADMINISTRATION OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the school day long enough to prevent too much hurry?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is there enough time given for rest, relaxation and play?</td>
<td>7</td>
<td>47</td>
<td>6</td>
<td>40</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>3. Are pupils over-burdened with homework and extra-class activities?</td>
<td>3</td>
<td>20</td>
<td>12</td>
<td>80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are examinations, marks, and reports to parents emphasized to point where children are subjected to undue amount of fear or failure?</td>
<td>10</td>
<td>67</td>
<td>3</td>
<td>20</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>5. Does the method of promotion take into consideration the total development of the pupil, rather than merely his knowledge of subject matter?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
respondents felt that the method of promotion takes into consideration the total development of the pupil, rather than merely his knowledge of subject matter.

The data in Table 12 show that the provisions made for organization and administration are good and are functioning well at the Liberty County High School.

**Patterns of relationships.**--The data concerned with the patterns of school-community relationships at the Liberty County High School are presented in Table 13, page 50. Thirteen or 87 per cent of the teachers indicated that relations between school and community are good and 2 or 13 per cent of them said excellent; 11 or 73 per cent of the respondents indicated that the relations between the home and school are good and 4 or 27 per cent of them reported excellent; 15 or 100 per cent of the respondents indicated that the relations between the principal and central administration are good; 12 or 80 per cent of the teachers felt that relations between the principal and teachers were good and 3 or 20 per cent of them reported excellent. Fourteen or 93 per cent of the teachers indicated that relations between teachers are good and 1 or 7 per cent reported them to be excellent.

Table 13 shows that there is a good relation between school and community, school and home, principal and central administration, principal and teachers and teachers.

**Counseling program.**--The data on the responses concerning the counseling program in the Liberty County High School are presented in Table 14, page 51. Fifteen or 100 per cent of the respondents
TABLE 13

DISTRIBUTION OF RESPONSES CONCERNING PATTERNS OF RELATIONSHIPS BETWEEN SCHOOL AND COMMUNITY AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factor</th>
<th>Good Per Cent</th>
<th>Excellent Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Relations between</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. School and community are:</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>b. School and homes are:</td>
<td>11</td>
<td>73</td>
<td>4</td>
<td>27</td>
</tr>
<tr>
<td>c. Principal and central administration are:</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Principal and teachers are:</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>e. Teachers are:</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
<td>Per Cent</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>-----</td>
<td>----------</td>
<td>----</td>
<td>----------</td>
</tr>
<tr>
<td>A. Is there a program of counseling?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1. Is there a trained counselor?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2. Is the counselor trained in mental health?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>B. Are services of visiting teacher available?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1. Has this person had special training for the job?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2. Are these services used to remove the causes for:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Non-attendance?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(b) Poor attendance?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(c) Behavior problems?</td>
<td>15</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
revealed that there is a program of counseling at the Liberty County High School and the counselor has training in counseling as well as in mental health.

All the respondents indicated that the services of a trained visiting teacher is available and these services are used to remove causes for non-attendance, poor attendance and behavior problems.

**Community environment.**—The data regarding the community environment of the Liberty County High School, McIntosh, Georgia are presented in Table 15, page 53. Fourteen or 93 per cent of the respondents indicated that the school promotes and stimulates interest in adequate safe water supply. Thirteen or 87 per cent of the respondents indicated yes to the question about proper sewage disposal, proper garbage disposal, insect and rodent control and other needed public health protective measures.

**Safety.**—The data concerning safety in the Liberty County High School are presented in Table 16, page 54. Eleven or 73 per cent of the teachers indicated that corridors are safe, 14 or 93 per cent of them reported that there are no projections or loose plasters; 13 or 87 per cent of the teachers indicated that the floors are in good repair and 14 or 93 per cent of the respondents indicated that non-skid wax is used on all the floors.

Table 16 further shows that 14 or 93 per cent of the respondents indicated that all doors open outward; 13 or 87 per cent of them indicated that the heating unit, and electrical circuits are checked regularly. Thirteen or 87 per cent of the teachers indicated that fire protection equipment meet community fire regulations. Eight or 53
### TABLE 15
DISTRIBUTION OF RESPONSES REGARDING THE COMMUNITY ENVIRONMENT OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Does the school promote and stimulate interest in:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Adequate safe water supply?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>2. Proper sewage disposal?</td>
<td>13</td>
<td>87</td>
<td>1</td>
<td>7</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>3. Proper garbage disposal?</td>
<td>13</td>
<td>87</td>
<td>1</td>
<td>7</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>4. Insect and rodent control?</td>
<td>13</td>
<td>87</td>
<td>1</td>
<td>7</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>5. Other needed public health protective measures?</td>
<td>13</td>
<td>87</td>
<td>1</td>
<td>7</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
<td>Per Cent</td>
<td>No Response</td>
<td>Per Cent</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
<td>----------</td>
<td>-----</td>
<td>----------</td>
<td>-------------</td>
<td>----------</td>
</tr>
<tr>
<td>A. Are corridors safe?</td>
<td>11</td>
<td>73</td>
<td>3</td>
<td>20</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>1. No projections?</td>
<td>1</td>
<td>7</td>
<td>14</td>
<td>93</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. No loose plasters?</td>
<td>1</td>
<td>7</td>
<td>14</td>
<td>93</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Floor boards in good repair?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Is non-skid wax used on all floors?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Do all doors open outward?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Is the heating unit checked regularly for unvented gases and fire hazards?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E. Is the electrical circuit checked regularly for overloading and other hazards?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F. Does the fire protection equipment meet community fire regulations?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Does playground construction meet safety standards?</td>
<td>8</td>
<td>53</td>
<td>5</td>
<td>33</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>H. Is play equipment kept in good repair?</td>
<td>10</td>
<td>67</td>
<td>3</td>
<td>20</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>I. Are hazardous materials kept off playground?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>J. Is there a teacher trained in first aid designated as supervisor of all play periods?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K. Is there a school patrol?</td>
<td>6</td>
<td>40</td>
<td>8</td>
<td>53</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>L. Do all school buses meet Department of Public Safety Standards?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Do drivers have training in driver education?</td>
<td>14</td>
<td>93</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M. Do fire escapes meet state requirements?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
per cent of them indicated that playground construction meets safety
standards, 5 or 33 per cent of the respondents said no, and 2 or 13
per cent of them gave no response to this item. Ten or 67 per cent
of the teachers indicated that play equipment is kept in good repair,
3 or 20 per cent of them said no, and 2 or 13 per cent of them gave
no response to this item; 13 or 87 per cent of the respondents in-
dicated that hazardous materials are kept off the playground and
there is a teacher trained in first aid designated to supervise play
periods.

As noted, 6 or 40 per cent of the teachers said yes to the ques-
tion: "Is there a school patrol; 8 or 53 per cent said no, and 1 or 7
per cent of them gave no response to this item. Fourteen or 93 per
cent of the respondents indicated that buses meet the Department of
Public Safety standards and drivers have training in driver education
and 1 or 7 per cent of the teachers gave no response to this item.
Finally, Table 15 indicates that the fire escapes meet state require-
ments as indicated by 12 or 80 per cent of the respondents, and 3 or
20 per cent said no to this item.

Health service.—Table 17, page 56, presents the data on the health
services at the Liberty County High School. All or 100 per cent of
the teachers indicated that there is a Department of Public Health in
Liberty County; 12 or 80 per cent indicated that teachers and public
health nurses participate in teacher-nurse conferences; 9 or 60 per
cent of the teachers indicated that teachers do periodic "teacher
observation" of children, school receives reports of the public health
officer and 4 or 27 per cent of the teachers said no, and 2 or 13 per
### TABLE 17

**DISTRIBUTION OF RESPONSES REGARDING HEALTH SERVICES AT THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is there a Department of Public Health in your county?</td>
<td>15</td>
<td></td>
<td>100</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Do teachers and public health nurse participate in teacher-nurse conference when public health nurse visits school?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do teachers do periodic &quot;teacher observations&quot; of children?</td>
<td>9</td>
<td>60</td>
<td>4</td>
<td>27</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>4. Does the school receive reports of the visits of health officer?</td>
<td>9</td>
<td>60</td>
<td>4</td>
<td>27</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>a. Report of visits of other public health personnel?</td>
<td>8</td>
<td>53</td>
<td>7</td>
<td>47</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Is a health examination, including chest x-ray, required of all school personnel before employment?</td>
<td>15</td>
<td></td>
<td>100</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Is there a program for health of school employees?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Do employees earn sick leave?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Is provision made for employee health insurance?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
per cent of them gave no response to these items. Eight or 53 per cent of the teachers indicated that the school receives reports from other public health personnel, 7 or 47 per cent of them said no to this item.

Table 17 further indicates that 15 or 100 per cent of the teachers indicated that health examinations, including x-ray is required of all school personnel before employment. Concerning the program of health for employees in the Liberty County High School, 13 or 87 per cent of the teachers indicated that there is a program and 2 or 13 per cent said no; 14 or 93 per cent of the teachers indicated that employees earn sick leave, 1 or 7 per cent said no and 13 or 87 per cent of them indicated that provisions are made for employee health insurance and none said no to this item.

First Aid.--Regarding first aid at the Liberty County High School, Table 18, page 58, indicates the facts which follow.

Fourteen or 93 per cent of the teachers indicated that there is a health suite, a first aid cabinet; the cabinet is easily accessible in time of accident; 1 or 7 per cent of them said no and 1 or 7 per cent of them gave no response to these items.

Table 18 further shows that contents in first aid cabinet are checked weekly and refilled if needed as reported by 13 or 87 per cent of the respondents. All or 100 per cent of the teachers indicated that someone is trained in first aid designated to be called for all serious accidents. Eight or 53 per cent of the teachers indicated that all teachers are trained in first aid; whereas, 7 or 47 per cent of them indicated they were not.
<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is there a health suite?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is there a first aid cabinet?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Is this cabinet easily accessible in time of accident?</td>
<td>14</td>
<td>93</td>
<td></td>
<td></td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>b. Do you check contents weekly and refill if needed?</td>
<td>13</td>
<td>87</td>
<td>1</td>
<td>7</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>c. Is someone trained in first aid designated to be called for all</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>serious accidents?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are all teachers trained in first aid?</td>
<td>8</td>
<td>53</td>
<td>7</td>
<td>47</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Plans for sick children?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Do you isolate sick children?</td>
<td>10</td>
<td>67</td>
<td>3</td>
<td>20</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>b. Do you have plans for transporting them to:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) home?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) hospital?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) doctor?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In regards to plans for sick children at the Liberty County High School, 10 or 67 per cent of the teachers indicated that sick children are isolated, 3 or 20 per cent said no, and 2 or 13 per cent gave no response to this item. Fifteen or 100 per cent of the teachers reported that plans are made for transporting them home, to the hospital and to the doctor.

Physical education and recreation.--The data regarding physical education and recreation in the Liberty County High School as presented in Table 19, page 60, are analyzed below.

Eleven or 73 per cent of the teachers indicated that there is a program of recreation for all pupils, 4 or 27 per cent said no to this item, 14 or 93 per cent of the respondents indicated that physical education is coordinated with the total school health program, and 7 or 47 per cent of the teachers indicated that the size of classes are in keeping with that of other high school classes, 8 or 53 per cent of them said no to this item; 15 or 100 per cent of the respondents indicated that classes are taught by well trained teachers in physical education and this promotion provides opportunity for normal growth through a wide range of activities.

All or 100 per cent of the respondents indicated that the program provides for rhythmic fundamentals, co-educational and co-recreational activities. The data also showed that camping, hiking, outing, music, dramatics and remedial and adapted sports are not a part of the program at Liberty County High. All of the students dress properly for all activities and take showers following activities.

Facilities and equipment.—The data in Table 20, page 62 reveal
**TABLE 19**

**DISTRIBUTION OF RESPONSES CONCERNING THE INSTRUCTIONAL PROGRAM OF PHYSICAL EDUCATION AND RECREATION OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Is the State Law regarding physical education complied with?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. In High School:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is there a program of recreation for all pupils?</td>
<td>11</td>
<td>73</td>
<td>4</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is physical education coordinated with the total school health pro-</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>gram?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is the size of classes in keeping with that of other high school</td>
<td>7</td>
<td>47</td>
<td>8</td>
<td>53</td>
<td></td>
<td></td>
</tr>
<tr>
<td>classes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are classes taught by teachers well trained in total school health</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>pro-gram with special emphasis in physical education?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Does this promotion provide opportunity for the promotion of normal</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>growth through a wide range of activities including free and individual</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>play, sports and games and intramural and interscholastic contests?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
<td>Per Cent</td>
<td>No Response</td>
<td>Per Cent</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
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<td>----</td>
<td>----------</td>
<td>-------------</td>
<td>----------</td>
</tr>
<tr>
<td>6. Does the program provide activities including:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Rythmic fundamental?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Co-educational and co-recreational?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Camping, hiking and outing?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Music (singing, piano, etc.)?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Dramatics, hobbies</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Remedial and adapted spots?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Are students properly dressed for all activities?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Do students take showers following activities?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**TABLE 20**

**DISTRIBUTION OF RESPONSES REGARDING FACILITIES AND EQUIPMENT IN THE INSTRUCTIONAL PROGRAM OF PHYSICAL EDUCATION IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does your school have a gymnasium?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is there one piece of play material per 8 children?</td>
<td>4</td>
<td>27</td>
<td>11</td>
<td>73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Does your school have a locker room which provides:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A locker for each child participating in physical education program?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Adequate shower facilities for physical education classes?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Adequate toilet facilities?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Does your school have equipment for weighing and measuring pupils?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Does your school have adequate improved play space?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
that all or 100 per cent of the respondents indicated that there is a
bymnasium, a locker room that provides a locker for each child par-
ticipating in physical education, adequate shower facilities, adequate
toilet facilities, equipment and adequate improved play space. How-
ever, 4 or 27 per cent of the teachers indicated that there is one
piece of play material per 8 children, 11 or 73 per cent of the
teachers said no to this item.

Health instruction.--The data in Table 21, page 64, show that
all responses indicated that health instruction is integrated into
the teaching of all subjects in the Liberty County High School.

Health program instructor.--In Table 22, page 65, the data
reveal that 15 or 100 per cent of the respondents indicated that
instruction is given in the facts concerning the effects of alcohol
on the body, behavior of the individual, economic conditions, family
relations, and civic responsibilities in the Liberty County High Sch-
ool. The data further indicated that teachers are trained in alcohol
education and that driver education is approved by the State Depart-
ment of Education.

The data further show that 11 or 93 per cent indicated that
instruction in safety measures is included in the total health pro-
gram. Twelve or 80 per cent indicated that records of accidents
are kept, 3 or 20 per cent of them answered no to this item; 7 or
47 per cent of them indicated that fire drills are held as part of
safety instruction, 8 or 47 per cent said no to this item. Fifteen
or 100 per cent of the respondents indicated that buildings and grounds
are checked regularly for safety hazards as part of the instruction
TABLE 21

DISTRIBUTION OF RESPONSES IN RELATION TO THE INTEGRATION OF HEALTH INSTRUCTION IN OTHER SUBJECT AREAS IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes Per Cent</th>
<th>No Per Cent</th>
<th>No Response Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is health instruction integrated into the teaching of all subjects in:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. High school?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>(1) Check subjects:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemistry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Science</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homemaking</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agriculture</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Math</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Studies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Military</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Music</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Art</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
</tr>
<tr>
<td>---------</td>
<td>-----</td>
<td>----------</td>
<td>----</td>
</tr>
<tr>
<td>1. Is instruction given in the facts concerning the effects of alcohol on:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The body?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>b. Behavior of the individual?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>c. Economic conditions?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>d. Family relations?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>e. Civic responsibilities?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>2. Are teachers trained in alcohol education?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>3. Is driver education approved by the State Department of Education?</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>4. Is instruction in safety measures included in the total school health program?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Are records of accidents kept, giving location, cause, and extent of injury?</td>
<td>14</td>
<td>93</td>
<td>1</td>
</tr>
<tr>
<td>b. Are fire drills held as part of safety instruction?</td>
<td>12</td>
<td>80</td>
<td>3</td>
</tr>
<tr>
<td>c. Are buildings and grounds checked regularly for safety hazards as part of instruction programs?</td>
<td>7</td>
<td>4'</td>
<td>8</td>
</tr>
<tr>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
program.

Schedule and activities.--Table 23, page 67, shows that 15 or 100 per cent of the teachers indicated that a definite period is set aside for health instruction in the high school and this meets the requirement of one unit of health as outlined in Curriculum Framework for Georgia Schools. This instruction is based upon the needs, interest and abilities of students. Fourteen or 93 per cent of the teachers indicated that mental health is included; 12 or 80 per cent of them indicated that dental health is included; 12 or 80 per cent of the teachers indicated that instruction in first aid is planned as part of the total school health program. Fifteen or 100 per cent of them indicated that materials other than textbooks are used in the instruction program in the Liberty County High School.

Program of activities in health.--The data concerning health teaching through activities in the Liberty County High School are presented in Table 24, page 68. Fifteen or 100 per cent of the respondents indicated that health instruction is carried on through a variety of activities such as trips to the Health Department, hospitals and water works; through radio programs received at school, lectures, assembly programs, medical examinations, immunizations, weighing and measuring, dental examinations, hearing test, vision and cumulative records.

Table 24 further indicates that health teaching is done through the school lunch program, morning inspection, teaching pupils to drive a car, safety at school, home community and through fire drills and use of fire extinguishers; having pupils assume the responsibility for
TABLE 23
DISTRIBUTION OF RESPONSES RELATIVE TO THE HEALTH INSTRUCTION PROGRAM
IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA,
1965-1966

<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is a definite period set aside for health instruction in:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. In high school?</td>
<td>15</td>
<td>100</td>
<td>10</td>
<td>100</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>(1) Does this meet requirement of one unit of health instruction as</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>outlined in Curriculum Framework for Georgia Schools and in the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Georgia School Health Guide?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Is this instruction in high school based upon the needs, interests</td>
<td>15</td>
<td>100</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and abilities of students?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Is instruction in mental health included?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Is instruction in dental health included?</td>
<td>12</td>
<td>80</td>
<td>2</td>
<td>13</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>e. Is instruction in first aid given to all students?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is the health instruction program planned as part of the total school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>health program?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are materials other than textbooks used?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 24
DISTRIBUTION OF RESPONSES REGARDING THE PROGRAM OF ACTIVITIES IN HEALTH
IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

1. Check the appropriate blank space(s) for any health teaching done through such activities as:

(a) trips to dairies market bakery water works grocery store fire department Health Department hospitals

(b) radio programs received at school special lectures assembly programs on health helping in community clean-up campaigns medical examinations immunizations weighing and measuring children dental examinations testing hearing testing vision using the cumulative health records

(c) school lunchroom program morning inspection teaching high school pupils how to drive a car safety at home safety at school safety in community fire drills use of fire extinguishers

(d) laboratory experiments making a study of what children are eating nutritional experiments with white rats

(e) having children assume the responsibility for regulating heating and ventilation to maintain temperature 68 to 70 degrees having pupils adjust curtains and lights for best lighting effects

(f) play activities of children having children keep grounds and buildings clean and attractive planting of vegetable gardens at home at school
regulating heating and ventilation; and having children keep grounds and buildings clean and attractive.

Health teaching for attitudes and habits.—The data regarding emphasis on health teaching for attitudes and habits in the Liberty County High School are presented in Table 25, page 70. Fourteen or 93 per cent of the respondents indicated that emphasis on health teaching is directed to the formation of intelligent behavior and proper attitudes rather than knowledge for knowledge's sake, as evidenced by the pupils; selecting adequate and balanced diet, when choices can be made at school and elsewhere; eating regularly and properly; drinking plenty of water daily; visiting dentist twice yearly. Eleven or 73 per cent of the teachers indicated yes to the question of brushing teeth properly before meals and 4 or 27 per cent said no to this item. Fifteen or 100 per cent of the teachers indicated that health teaching is directed toward keeping clean and well groomed, 14 or 93 per cent indicated the practicing of proper toilet habits, 12 or 80 per cent of them indicated yes to washing and drying hands before meals and after visits to toilets; whereas, 3 or 20 per cent of the teachers indicated no to these items.

Table 25 further shows that 15 or 100 per cent of the teachers indicated that emphasis is placed on playing outdoors when the weather is good; working, resting and relaxing at proper periods; practicing good posture habits; taking care of eyes; remaining at home when ill; keeping classrooms and other parts of buildings and grounds clean and attractive; showing interest in growth; wearing and caring for proper
<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes</th>
<th>Per Cent</th>
<th>No</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is emphasis of health teaching directed to the formation of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>intelligent behavior and proper attitudes rather than</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>knowledge for knowledge's sake, as evidenced by pupils, in such as:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Selecting adequate and balanced diet when choices can be made at</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>school and elsewhere?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Eating regularly and properly?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Drinking plenty of water daily?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Visiting dentist twice yearly and at other times when needed?</td>
<td>14</td>
<td>93</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Brushing teeth properly before breakfast and after each meal?</td>
<td>11</td>
<td>73</td>
<td>4</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Keeping clean and well groomed?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Practicing proper toilet habits?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Washing and drying hands with paper towels before meals?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) After visits to toilet?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Playing outdoors except during inclement weather?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Working, resting and relaxing at proper periods and getting the</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>proper amount of sleep?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factors</td>
<td>Yes</td>
<td>Per Cent</td>
<td>No</td>
<td>Per Cent</td>
<td>No Response</td>
<td>Per Cent</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
<td>----------</td>
<td>----</td>
<td>----------</td>
<td>-------------</td>
<td>----------</td>
</tr>
<tr>
<td>k. Practicing good posture habits?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. Taking proper care of eyes, ears, and teeth?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m. Remaining at home when attacked by colds or other communicable diseases?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>n. Helping to keep classrooms and other parts of buildings and grounds clean and attractive?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>o. Participating in monthly fire drills?</td>
<td>6</td>
<td>40</td>
<td>9</td>
<td>60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>p. Showing interest in growth and reasons for it?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>q. Working together cooperatively and being kind and thoughtful?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>r. Having knowledge of and wearing and caring for proper clothing?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>s. Knowing how and properly caring for sick in the home?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>t. Knowing how and administering first aid properly?</td>
<td>15</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>u. Seeking scientific medical advice of unqualified persons?</td>
<td>12</td>
<td>80</td>
<td>3</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>v. Influencing in homes:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Screening?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providing better toilet facilities?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Better health habits of other members of the family?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improving water supply?</td>
<td>14</td>
<td>93</td>
<td>1</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helping to make home more attractive?</td>
<td>13</td>
<td>87</td>
<td>2</td>
<td>13</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
clothing; knowing and administering first aid. Six or 40 per cent of the teachers indicated the practices in participating in monthly fire drills; and 9 or 60 per cent of the teachers indicated no to this item.

It may be noted that 12 or 80 per cent of the teachers indicated the practice of working together cooperatively and being kind and thoughtful; seeking scientific medical advice of unqualified persons; 13 or 87 per cent of them indicated the practice of knowing how and caring for the sick. It may be further noted that 13 or 87 per cent of them indicated the practices influencing health and sanitation in homes, screening; 2 or 13 per cent of them indicated no to this item. Fourteen or 93 per cent of the teachers indicated that emphasis is being directed to providing better toilet facilities, better health habits of other members of the family and improving water supply. It may be noted that 1 or 7 per cent of the respondents indicated no to these items.

Special education. -- The data regarding special education in the Liberty County High School is presented in Table 26, page 73. Fifteen or 100 per cent of the teachers indicated that there is no program provided for exceptional children and that all aspects of the program are needed at the Liberty County High School.

Health Behavior Inventory Test

The second section of this research study presents data derived from the scores on the Health Behavior Inventory Test which includes practices, attitudes and knowledge as obtained by the sixty eighth
<table>
<thead>
<tr>
<th>Factors</th>
<th>Yes Per Cent</th>
<th>No Per Cent</th>
<th>No Response Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the school provide a program for exceptional children (mentally gifted, mentally retarded, with physical defects, emotionally disturbed or socially maladjusted)?</td>
<td></td>
<td>15 100</td>
<td></td>
</tr>
<tr>
<td>a. Which programs are included?</td>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is a program of Special Education approved by the State Department of Education?</td>
<td></td>
<td>15 100</td>
<td></td>
</tr>
<tr>
<td>a. Which aspects of the programs are needed?</td>
<td>All</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
grade boys and girls of the Liberty County High School, McIntosh, Georgia, 1965-1966, are presented in Tables 27 through 49.

Result on Health Behavior Inventory Test (Usually)

The data on the results of the Health Behavior Inventory Test as obtained from the scores for the 30 eighth grade boys and 30 eighth grade girls enrolled in the Liberty County High School, McIntosh, Georgia, are presented in Table 27, page 75.

Eighth grade boys.--The scores on the Health Behavior Inventory practices ranged from a low of 1 to a high of 11 with a mean of 4.93, a median of 4.5, a standard deviation of 2.67, a standard error of the mean .49. Table 29 further shows 12 or 40 per cent scored above the mean, 15 or 50 per cent below the mean and 3 or 10 per cent within the mean class-interval.

Eighth grade girls.--The scores on the Health Behavior Inventory (practices) ranged from a low of 1 to a high of 12; with a mean of 5.67, a median of 5.5, a standard deviation of 3.15, a standard error of the mean of .58. Table 29 further shows that 11 or 37 per cent scored above the mean, 15 or 50 per cent scored below the mean and 4 or 13 per cent scored within the class-interval.

Comparative data and "t" ratio.--Table 28, page 76, presents the comparative data for the two groups on the practical component of the Health Behavior Inventory (usually). The data revealed that for the eighth grade boys the mean was 4.93 and 5.67 for the eighth grade girls with a difference of 1.74 in favor of the girls. The median for the eighth grade boys was 4.5 and for the eighth grade girls 5.5 with a
TABLE 27

DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY (USUALLY) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys Number</th>
<th>Boys Per Cent</th>
<th>Girls Number</th>
<th>Girls Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.5-12.5</td>
<td>0</td>
<td>0.00</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>10.5-11.5</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>9.5-10.5</td>
<td>1</td>
<td>3.33</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>8.5-9.5</td>
<td>2</td>
<td>6.67</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>7.5-8.5</td>
<td>1</td>
<td>3.33</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>6.5-7.5</td>
<td>3</td>
<td>10.00</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>5.5-6.5</td>
<td>4</td>
<td>13.33</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>4.5-5.5</td>
<td>3</td>
<td>10.00</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>3.5-4.5</td>
<td>5</td>
<td>16.67</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>2.5-3.5</td>
<td>4</td>
<td>13.33</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>1.5-2.5</td>
<td>3</td>
<td>10.00</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>0.5-1.5</td>
<td>3</td>
<td>10.00</td>
<td>2</td>
<td>6.67</td>
</tr>
</tbody>
</table>

Total 30 99.99 30 99.99

Mean 4.93 5.67
Median 4.5 5.5
Sigma (SD) 2.67 3.15
SEₙ 0.49 0.58
TABLE 28

SIGNIFICANT DIFFERENCES BETWEEN SCORES ON HEALTH BEHAVIOR INVENTORY TEST (USUALLY) OF THIRTY EIGHT GRADE BOYS AND THIRTY EIGHT GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>S.E. of Difference</th>
<th>Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>4.93</td>
<td>4.5</td>
<td>2.66</td>
<td>.49</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.74</td>
<td>.75</td>
</tr>
<tr>
<td>Girls</td>
<td>5.67</td>
<td>5.5</td>
<td>3.15</td>
<td>.58</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The difference of 1.0 in favor of the girls. For the eighth grade boys the sigma was 2.66 while the eighth grade girls was 3.15 with a difference being .49 in favor of the girls. For the eighth grade boys the standard error of the mean was .49 and for the eighth grade girls .58 with a difference of .09 in favor of the girls. The standard error of the difference between the two means was .75.

The "t" of 2.23 was not significant for it was less than 2.58 at the .01 per cent level of confidence for 58 degrees of freedom. Therefore, the difference on the component of Behavior Inventory (usually) for the eighth grade boys and eighth grade girls was not statistically significant.

Results on the Health Behavior Inventory Test (Sometimes)

The data on the results of the Health Behavior Inventory (sometimes) as obtained from scores for the 60 eighth grade subjects which were divided into two groups, 30 boys and thirty girls enrolled in the
Liberty County High School, McIntosh, Georgia, 1965-1966 are presented in Table 29.

**TABLE 29**

**DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY (SOMETIMES) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
</tr>
<tr>
<td>1.5-2</td>
<td>11</td>
<td>36.67</td>
</tr>
<tr>
<td>1-1.5</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>.5-1</td>
<td>0</td>
<td>00.00</td>
</tr>
<tr>
<td>0-.5</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>30 100.00</td>
</tr>
<tr>
<td>Mean</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Median</td>
<td>1.3</td>
<td>1.15</td>
</tr>
<tr>
<td>Sigma (SD)</td>
<td>.6</td>
<td>.48</td>
</tr>
<tr>
<td>SEM</td>
<td>.11</td>
<td>.07</td>
</tr>
</tbody>
</table>

**Eighth grade boys.**--The scores on the Health Behavior Inventory Test (practices), range from a low of 0 to a high of 2; with a mean of 1, a median of 1.3, a standard deviation of .6 and a standard error of the mean .11. Table 28 further indicates that 11 or 36 per cent scored above the mean, 7 or 23 per cent scored below the mean and 12
Eighth grade girls.--The scores on the Health Behavior Inventory Test (practices) range from a low of 0 to a high of 2; with a mean of .95, a median of 1.15, a standard deviation of .18, a standard error of the mean of .07. Table 28 further indicates that 10 or 33 per cent scored above the mean, 8 or 26 per cent scored below the mean and 12 or 40 per cent scored within the mean class-interval.

Comparative data and "t" ratio.--Table 30, page 79, presents the comparative data for the 60 subjects; eighth grade boys and girls on the practice component of the Health Behavior Inventory Test (sometimes). The data revealed that for the boys, the mean was 1 and .95 for the girls, with a difference of .05 in favor of the boys. The median score for boys was 1.3 and 1.15 for the girls, with a difference of .15 in favor of the boys. The standard deviation for the boys was .6 and .18 for the girls with a difference of .12 in favor of the boys. For the boys, the standard error of the mean was .11 and for the girls .07 with a difference of .04 in favor of the boys. The standard error of the difference between the two means was .13.

The "t" on .38 was not significant for it was less than 2.58 at the .01 per cent level of confidence, with 58 degrees of freedom. Therefore, the difference on the component of practices (sometimes) of the Health Behavior Inventory Test for the groups of eighth grade boys and girls was not statistically significant.

Results on Health Behavior Inventory (Never)

The data on the results of the Health Behavior Inventory (practices)
TABLE 30

SIGNIFICANT DIFFERENCE BETWEEN SCORES ON THE HEALTH BEHAVIOR INVENTORY TEST (SOMETIMES) OF THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE</th>
<th>M - M</th>
<th>S.E. of Difference Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>1.3</td>
<td>1.1</td>
<td>.6</td>
<td>.11</td>
<td>.05</td>
<td>.13</td>
<td>.38</td>
</tr>
<tr>
<td>Girls</td>
<td>.95</td>
<td>1.15</td>
<td>.48</td>
<td>.07</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

as obtained from scores for the two groups of eighth grade pupils enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966 are presented in Table 31, page 80.

Eighth grade boys.--The scores on the Health Behavior Inventory Test (never) range from a low of 1 to a high of 6; with a mean of 3.67, a median of 3.5, a standard deviation of 1.6 and a standard error of the mean of .3. Table 32 further reveals that 21 or 70 per cent scored above the mean and 2 or 6 per cent scored below the mean and 7 or 23 per cent scored within the mean class-interval.

Eighth grade girls.--The scores on the Health Behavior Inventory Test (never) ranged from a low of 1 to a high of 7; with a mean of 3.67, a median of 3.39, a standard deviation of 1.8 and a standard error of the mean of .34. Table 32 further reveals that 14 or 47 per cent scored above the mean, 7 or 23 per cent scored below the mean and 9 or 30 per cent scored within the mean class-interval.
TABLE 31

DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY
(NEVER) AS OBTAINED BY THE THIRTY-EIGHTH GRADE BOYS
AND THIRTY-EIGHTH GRADE GIRLS OF THE LIBERTY
COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA,
1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
</tr>
<tr>
<td>6.5 - 7.5</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>5.5 - 6.5</td>
<td>5</td>
<td>16.67</td>
</tr>
<tr>
<td>4.5 - 5.5</td>
<td>6</td>
<td>20.00</td>
</tr>
<tr>
<td>3.5 - 4.5</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>2.5 - 3.5</td>
<td>6</td>
<td>20.00</td>
</tr>
<tr>
<td>1.5 - 2.5</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>1.5 - 2.5</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100.00</td>
</tr>
</tbody>
</table>

Mean | 3.67 | 3.67 |
Median | 3.5 | 3.39 |
Sigma (SD) | 1.6 | 1.8 |
$SE_m$ | .3 | .34 |

Comparative data and "t" ratios.—Table 32, page 61, presents the comparative data for the two groups of eighth grade boys and girls on the Health Behavior Inventory component (never). The data indicated that for the eighth grade boys the mean was 3.67 and 3.67 for the girls with a difference of 0, the median for boys was 3.5 and 3.39 for girls, with a difference of .11 in favor of the boys. The standard deviation for the boys was 1.6 and 1.8 for girls with
TABLE 32

SIGNIFICANT DIFFERENCE BETWEEN SCORES ON HEALTH BEHAVIOR INVENTORY TEST (NEVER) OF THIRTY EIGHTH GRADE BOYS AND THIRTY GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SEM</th>
<th>M1 - M2</th>
<th>Diff.</th>
<th>S.E. of Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>3.67</td>
<td>3.5</td>
<td>1.6</td>
<td>.3</td>
<td>0</td>
<td>.33</td>
<td>.314</td>
<td></td>
</tr>
<tr>
<td>Girls</td>
<td>3.67</td>
<td>3.39</td>
<td>1.8</td>
<td>.34</td>
<td>0</td>
<td>.33</td>
<td>.314</td>
<td></td>
</tr>
</tbody>
</table>

a difference of 2 in favor of girls. The standard error of the mean for boys was .3 and .34 for girls. The standard error of the difference between the two means was .33.

The "t" of 0 was not significant for it was less than 2.58 at the .01 per cent level of confidence for 58 degrees of freedom. Therefore, the difference on the component (never) for the two groups of eighth grade pupils was not statistically significant.

Results on Health Behavior Inventory (Agree)

The data on the results of the Health Behavior Inventory (agree) Test as obtained from raw scores of 30 eighth grade boys and 30 eighth grade girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966, are presented in Table 33, page 82.

Eighth grade boys.—The scores on the Health Behavior Inventory (agree) ranged from a low of 5 to a high of 10; with a mean of 7.34, a median of 8.625, a standard deviation of 1.49 and a standard error
TABLE 33  
DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY  
(AGREE) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND  
THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY  
HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966  

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys Number</th>
<th>Boys Per Cent</th>
<th>Girls Number</th>
<th>Girls Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.5 - 10.5</td>
<td>8</td>
<td>26.66</td>
<td>12</td>
<td>40.00</td>
</tr>
<tr>
<td>8.5 - 9.5</td>
<td>8</td>
<td>26.66</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>7.5 - 8.5</td>
<td>6</td>
<td>20.00</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>6.5 - 7.5</td>
<td>4</td>
<td>13.33</td>
<td>6</td>
<td>20.00</td>
</tr>
<tr>
<td>5.5 - 6.5</td>
<td>2</td>
<td>6.66</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>4.5 - 5.5</td>
<td>2</td>
<td>6.66</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td><strong>99.97</strong></td>
<td><strong>30</strong></td>
<td><strong>99.99</strong></td>
</tr>
</tbody>
</table>

**Mean**: 7.334  
**Median**: 8.625  
**Sigma (SD)**: 1.42  
**SE of mean**: .28  

of the mean of .28. Table 33 shows that 8 or 27 per cent scored above the mean and 14 or 46 per cent scored below the mean and 8 or 27 per cent scored within the mean class-interval.

**Eighth grade girls.**--The score on the Health Behavior Inventory (agree) ranged from a low of 4 to a high of 10 with a mean of 8.97, a median of 9.07, a standard deviation of 1.23 and a standard error of .23. Table 33 further shows that 12 or 40 per cent scored above the mean; 11 or 37 per cent scored below the mean and 7 or 23 per cent.
scored within the mean class-interval.

Comparative data on the "t" ratio.—Table 34, page 84, presents the comparative data for the two eighth grade groups on the Health Behavior Inventory (agree). The data revealed that for the eighth grade boys the mean was 7.33, and 8.97 for the girls with a difference of 1.64 in favor of the girls. The median score for the boys was 8.625 and 9.07 for the girls with a difference of .45 in favor of the girls. For the boys the standard deviation was 1.49 and 1.23 for the girls with a difference of .26 in favor of the boys. For the boys the standard error of the mean was .28 and for the girls it was .23 showing a difference of .05 in favor of the boys. The standard error of the difference between the two means was .36.

The "t" was found to be 4.6, with 58 degrees of freedom, as in this case, "t" must be 2.58 or greater to be significant at the .01 per cent level of confidence for 58 degrees of freedom. Therefore, the computed "t" value of 4.6 on agree was statistically significant at the .01 per cent level of confidence.

Results on Health Behavior Inventory (Uncertain)

The data on the result of the Health Behavior Inventory (uncertain) as obtained from the scores for the 30 eighth grade boys and 30 eighth grade girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966 are presented in Table 35, page 85.

Eighth grade boys.—The scores on the Health Behavior Inventory (attitudes) ranged from a low of 1 to a high of 13 with a mean of 3.63,
TABLE 34


<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>$SE_m$</th>
<th>$M_1-M_2$</th>
<th>Difference Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>7.33</td>
<td>8.62</td>
<td>1.49</td>
<td>.26</td>
<td>1.64</td>
<td>.36</td>
<td>4.6</td>
</tr>
<tr>
<td>Girls</td>
<td>8.97</td>
<td>9.07</td>
<td>1.23</td>
<td>.23</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a median of 4.17, a standard deviation of 2.1, a standard error of the mean of .39. Table 35 further shows that 11 or 1.7 per cent scored above the mean, 13 or 4.3 per cent scored below the mean and 3 or 10 per cent within the mean class-interval.

Eighth grade girls.--The scores on the Health Behavior Inventory (attitudes) ranged from a low of 1 to a high of 9 with a mean of 3.4, a median of 2.17, a standard deviation of 2.6, a standard error of the mean of .48. Table 35 shows further that 11 or 3.7 per cent scored above the mean, 17 or 5.7 per cent scored below the mean and 2 or 6 per cent within the mean or class-interval.

Comparative data and "t" ratio.--Table 36, page 86, presents the comparative data for the attitude component of the Health Behavior Inventory (uncertain). The data revealed that the eighth grade boys mean was 3.63 and 3.44 for the girls with a difference of .23 in favor of the boys. The median for the eighth grade boys was 4.17 and 2.17
TABLE 35

DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY (UNCERTAIN) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys Number</th>
<th>Per Cent</th>
<th>Girls Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. - 13.5</td>
<td>1</td>
<td>3.33</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>11.5 - 12.5</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>10.5 - 11.5</td>
<td>1</td>
<td>3.33</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>9.5 - 10.5</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>8.5 - 9.5</td>
<td>0</td>
<td>0.00</td>
<td>2</td>
<td>6.66</td>
</tr>
<tr>
<td>7.5 - 8.5</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>6.5 - 7.5</td>
<td>2</td>
<td>6.66</td>
<td>2</td>
<td>6.66</td>
</tr>
<tr>
<td>5.5 - 6.5</td>
<td>3</td>
<td>10.00</td>
<td>2</td>
<td>6.66</td>
</tr>
<tr>
<td>4.5 - 5.5</td>
<td>6</td>
<td>20.00</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>3.5 - 4.5</td>
<td>3</td>
<td>10.00</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>2.5 - 3.5</td>
<td>2</td>
<td>6.66</td>
<td>2</td>
<td>6.66</td>
</tr>
<tr>
<td>1.5 - 2.5</td>
<td>1</td>
<td>3.33</td>
<td>6</td>
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<tr>
<td>&lt; 1.5</td>
<td>10</td>
<td>33.33</td>
<td>11</td>
<td>36.66</td>
</tr>
</tbody>
</table>

Total 30 99.97 30 99.96

Mean 3.63 3.4
Median 4.17 2.17
Sigma (SD) 2.1 2.6
SE 0.39 0.48

for the girls with a difference of 2.00 in favor of the boys. The
TABLE 36

SIGNIFICANT DIFFERENCE BETWEEN SCORES ON THE HEALTH BEHAVIOR INVENTORY TEST (UNCERTAIN) OF THIRTY EIGHTH GRADE BOYS AND THIRTY GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>( SE_m )</th>
<th>( M_1 - M_2 )</th>
<th>S. E. of Difference Mean</th>
<th>( t )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>3.63</td>
<td>4.17</td>
<td>2.1</td>
<td>.39</td>
<td>.23</td>
<td>.62</td>
<td>.37</td>
</tr>
<tr>
<td>Girls</td>
<td>3.4</td>
<td>2.17</td>
<td>2.6</td>
<td>.48</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

sigma for the boys was 2.1 while the girls scored 2.6 with a difference of .5 in favor of the girls. The standard error of the mean was .39 for the boys and .48 for the girls with a difference of .09 in favor of the girls. The standard error of the difference between the two means was .62.

The "\( t \)" of .37 was not significant for it was less than 2.58 at the .01 per cent level of confidence with 58 degrees of freedom. Therefore, the difference on the component of (uncertain) for the eighth grade boys and girls was not statistically significant.

Results on Health Behavior Inventory (Disagree)

The data on the results of the Health Behavior Inventory (Disagree) as obtained from the scores for the 30 eighth grade boys and 30 eighth grade girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966 are presented in Table 37, page 87.

Eighth grade boys.—The scores on the Health Behavior Inventory
TABLE 37

DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY (DISAGREE) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys</th>
<th></th>
<th></th>
<th>Girls</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per Cent</td>
<td></td>
<td>Number</td>
<td>Per Cent</td>
</tr>
<tr>
<td>12.5 - 13.5</td>
<td>2</td>
<td>6.66</td>
<td>3</td>
<td>10.00</td>
<td></td>
</tr>
<tr>
<td>11.5 - 12.5</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>10.5 - 11.5</td>
<td>0</td>
<td>0.00</td>
<td>6</td>
<td>20.00</td>
<td></td>
</tr>
<tr>
<td>9.5 - 10.5</td>
<td>3</td>
<td>10.00</td>
<td>2</td>
<td>6.66</td>
<td></td>
</tr>
<tr>
<td>8.5 - 9.5</td>
<td>4</td>
<td>13.33</td>
<td>3</td>
<td>10.00</td>
<td></td>
</tr>
<tr>
<td>7.5 - 8.5</td>
<td>4</td>
<td>13.33</td>
<td>3</td>
<td>10.00</td>
<td></td>
</tr>
<tr>
<td>6.5 - 7.5</td>
<td>8</td>
<td>26.66</td>
<td>5</td>
<td>16.66</td>
<td></td>
</tr>
<tr>
<td>5.5 - 6.5</td>
<td>3</td>
<td>10.00</td>
<td>4</td>
<td>13.33</td>
<td></td>
</tr>
<tr>
<td>4.5 - 5.5</td>
<td>2</td>
<td>6.66</td>
<td>1</td>
<td>3.33</td>
<td></td>
</tr>
<tr>
<td>3.5 - 4.5</td>
<td>1</td>
<td>3.33</td>
<td>3</td>
<td>10.00</td>
<td></td>
</tr>
<tr>
<td>2.5 - 3.5</td>
<td>1</td>
<td>3.33</td>
<td>0</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>1.5 - 2.5</td>
<td>2</td>
<td>6.66</td>
<td>0</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>99.96</td>
<td>30</td>
<td>99.98</td>
<td></td>
</tr>
</tbody>
</table>

Mean | 6.7 | 8.4 |
Median | 7.25 | 8.17 |
Sigma (SD) | 2.5 | 2.8 |
SE_m | .46 | .52 |

(Disagree) ranged from a low of 2 to a high of 13; with a mean of 6.7,
a median of 7.25, a standard deviation of 2.5, a standard error of
the mean of .46. Table 37 further shows that 13 or 43 per cent
scored above the mean, 9 or 30 per cent scored below the mean and 8
or 27 per cent scored within the mean class-interval.

**Eighth grade girls.**—The scores on the Health Behavior Inventory
(sometimes) ranged from a low of 4 to a high of 13; with a mean of
8.4, a standard deviation of 2.8 and a standard error of the mean of
.52. Table 37 further reveals that 17 or 57 per cent scored above
the mean, 8 or 27 per cent scored below the mean and 5 or 16 per cent
scored within the mean class-interval.

**Comparative data and "t" ratio.**—Table 38, page 89, presents
the comparative data for the eighth grade boys and girls on the
Health Behavior Inventory component (Disagree). The data revealed
that for the eighth grade boys the mean was 6.7 and 8.4 for the girls
with a difference of 1.7 in favor of the girls. The median score for
the boys was 7.25 and 8.17 with a difference of .92 in favor of the
girls. The standard deviation for the boys was 2.5 and 2.8 for the
girls with a difference of .3 in favor of the girls. For the boys
the standard error of the mean was .46 and for the girls it was .52
showing a difference of .06 in favor of the girls. The standard
error of the difference between the two means was .69.

The "t" of 2.5 was significant for it was approximately equal to
2.58 at the .01 per cent level of confidence for 58 degrees of freedom.
Therefore, the difference on the component on Health Behavior Inventory
(Disagree) for the eighth grade boys and girls was statistically signi-
cificant.
TABLE 38

THE SIGNIFICANT DIFFERENCE BETWEEN SCORES ON THE HEALTH BEHAVIOR INVENTORY TEST (DISAGREE) OF THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>S.E. M</th>
<th>M1-M2</th>
<th>S. E. of Difference</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>6.7</td>
<td>7.25</td>
<td>2.5</td>
<td>.46</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.7</td>
<td>.69</td>
<td>2.5</td>
</tr>
<tr>
<td>Girls</td>
<td>8.1</td>
<td>8.17</td>
<td>2.8</td>
<td>.52</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Results on the Health Behavior Inventory (Knowledge)

The data on the results of the Health Behavior Inventory Test (Knowledge) as obtained from the scores of the 60 eighth grade subjects, 30 boys and 30 girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966, are presented in Table 39, page 90.

Eighth grade boys.—The score on the Health Behavior Inventory Test (Knowledge) ranged from a low of 16 to a high of 42; with a mean of 24.6, a median of 24, a standard deviation of 7.2, a standard error of the mean of 1.3. Table 39 further reveals that 13 or 43 per cent scored above the mean, 14 or 47 per cent scored below the mean and 3 or 10 per cent scored within the mean class-interval.

Eighth grade girls.—The scores on the Health Behavior Inventory Test (Knowledge) ranged from a low of 14 to a high of 39; with a mean
TABLE 39
DISTRIBUTION OF THE RAW SCORES ON HEALTH BEHAVIOR INVENTORY (KNOWLEDGE) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Score</th>
<th>Boys Number</th>
<th>Per Cent</th>
<th>Girls Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>41-43</td>
<td>1</td>
<td>3.33</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>38-40</td>
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<td>3.33</td>
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<td>35-37</td>
<td>1</td>
<td>3.33</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>32-34</td>
<td>3</td>
<td>10.00</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>29-31</td>
<td>2</td>
<td>6.66</td>
<td>5</td>
<td>16.66</td>
</tr>
<tr>
<td>26-28</td>
<td>5</td>
<td>16.66</td>
<td>5</td>
<td>16.66</td>
</tr>
<tr>
<td>23-25</td>
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<td>10.00</td>
<td>4</td>
<td>13.33</td>
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<td>20-22</td>
<td>4</td>
<td>13.33</td>
<td>3</td>
<td>10.00</td>
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<tr>
<td>17-19</td>
<td>7</td>
<td>23.33</td>
<td>1</td>
<td>3.33</td>
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<tr>
<td>14-16</td>
<td>3</td>
<td>10.00</td>
<td>2</td>
<td>6.67</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>99.97</td>
<td>30</td>
<td>99.98</td>
</tr>
</tbody>
</table>

Mean: 24.6, Median: 24, Sigma (SD): 7.2, SE_m: 1.3
Mean: 27.9, Median: 29, Sigma (SD): 6, SE_m: 1.1

of 27.9, a median of 29, a standard deviation of 6, a standard error of the mean of 1.1. Table 39 further reveals that 15 or 50 per cent scored above the mean, 10 or 33 per cent scored below the mean and 5
or 16 per cent scored within the mean class-interval.

Comparative data and "t" ratio. — Table 40, page 92, presents the comparative data for the two groups of eighth grade boys and girls on the Health Behavior Inventory (Knowledge) Test. The data indicated that for the eighth grade boys the mean was 24.6 and 27.9 for girls with a difference of 3.3 in favor of the girls, the median for the boys was 24 and 29 for the girls, with a difference of 5 in favor of the girls. The standard deviation for the boys was 7.2 and 6 for the girls, with a difference of 1.2 in favor of the girls. The standard error of the mean for the boys was 1.3 and 1.1 for the girls, with a difference of .2 in favor of the boys. The standard error of the difference between the two means was 1.7.

The "t" of 1.9 was not significant for it was less than 2.58 at the .01 per cent level of confidence, for 58 degrees of freedom. Therefore, the difference on the component of the Health Behavior Inventory Test for the two groups of eighth grade boys and girls was not statistically significant.

Mental Health Analysis Test Indices

The last section of this research study presents the data derived from the scores on the Mental Health Analysis Test as obtained by sixty eighth grade pupils enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966 are presented in Tables 41 through 44.

Results of the Mental Health Analysis Test (Assets)

The data on the results of the Mental Health Analysis Test (Assets) as obtained from 30 eighth grade boys and 30 eighth grade girls enrolled
TABLE 40
SIGNIFICANT DIFFERENCE BETWEEN SCORES ON THE HEALTH BEHAVIOR INVENTORY TEST (KNOWLEDGE) OF THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE</th>
<th>M₁-M₂</th>
<th>S. E. of Difference Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>24.6</td>
<td>24</td>
<td>7.2</td>
<td>1.3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3.3</td>
<td>1.7</td>
<td>1.9</td>
</tr>
<tr>
<td>Girls</td>
<td>27.9</td>
<td>29</td>
<td>6</td>
<td>1.1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

in the Liberty County High School, McIntosh, Georgia, 1965-1966, are presented in Table 41, page 93.

Eighth grade boys.--The scores on the Mental Health Analysis Test (Assets) ranged from a low of 60 to a high of 92; with a mean of 76.8, a median of 78, a standard deviation of 13.8, and a standard error of the mean of 2.6. Table 41 also indicates that 13 or 13 per cent scored above the mean, 14 or 47 per cent scored below the mean and 3 or 10 per cent scored within the mean class-interval.

Eighth grade girls.--The scores on the Mental Health Analysis Test (Assets) ranged from a low of 60 to a high of 96; with a mean of 80.79, a median of 81.5, a standard deviation of 10.8 and a standard error of the mean of 2. Table 41 further shows that 13 or 43 per cent scored above the mean, 13 or 43 per cent scored below the mean and 14 or 13 per cent scored within the mean class-interval.

Comparative data and "t" ratio.--Table 42, page 94, presents the
TABLE 41
DISTRIBUTION OF THE RAW SCORES ON MENTAL HEALTH ANALYSIS TEST (ASSETS) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys Number</th>
<th>Boys Per Cent</th>
<th>Girls Number</th>
<th>Girls Per Cent</th>
</tr>
</thead>
<tbody>
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<td>95-97</td>
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<td>3.33</td>
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<td>13.33</td>
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<td>89-91</td>
<td>2</td>
<td>6.66</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>86-88</td>
<td>2</td>
<td>6.66</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>83-85</td>
<td>7</td>
<td>23.33</td>
<td>2</td>
<td>6.66</td>
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<tr>
<td>80-82</td>
<td>1</td>
<td>3.33</td>
<td>4</td>
<td>13.33</td>
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<td>77-79</td>
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<tr>
<td>71-73</td>
<td>2</td>
<td>6.66</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>68-70</td>
<td>2</td>
<td>6.66</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>65-67</td>
<td>5</td>
<td>16.66</td>
<td>3</td>
<td>10.00</td>
</tr>
<tr>
<td>62-64</td>
<td>2</td>
<td>6.66</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>59-61</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
</tr>
</tbody>
</table>

Total

<table>
<thead>
<tr>
<th></th>
<th>Boys</th>
<th></th>
<th>Girls</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30</td>
<td>99.97</td>
<td>30</td>
<td>99.97</td>
</tr>
</tbody>
</table>

Mean 76.8 80.79
Median 78. 81.5
Sigma 13.8 10.8
SE 2.6 2.0
TABLE I

SIGNIFICANT DIFFERENCES BETWEEN SCORES ON THE MENTAL HEALTH TEST (ASSETS) OF THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE</th>
<th>M_1-M_2</th>
<th>of Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>76.8</td>
<td>78.0</td>
<td>13.8</td>
<td>2.6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3.99</td>
<td>3.28</td>
<td>1.2</td>
</tr>
<tr>
<td>Girls</td>
<td>80.79</td>
<td>81.5</td>
<td>10.8</td>
<td>2.0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

comparative data for two groups of eighth grade pupils, 30 boys and 30 girls on the Mental Health Analysis component (assets). The data indicated that, for the eighth grade boys the mean was 76.8 and 80.79 for girls, with a difference of 3.99 in favor of the girls. For the eighth grade boys the median was 78., and 81.5 for girls, with a difference of 3.5 in favor of the girls. The standard deviation for the boys was 13.8 and for girls it was 10.8, with a difference of 3., in favor of the boys. For the boys the standard error of the mean was 2.6 and for the girls, with a difference of .6 in favor of the boys. The standard error of the difference between the two means was 3.28.

The "t" of 1.2 was not significant for it was less than 2.58 at the .01 per cent level of confidence, for 58 degrees of freedom. Therefore, the difference on the component of the Mental Health Analysis Test (Assets) was not statistically significant.
Results on the Mental Health Analysis (Liabilities)

The data on the results of the Mental Health Analysis (Liabilities) as obtained from 30 eighth grade boys and 30 eighth grade girls of the Liberty County High School, McIntosh, Georgia, 1965-1966, are presented in Table 43, page 96.

Eighth grade boys.--The scores on the Mental Health Analysis (Liabilities) ranged from a low of 27 to a high of 74; with a mean of 54.6, a median of 55., a standard deviation of 15.9 and a standard error of the mean of 2.9. Table 43 further shows that 11% or 47 per cent scored above the mean, 13 or 43 per cent scored below the mean, and 3 or 10 per cent scored within the mean class-interval.

Eighth grade girls.--The scores on the Mental Health Analysis (Liabilities) ranged from a low of 27 to a high of 79 with a mean of 53.6, a median of 54, a standard deviation of 7.11 and a standard error of the mean of 1.3. Table 43 further shows that 11% or 47 per cent scored above the mean, 13 or 43 per cent scored below the mean, and 3 or 10 per cent scored within the mean class-interval.

Comparative data and "t" ratio.--Table 44, page 97, presents the comparative data for the two groups of eighth grade pupils, 30 boys and 30 girls on the Mental Health Analysis component (Liabilities). The data indicated that for the eighth grade boys the mean was 54.6 and 53.6 for the girls, with a difference of 1 in favor of the boys. For the eighth grade boys the median was 55, and 54 for girls, with a difference of 1 in favor of the boys. The standard deviation for the boys was 15.9 and for the girls 7.11, with a difference of 8.79 in favor of the boys. For the boys the standard error of the mean
TABLE 43

DISTRIBUTION OF THE RAW SCORES ON THE MENTAL HEALTH ANALYSIS TEST (LIABILITIES) AS OBTAINED BY THE THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, McINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Scores</th>
<th>Boys</th>
<th>Number</th>
<th>Per Cent</th>
<th>Girls</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>77-79</td>
<td>0</td>
<td>0.00</td>
<td>2</td>
<td>6.66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>76-77</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75-76</td>
<td>1</td>
<td>3.33</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>68-70</td>
<td>2</td>
<td>6.66</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>65-67</td>
<td>4</td>
<td>13.33</td>
<td>2</td>
<td>6.66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>62-64</td>
<td>3</td>
<td>10.00</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>59-61</td>
<td>2</td>
<td>6.66</td>
<td>4</td>
<td>13.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>56-58</td>
<td>1</td>
<td>3.33</td>
<td>4</td>
<td>13.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>53-55</td>
<td>3</td>
<td>10.00</td>
<td>3</td>
<td>10.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>50-52</td>
<td>3</td>
<td>10.00</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>47-49</td>
<td>2</td>
<td>6.66</td>
<td>4</td>
<td>13.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>44-46</td>
<td>1</td>
<td>3.33</td>
<td>3</td>
<td>10.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41-43</td>
<td>4</td>
<td>13.33</td>
<td>2</td>
<td>6.66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38-40</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35-37</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32-34</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29-31</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26-28</td>
<td>1</td>
<td>3.33</td>
<td>1</td>
<td>3.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>99.95</td>
<td>30</td>
<td>99.95</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mean   | 54.6 | 53.6 |
Median | 55   | 54   |
Sigma  | 15.9 | 7.11 |
SE_m   | 2.9  | 1.3  |

was 2.9 and 1.3 for girls, with a difference of 1.6 in favor of the boys. The standard error of the difference between the two means was 3.1.

The "t" of .32 was not significant for it was less than 2.58 at
TABLE 44:

SIGNIFICANT DIFFERENCES BETWEEN SCORES ON THE MENTAL HEALTH ANALYSIS TEST (LIABILITIES) OF THIRTY EIGHT GRADE BOYS AND THIRTY EIGHT GRADE GIRLS OF THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SEM</th>
<th>M₁-M₂</th>
<th>M₁-M₂</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>54.6</td>
<td>55.1</td>
<td>15.9</td>
<td>2.9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>3.1</td>
<td>0.32</td>
<td></td>
</tr>
<tr>
<td>Girls</td>
<td>53.6</td>
<td>54.1</td>
<td>7.11</td>
<td>1.3</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

the .01 per cent level of confidence, for 58 degrees of freedom. Therefore, the difference on the component of the Mental Health Analysis for the groups of eighth grade boys and girls was not statistically significant.
CHAPTER III

SUMMARY AND CONCLUSIONS

Rationale.--The modern concept of a school health program which is behavior centered, developed gradually during the twentieth century. It is supported by necessary information, developed and operated cooperatively, by the whole health team, adapted to individual needs, and related to community health problems and activities.

Today, the modern school understands a great deal more about the nature and needs of all its pupils. The school in accepting its share of responsibility for the health of its pupils, and should interpret this modern concept according to community needs, according to basic human needs which never vary, no matter what may be the locale. The program should be a unified activity in which all school personnel are responsible and should participate and cooperate in the planning and execution throughout the school day. Only through team work can an effective program be attained.

The effectiveness of a health program can be determined by improvement in the pupils learning patterns for sound health education, which includes knowledge, attitudes, practices and skills which will follow them through life.

Education is a process of interaction, involving the learner and his environment. The environment and the way the child responds to
it from day to day determines the direction his growth will take. A basic knowledge of interest, concerns, needs and developmental characteristics of children at various age levels is essential information for building a health program.

Evolution of the problem.—The writer participated in a School Health Workshop at Atlanta University. As a result of the experiences gained from participating in the Health Workshop, the writer was instrumental in setting up a school health program in the Hineshaw Elementary School, Hinesville, Georgia.

Later, the writer was assigned as health instructor in the Liberty County High School. She became interested in this problem and more concerned about the health of the boys and girls with whom she worked and felt the need of upgrading the quality of health instruction in the school so as to improve the knowledge and health status of the children with whom she worked.

Contribution to educational knowledge.—It is the desire of the writer that the value of this study will provide information which will serve as a basis for improving the health program and at the same time recognize the health needs of the total school population at the Liberty County High School, McIntosh, Georgia.

Statement of the problem.—The problem in this proposed study was to make an appraisal of the school health program and to identify the factors of student health behavior patterns of a selected group of eighth grade students enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966.

Limitation of the study.—The major limitation of this study
inheres in the fact that it was solely an appraisal without any endeavor to identify an causative factors of concern to the health status of eighth-grade boys and girls enrolled in the Liberty County High School, McIntosh, Georgia.

Purposes of the study.--The major purposes of this study were to: (a) identify the factors of health status, knowledge and practices, (b) to appraise the health program and facilities, and (c) to ascertain the statistical differences in health experiences between boys and girls enrolled in the Liberty County High School, McIntosh, Georgia, 1965-1966.

The specific purposes of this study were as follows:

1. To identify the kinds of health practices manifested within the school environment.
2. To identify the types of health knowledge possessed by the students.
3. To determine the nature of health attitudes held by the students.
4. To determine the extent to which adequate facilities for a health program are available.
5. To determine the extent of healthful conditions about the school plant.
6. To determine the significant differences, if any, in health knowledge, health practices, health assets, health liabilities between the eighth-grade boys and girls.
7. To formulate significant implications for educational practice as may be derived from the analysis of the data.

Definition of terms.--The significant terms used throughout this study are defined as follows:

1. "Health Appraisal" refers to the evaluation of health status of the individual through the utilization of varied organized
and systematic procedures such as medical and dental examinations, health history, teacher and nurse observations, screening test and psychological examinations.¹

2. "School Health Program" refers to the composite of procedures used in school health services, healthful school living and health science instruction to promote health among students and school personnel.²

3. "Health Education" refers to the translation of what is known about health into desirable individual behavior patterns by means of the educational process.³

4. "Health Services" refers to the school procedures which are established to: (a) appraise the health status of pupils and school personnel; (b) counsel pupils, parents and other persons involved concerning appraisal findings; (c) encourage the correction of remedial defects; (d) help plan for the health care and education of handicapped children; (e) help prevent and control diseases; and (f) provide emergency service for sick or injured.⁴

5. "Healthful School Living" designates provision of a safe and healthful environment, the organization of a healthful school day and the establishment of interpersonal relationships favorable to emotional, social and physical health.⁵

6. "Behavior Patterns" a sequence of actions which the organism employs to adjust to a situation; for each behavior pattern

¹Joint Committee on Health Education Terminology, Journal of Health, Physical Education and Recreation, XXXIII, No. 8 (November, 1962), p. 27.
²Ibid.
there is an underlying neural pattern.  

7. "Health" refers to that state in which the individual is able to mobilize all his resources - intellectual, emotional, and physical for optimum daily living.  

8. "Knowledge" refers to collective facts, information, understanding know-how and experience in general whether obtained directly or vicariously as through a class discussion or through reading a book.  


Locale and research design.--The significant aspects of the locale and research design are indicated below:  

1. Locale - This study was conducted during the school year 1965-1966 at the Liberty County High School. It is located in Southeast, Georgia, Hinesville is the county seat. It has an enrollment of six hundred and seventy (670) students in grades eight through twelve. The faculty includes twenty-eight (28) teachers, and a full time counselor.  

2. Research method - The Descriptive-Survey Method of research, employing the technique of the questionnaire, standardized test and statistical analysis, was used to collect and interpret the data necessary for this study.  

3. Subjects - The subjects involved in this study were sixty (60) girls and fifteen (15) teachers.  

4. Instruments - The measuring devices used to collect this data were a questionnaire and two tests; namely,  

---

a. An Appraisal of the School Health Program
b. Mental Health Analysis Test
c. Health Behavior Inventory Test

5. The data obtained from the questionnaire, which involved percentages, based on the opinions of fifteen (15) teachers were placed in appropriate tables and interpreted with the results as reported in Chapter III. The data obtained from the tests were tabulated, treated statistically by computing the range, means, median, standard deviations, standard error of mean, standard error of difference between the two means and "t" ratio. These data also were interpreted with the results as reported in Chapter III.

6. Criteria of reliability - The criteria of reliability for appraising the data was the accuracy and authenticity of responses of the fifteen teachers to the items on the questionnaire. The significant differences were referred to Fisher's "t" of 2.58 at the one per cent level of confidence for a 58 degree of freedom was used for the two tests.

Summary of related literature.--The literature for this study was discussed under three broad areas, namely, (a) Scope of School Health Program, (b) Behavior Patterns of Health and (c) Research Findings.

The study reveals that the modern health program evolved at the turn of the century from the early days of public education when the school was concerned with little beyond purely factual instruction. As public health developed, the school broadened its whole perspective and health became a major concern.

The researcher finds that studies in school health and health education have been carried out, the school health program has become a more integral part of the community health program and it has become increasingly apparent that facts alone will not produce hygienic living. She further finds that health education involves real training and problem solving, not merely instruction. Modern teaching involves trying
to understand the child.

It is important that the school know the academic status of each child at a given time. It is equally important that the school know each child's health status. School success and health status are related. The school program and the health of the child must be in adjustment. To enable the child to obtain most benefits from his school experience the teacher should know the child's health endowment, the child's limitations and his likely possibilities. Once the teacher has a unified concept of a child's health status, she not only can understand the child's performance and behavior, but quickly be aware of any deviations from the child's normal condition.

Authorities agree that health education is an educative experience for increasing the knowledge, improving the attitudes and influencing the behavior of children in relation to health problems.¹

There is considerable evidence that comfort and efficiency are fostered by good practices in school lighting. Facts revealed by many studies, point to the need for more effective school health services.

The relationship between the physical plant of the school and the mental health of its occupants is now widely recognized. The American Association of School Administrators states, "Educational growth of children to the fullest potential cannot be achieved unless every aspect of the physical environment is so controlled that it

contributes to the comfort and health of the pupils and professional staff.¹

The teacher's responsibility is not only to furnish information but to guide the students' thought and actions toward the development of behavior patterns which will enhance his total well-being.

Summary of findings.—The summary of the basic findings will be reported under data extracted from the questionnaire: "An Appraisal of the School Health Program," and test captions in separate paragraphs along with Summary Tables 45 and 49. The findings summarized are taken from the interpretations of the data as collected in this study.

Analysis of data extracted from the questionnaire "An Appraisal of the School Health Program."

I. Organization and administration of the school health program

The school health program in the Liberty County High School is planned as an integral part of the school education program. There is a person directly responsible for the administration and promotion of the health program. It provides for joint planning and cooperation on the part of administrators, teachers, pupils and lay people, although it does not include medical personnel.

School personnel and health staff are aware of their mutual responsibilities and relationships to the extent that the school program provides for activities and experiences based on the needs and practices of the pupils.

¹American Association of School Administrators, Health in Schools (National Education Association, 1951), p. 89.
The written program of health at the Liberty County High School conforms to the standard set up by the county and the school utilizes available public health personnel in planning and executing the program.

II. Scope of the school health program

A. Healthful school-community environment. -- The physical characteristics in the Liberty County High School are sufficiently extensive to insure a safe, healthful, and attractive school environment, a good emotional tone and good interpersonal relationships.

The buildings are so designed that proper illumination may be assured at all times. Corridors, toilet rooms and similar places have adequate illumination and approved by the Department of Public Health. Paints and finishes on walls; floors, chalkboards and desk provide non-glossy and non-reflecting surfaces.

Efforts to encourage healthful school living involve janitorial services, adequate equipment and supplies for cleaning, and movable and suitable desks.

Improvements are needed especially for screens on all windows and for satisfactory facilities for wraps and other garments either in classrooms or halls.

The lunch room in the Liberty County High School is adequate in size, regularly inspected by the Department of Public Health, and received federal aid.

Provisions are made to increase participation in the lunch program by providing free meals to needy children and by giving children who bring pack lunches an opportunity to eat in the lunchroom.

Counseling service is designed to give systematic aid to pupils in solving their problems, making adjustments, assisting pupils to improve their health attitudes and to remove the causes for poor attendance and behavior problems.

B. Health services. -- The school personnel at Liberty County High School is concerned with a healthful, safe and attractive environment, and with instituting methods and programs that protect and provide emergency care for sick or injured children.

There is a need for school patrols, and construction of playground to meet safety standards.

C. Physical education and recreation. -- The school personnel
at the Liberty County High School realizes that the physical education program should include not only the instructional program but the program of intramural and interscholastic athletics as well. The comprehensive goals of the program emphasize the mental, emotional and social aspects of living as well as the physical development necessary for a happy and active life.

There is a school gymnasium, lockers, adequate shower and toilet facilities for each child participating in the physical education program.

There is immediate need for additional play material to meet the needs of those enrolled in the program.

D. Health instruction.--Health instruction at the Liberty County High School provides opportunities to develop knowledge, attitudes and practices necessary to meet present and probably future health needs of youth. The instruction is taught in conjunction with other subject matter fields and presented in situations which have meaning to students.

A definite period is set aside for health instruction on the eighth grade level and is planned as part of the total school program.

E. Special education.--A program of Special Education is not available in the Liberty County High School but is needed in order to meet the needs of children who are not able to reach their optimal level in the regular school program. All aspects of the program are needed.

III. Test data

The summary of findings from the administration of the Mental Health Analysis Test and Health Behavior Inventory Test are reported under the test captions in separate paragraphs along with five summary Tables 45 through 49. The findings summarized in the separate paragraphs to follow are drawn from the interpretation of the data as collected in this study.

Health Behavior Inventory Test
(Practices) (Usually)
Tables 27 and 28
On the practice component of the Health Behavior Inventory (usually) the following statistical measures were obtained: the eighth grade boys, a mean score of 4.93, a median score of 4.5, with a standard deviation of 2.67; for the eighth grade girls, a mean score of 5.67, a median score of 5.5, with a standard deviation of 3.15. The scores for the two groups showed a difference of mean of 1.74, with a standard error of the difference between the means of .75 and a "t" of 2.23, for .01 per cent level of confidence with 58 degrees of freedom.

Health Behavior Inventory Test (Practices) (Sometimes) Tables 29 and 30

On the practice component of the Health Behavior Inventory (sometimes) the following statistical measures were obtained: the eighth grade boys, a mean score of 1, a median score of 1.3, with a standard deviation of .6; for the eighth grade girls, a mean score of .95, a median score of 1.15, with a standard deviation of .48. The scores for the two groups showed a difference of mean of .05 with a standard error of the difference between the means of .13 and a "t" of .38, for .01 per cent level of confidence, with 58 degrees of freedom.

Health Behavior Inventory Test (Practices) (Never) Tables 31 and 32

On the practice component of the Health Behavior Inventory (never) the following statistical measures were obtained: the eighth grade boys, a mean score of 3.67, a median score of 3.5 with a standard deviation of 1.6, the eighth grade girls, a mean score of 3.67, a median score of 3.39, with a standard deviation of 1.8. The scores for the two groups showed a difference of mean of 0, with a standard error of the difference between the means of .33 and a "t" of 0 for .01 per cent level of confidence with 58 degrees of freedom.

Health Behavior Inventory Test (Attitudes) (Agree) Tables 33 and 34

On the attitude component of the Health Behavior Inventory (agree) the following statistical measures were obtained: the eighth grade boys, a mean score of 7.33, a median score of 8.625, with a standard deviation of 1.49, for the eighth grade girls, a mean score of 8.97, a median score of 9.07, with a standard deviation of 1.23. The scores for the two groups showed a difference of mean of
1.64, with a standard error of the difference between the means of .36 and a "t" of 4.6.

Health Behavior Inventory Test
(Attitudes) (Uncertain)
Tables 35 and 36

The attitude component of the Behavior Inventory (uncertain) showed the following statistical measures: the eighth grade boys, a mean score of 3.63, a median score of 4.17, with a standard deviation of 2.1, the eighth grade girls, a mean score of 3.4, a median score of 2.17, with a standard deviation of 2.6. The scores for the two groups showed a difference of mean of .23, with a standard error of the difference between the means of .62 and a "t" of .37 for .01 per cent level of confidence, with 58 degrees of freedom.

Health Behavior Inventory Test
(Attitudes) (Disagree)
Tables 37 and 38

The attitude component of the Behavior Inventory (disagree) showed the following statistical measures: the eighth grade boys, a mean score of 6.7, a median score of 7.25, with a standard deviation of 2.5, the girls, a mean score of 8.4, a median score of 8.17, with a standard deviation of 2.8. The scores for the two groups showed a difference of mean of 1.7, with a standard error of the difference between the means of .69 and a "t" of 2.5 for .01 per cent level of confidence, with 58 degrees of freedom.

Health Behavior Inventory Test
(Knowledge)
Tables 39 and 40

On the Health Behavior Inventory, the component (Knowledge), showed the following statistical measures: the eighth grade boys, the mean score of 21.6, a median score of 24., with a standard deviation of 7.2; the girls, a mean score of 27.9, a median score of 29., with a standard deviation of 6. The scores for the two groups showed a mean of 3.3 with a standard error of the difference between the means of 1.7 and a "t" of 1.9 for .01 per cent level of confidence with 58 degrees of freedom.

Mental Health Analysis Test
(Assets)
Tables 41 and 42

On the Mental Health Analysis, the component (assets) showed
the following statistical measures: the eighth grade boys, a mean score of 76.8, a median score of 78 with a standard deviation of 13.8; the eighth grade girls, a mean score of 80.79, a median score of 81.5, with a standard deviation of 10.8. The scores for the two groups showed a mean of 3.99, with a standard error of the difference between the means of 3.28 and a "t" of 1.2, for .01 per cent level of confidence, with 58 degrees of freedom.

Mental Health Analysis Test
(Liabilities)
Tables 13 and 14

On the Mental Health Analysis, the component (liabilities) showed the following statistical measures: the eighth grade boys, a mean score of 54.6, a median score of 55, with a standard deviation of 15.9; the eighth grade girls, a mean score of 53.6, a median score of 54, with a standard deviation of 7.11. The scores for the two groups showed a difference of mean of 1, with a standard error of the difference between the means of 3.1 and a "t" of .32 for .01 per cent level of confidence, with 58 degrees of freedom.

Conclusions.—The findings of this study appear to warrant the following conclusions:

1. The provisions or conditions of the school health program at the Liberty County High School are moderate in extent and functioning well.

2. The written program at the Liberty County High School is not adequate enough in scope nor does it provide for evaluation of the program's efficiency and effectiveness.

3. The over-all program of health does not provide for special education program and services.

4. The indicated treatment resulting from physical and medical examinations is not followed up through school or home services.

5. The provisions for an in-service education program in health instruction and services are inadequate.

6. The eighth-grade boys and eighth-grade girls possessed approximately the same level of knowledge about health; for there was no significant statistical difference between the two groups as measured by the Health Behavior Inventory Test.

7. The boys and girls differed significantly in their reaction
### TABLE 45

**SUMMARY OF DATA DERIVED FROM THE RESULTS ON THE HEALTH BEHAVIOR INVENTORY (PRACTICES) ADMINISTERED TO THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS ENROLLED IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966**

<table>
<thead>
<tr>
<th>Degree of Extent</th>
<th>Boys</th>
<th>Girls</th>
<th>Difference Data</th>
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<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Median</td>
<td>Sigma</td>
</tr>
<tr>
<td>Usually</td>
<td>4.93</td>
<td>4.5</td>
<td>2.67</td>
</tr>
<tr>
<td>Sometimes</td>
<td>1</td>
<td>1.3</td>
<td>.6</td>
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<tr>
<td>Never</td>
<td>3.67</td>
<td>3.5</td>
<td>1.6</td>
</tr>
</tbody>
</table>
TABLE 46

SUMMARY OF DATA DERIVED FROM THE RESULTS ON THE HEALTH BEHAVIOR INVENTORY (ATTITUDE) ADMINISTERED TO THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS ENROLLED IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Degree of Extent</th>
<th>Boys</th>
<th>Median</th>
<th>Sigma</th>
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<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE&lt;sub&gt;m&lt;/sub&gt;</th>
<th>Diff.</th>
<th>S.E. of M-M&lt;sub&gt;1&lt;/sub&gt;</th>
<th>Mean</th>
<th>t&lt;sub&gt;1&lt;/sub&gt;</th>
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</thead>
<tbody>
<tr>
<td>Agree</td>
<td>7.334</td>
<td>8.625</td>
<td>1.49</td>
<td>.28</td>
<td>8.97</td>
<td>9.07</td>
<td>1.23</td>
<td>.36</td>
<td>1.64</td>
<td>.36</td>
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<td>4.6</td>
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<td>Uncertain</td>
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<td>4.17</td>
<td>2.1</td>
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<td>3.4</td>
<td>2.17</td>
<td>2.6</td>
<td>.48</td>
<td>.62</td>
<td>.23</td>
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<td>.37</td>
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<tr>
<td>Disagree</td>
<td>6.7</td>
<td>7.25</td>
<td>2.5</td>
<td>.46</td>
<td>8.4</td>
<td>8.17</td>
<td>2.8</td>
<td>.52</td>
<td>.69</td>
<td>1.7</td>
<td></td>
<td>2.5</td>
</tr>
</tbody>
</table>

TABLE 47

SUMMARY OF DATA DERIVED FROM THE RESULTS ON THE HEALTH BEHAVIOR INVENTORY (KNOWLEDGE) ADMINISTERED TO THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS ENROLLED IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE&lt;sub&gt;m&lt;/sub&gt;</th>
<th>S.E. of M-M&lt;sub&gt;1&lt;/sub&gt;</th>
<th>Difference of Mean</th>
<th>t&lt;sub&gt;1&lt;/sub&gt;</th>
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</thead>
<tbody>
<tr>
<td>Boys and Girls</td>
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<td>7.2</td>
<td>1.3</td>
<td>3.3</td>
<td>1.7</td>
<td>1.9</td>
</tr>
</tbody>
</table>
### TABLE 48

SUMMARY OF DATA DERIVED FROM THE RESULTS ON THE MENTAL HEALTH ANALYSIS (ASSETS) ADMINISTERED TO THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS ENROLLED IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE (\text{M1-M2})</th>
<th>S. E. of Difference of Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>76.8</td>
<td>78.</td>
<td>13.8</td>
<td>2.6</td>
<td>3.99</td>
<td>3.28</td>
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<tr>
<td>Girls</td>
<td>80.79</td>
<td>81.5</td>
<td>10.8</td>
<td>2.</td>
<td>3.99</td>
<td>3.28</td>
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</table>

### TABLE 49

SUMMARY OF DATA DERIVED FROM THE RESULTS ON THE MENTAL HEALTH ANALYSIS (LIABILITIES) ADMINISTERED TO THIRTY EIGHTH GRADE BOYS AND THIRTY EIGHTH GRADE GIRLS ENROLLED IN THE LIBERTY COUNTY HIGH SCHOOL, MCINTOSH, GEORGIA, 1965-1966

<table>
<thead>
<tr>
<th>Groups</th>
<th>Mean</th>
<th>Median</th>
<th>Sigma</th>
<th>SE (\text{M1-M2})</th>
<th>S. E. of Difference of Mean</th>
<th>&quot;t&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td>54.6</td>
<td>55.</td>
<td>15.9</td>
<td>2.9</td>
<td>1</td>
<td>3.1</td>
</tr>
<tr>
<td>Girls</td>
<td>53.6</td>
<td>54</td>
<td>7.11</td>
<td>1.3</td>
<td>1</td>
<td>3.1</td>
</tr>
</tbody>
</table>
to health situations; as indicated on the (agree) and (disagree) components of the Health Behavior Inventory.

8. The boys and girls appeared to be at the same level of performance of respective health practices; for there was no significant difference between the two groups as measured by the Health Behavior Inventory Test.

9. The boys and girls appeared to be enjoying the same or similar degree of mental health either in terms of assets or "liabilities" as measured by the Mental Health Analysis.

Implications.—The implications which inhere in the findings of this research are given in the paragraphs that follow:

1. An adequate health program involves the maintenance of all phases of physical, mental and emotional development and social adjustment which pertain to learner performance.

2. Standardized tests can be useful as a desirable means of appraising the changes occurring in behavior and in assisting the teacher in knowing where to place emphasis in the health instruction program.

3. Special provisions should be made for parent education programs in health education to assure reinforcement of what is learned in school.

4. The administration should provide opportunities for in-service education in the total health program. This should include indoctrination in the screening techniques and use of cumulative records.

5. Health education is one of the principal ways of prevention and should be an important part of a school health program.

Recommendations.—The analysis and interpretation of the basic data appear to warrant the recommendations that follow.

1. The administrator and school personnel at the Liberty County High School should continue to maintain interest in the school health program; in keeping with the trend, more emphasis should be placed on preventive education with mental health as an integral part of the program.

2. A continuous process of comprehensive study by means of standardized test and other objective measurements of individual pupils be made to identify and appraise student's
practices, knowledge and attitudes, which influence health behavior.

3. The administration might well consider including health knowledge tests in the testing program for all incoming eighth graders in order that a more effective health instruction program can be planned and implemented.

4. A program of Special Education should be inaugurated in the Liberty County High School.

5. A comprehensive follow-up procedure should be inaugurated as an integral part of the health program.
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Joint Committee on Health Education Terminology, Journal of Health, Physical Education and Recreation, XXXIII, No. 6 (November, 1962), II.


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Adams, Annie P. "A Study of the Adequacy of the School Health Program


VITA

Williams, Bessie Herbert

Education

B. S., Fort Valley State College, Fort Valley, Georgia, 1949; Major - Elementary Education; Minor, Social Science, Certification; Health and Physical Education, Secondary School, Atlanta University, School of Education - Summers.

Experience

Teacher, Liberty County Board of Education, Hinesville, Georgia, 1951 -

Field of Concentration

Health Education

Personal Information

Married, Mother of a son and two daughters; member of GTEA, NEA, ATA, Hutchinson Station A. M. E. Church, McIntosh, Georgia.
APPENDIXES

A - Specimen of Questionnaire/Check-list

B - Specimen of Tests
APPENDIX A

Questionnaire/Check-list
APPENDIX A

AN APPRAISAL OF THE SCHOOL HEALTH PROGRAM

Georgia Department of Public Health
State Department of Education
Atlanta 3, Georgia

County __________________________ Date __________________________

Name of School __________________________ Address __________________________

Type of School: Elementary: Enrollment ______ No. Teachers ______

Junior High: Enrollment ______ No. Teachers ______

High School: Enrollment ______ No. Teachers ______

Combination (1-12): Enrollment ______

No. Teachers ______

Principal __________________________ Address __________________________

This is an effort to help schools evaluate and improve their health programs. It is based upon the belief that "Health is a state of complete physical, mental and social well being, and not merely the absence of disease or infirmity," and that Health Education is the sum of all the experiences that contribute to this condition of the body; and further, that the school health program should be concerned with all ages - pre-school, school, out-of-school youth, and adults. It is suggested that the principal with his faculty, pupils, public health personnel and lay people study these items together in several study-group meetings and indicate by check the actual conditions in their school. Then all, working together, should make every effort possible to improve the weak points found in the program.

I. ORGANIZATION AND ADMINISTRATION OF THE SCHOOL HEALTH PROGRAM

A. Is there a person directly responsible for the administration and promotion of the health program in your school? Yes ___ No ___

B. Is there an active school health committee? Yes ___ No ___
1. Are teachers members of this committee? Yes ___ No ___
2. Are administrators? Yes ___ No ___
3. Are pupils? Yes ___ No ___
4. Are lay people? Yes ___ No ___
5. Is a physician included? Yes ___ No ___
6. Is a dentist included? Yes ___ No ___
7. Is a nurse included? Yes ___ No ___
8. Sanitation personnel? Yes ___ No ___
9. Does this committee meet regularly? Yes ___ No ___
10. Does it help plan, activate and evaluate the health program in the school? Yes ___ No ___

a. Does the evaluation include:

(1) Health knowledge tests? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
(2) Health attitude tests? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
(3) Observing the attitudes and practices of pupils:
   (a) in school? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
   (b) in home, whenever possible? None ___ Poor ___ Fair ___ Good ___ Excellent ___;
   (c) in community, whenever possible? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
(4) Interviews and conferences with pupils, parents, health personnel and other teachers? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
(5) Training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries, etc.? None ___ Poor ___ Fair ___ Good ___ Excellent ___.
(6) When the above information is obtained is it used to improve the health program? None ___ Poor ___ Fair ___ Good ___ Excellent ___.

C. Do school personnel have training in the school health program?

1. All? Yes ___ No ___
2. More than half? Yes ___ No ___
3. Less than half? Yes ___ No ___
4. None? Yes ___ No ___
5. Does this training include mental and social health as well as physical health? Yes ___ No ___
6. Do they feel that each has responsibilities in the school health program? 

Yes ___ No ___

D. Is there an in-service training program in school health for all school personnel as part of total school program?

Yes ___ No ___

1. Study and planning during pre-and post-planning weeks? 

Yes ___ No ___

2. Study groups during school year? 

Yes ___ No ___

E. Is there a written program of health for your school?

Yes ___ No ___

1. Is this written program revised and improved at least annually?

Yes ___ No ___

2. Does the written program of health for your school conform to the county written program of school health?

Yes ___ No ___

3. Do school personnel and public health personnel jointly carry on the responsibility of the health program in schools?

Yes ___ No ___

4. In planning and writing the program of school health, did the following participate:

(a) School personnel, students and public health personnel? 

Yes ___ No ___

(b) P. T. A. school personnel and public personnel? 

Yes ___ No ___

(c) Community, P. T. A., school personnel and public health personnel? 

Yes ___ No ___

II. SCOPE OF THE SCHOOL HEALTH PROGRAM

A. Healthful School - Community Environment

1. Grounds

a. Suitable in size to meet state standards? Poor ____ Fair ____ Good ____ Excellent __

b. Landscaped for:

   (1) beautification None ___ Poor ___ Good ___ Excellent ___
   (2) drainage None ___ Poor ___ Good ___ Excellent ___

c. Grass, flowers and shrubbery in proper places and well kept? None ___ Poor ___ Fair ___ Good ___ Excellent ___

d. Are there objectionable commercial or industrial areas nearby creating excessive noise, dust, or other hazards? None ___ Poor ___ Fair ___ Good ___ Excellent ___

e. Are grounds clean and well kept? Yes ___ No ___
2. Buildings
   a. Attractive and in good state of repair? Yes ___ No ___
   b. Adequate number of suitable classrooms? (minimum 20 sq. ft. per pupil) Yes ___ No ___
   c. Adequate number of other necessary buildings? Yes ___ No ___
   d. Is there a separate rest room for teachers where they may relax during free periods? Yes ___ No ___
   e. Are buildings clean and well kept? Yes ___ No ___
   f. Ramp entrance that will accommodate wheelchair? Yes ___ No ___

3. Sanitation
   a. Is drinking water available on school grounds? Yes ___ No ___
   (1) Is source of water approved by the Health Dept. Yes ___ No ___
   (2) Has it been tested and approved by the Health Department within the year? Yes ___ No ___
   (3) Is the quantity sufficient? Yes ___ No ___
   (4) Is the distribution system approved by the Health Department? Yes ___ No ___
   b. Are adequate sanitary-type drinking fountains available with height adjusted to age groups using them? Yes ___ No ___
   c. Are there always plenty of paper towels? Yes ___ No ___
   d. Is either liquid soap or soap powder, properly dispensed, used for handwashing? Yes ___ No ___
   e. Are toilets approved by the Department of Public Health? Yes ___ No ___
   (1) Flush type __ Pit __ (check) Yes ___ No ___
   (2) Inside building? Yes ___ No ___
   (3) Provided with adequate number of commodes and urinals for the peak number of children using them? Yes ___ No ___
   (4) Kept clean? Yes ___ No ___
   (5) Free from marks? Yes ___ No ___
   (6) Well ventilated? Yes ___ No ___
   (7) Well lighted? Yes ___ No ___
   (8) Supplied with plenty of toilet paper? Yes ___ No ___
   (9) Provided with fixtures suitable in height and size for children using them? Yes ___ No ___
   (10) Is disposal by septic tank? Yes ___ No ___
   (11) Or by city sewerage system? Yes ___ No ___
   f. Are children trained in proper us and maintenance of toilets? Yes ___ No ___
   g. Is there a toilet that will accommodate a wheelchair patient? Yes ___ No ___
4. Heating, ventilation and lighting

a. Adequate central heating system? Yes No

b. Or adequate jacketed stoves? Yes No
   (1) Do stoves have fresh air inlet from outside? Yes No

c. Or properly vented individual gas heaters? Yes No

d. Can an adequate portion of windows be opened to provide sufficient ventilation? Yes No

e. Are the rooms free from drafts? Yes No

f. Is there an adequate supply of fresh air? Yes No

g. Is there an accurate thermometer in classrooms? (1) Is it properly located? Yes No

h. Are there electric lights? Yes No
   (1) Properly shielded?
   (2) Do they give sufficient light to all parts of the room (at least 20 foot candles of artificial light). Yes No

i. Are translucent window shades used? Yes No
   (1) Are proper light controls used to shield the windows adequately, so arranged that light enters from upper part of windows? (Check: diffusers, venetian blinds, two-way rollers shades listed in order of preference) Yes No

j. Are desks arranged for minimum of glare and maximum of light? (Pupils should not face light or work in shadows created by their bodies) Yes No
   (1) Are reading tables also thus placed? Yes No
   (2) Are desks and furniture natural wood? Yes No
   (3) Floors natural wood, or light green marbelized linoleum or asphalt tile and free from glare? Yes No

k. Are walls and ceiling a light shade? Yes No
   (1) Are the walls without glare? Yes No
   (2) Woodwork and trim same as walls, darkened to 50% reflection factor with non-glossy finish? Yes No

l. Do chalk boards have dull finish? (Should be green with a minimum of 20% light reflection.) Yes No
   (1) May they be used without facing the light? Yes No
   (2) Do teachers stand away from windows when teaching so pupils will not have to face light when looking at them? Yes No
5. Classroom arrangement and cleanliness

a. Is janitorial service provided?  
   (1) Does he realize his importance in  
       the general scheme for school sanitation and child welfare?  
       Yes ___ No ___  
   (2) Has he had special training for his  
       job through the State Department of  
       Education's custodial training program or elsewhere?  
       Yes ___ No ___  
   (3) Does he have supervision?  
       Yes ___ No ___

b. Are there adequate equipment and supplies  
   for cleaning?  
   Yes ___ No ___

c. Is room arrangement orderly and attractive?  
   Yes ___ No ___

d. Are there a few appropriate, well placed  
   pictures?  
   Yes ___ No ___

e. Are there growing plants in the rooms?  
   Yes ___ No ___

f. Is a mirror placed at such a height that  
   all pupils can use it?  
   Yes ___ No ___

g. Are screens on all windows?  
   Yes ___ No ___
h. Are desks and seats movable?  
   Yes ___ No ___
i. Are desks and seats suitable in size for  
   age group using them?  
   Yes ___ No ___

j. Are satisfactory facilities provided for  
   wraps and other garments, either in  
   classrooms or halls?  
   Yes ___ No ___

k. Are floors finished for beauty and ease  
   of cleaning?  
   Yes ___ No ___

6. School lunch

a. Does the school have adequate facilities  
   for a school lunch counter program?  
   Yes ___ No ___

   (1) Is the school lunch program receiving Federal aid?  
       Yes ___ No ___

   (2) Is the school refraining from selling soft drinks and packaged  
       foods?  
       Yes ___ No ___

   (3) Is the lunch room inspected regularly by the Department of Public Health?  
       Yes ___ No ___

   (4) Are physical examinations required for school lunch personnel and student  
       help?  
       Yes ___ No ___

   (5) Do school lunch personnel have training in sanitation and proper  
       methods of food handling?  
       Yes ___ No ___

       All ___ Yes ___ No ___
       Few ___ Yes ___ No ___
       None ___ Yes ___ No ___
b. Do all children eat in lunch room?
   (1) Do all children eat lunch?  Yes ___  No ___
   (2) Are all children provided a hot lunch? Yes ___  No ___
   (3) Are 80% or more of the children participating in the lunch program? Yes ___  No ___
   (4) Is anything being done to increase the participation in the lunch program? Yes ___  No ___
   (5) Are the children who bring packed lunches given an opportunity to eat in the dining room? Yes ___  No ___
   (6) Is pasteurized milk provided for every child daily? Yes ___  No ___
   (7) Are free meals given to children who need them? Yes ___  No ___

c. Is 20 minutes or more allowed for children to eat lunch exclusive of time consumed in washing hands, standing in line?
   (1) Are children encouraged to remain at the table until each child has had ample time to eat lunch? Yes ___  No ___
   (2) Are children allowed adequate time to wash hands before eating? Yes ___  No ___
   (3) Do children return immediately to classrooms from lunchroom? Yes ___  No ___

d. Is there evidence that the school lunch program is bringing about positive learning experiences to pupils either directly or through the classroom integration? Yes ___  No ___

7. Organization and administration of the school

a. Is the school day long enough to prevent too much hurry? Yes ___  No ___

b. Is there enough time given for rest, relaxation, play? Yes ___  No ___

c. Are pupils overburdened with homework and extraclass activities? Yes ___  No ___

d. Are examinations, marks, reports to parents emphasized to point to where children are subjected to undue amount of fear of failure? Yes ___  No ___

e. Does the method of promotion take into consideration the total development of the pupil, rather than merely his knowledge of subject matter? Yes ___  No ___

f. Are the relations between:
   (1) School and Community? Poor __ Fair __
       Good __ Excellent __
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
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<tr>
<td>School and homes? Poor — Fair — Good — Excellent</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Principal and administration? Poor — Fair — Good — Excellent</td>
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<tr>
<td>Is there a program of counseling?</td>
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</tr>
<tr>
<td>Has there been a trained counselor?</td>
<td></td>
<td></td>
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<tr>
<td>Is he trained in mental health?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Are services of Visiting Teacher available</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Has this person had special training for the job?</td>
<td></td>
<td></td>
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<tr>
<td>Are these services used to remove the causes for:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Non-attendance?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Poor attendance?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(c) Behavior problems?</td>
<td></td>
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<tr>
<td>Is there a program of counseling?</td>
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<td>Are there been a trained counselor?</td>
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<td>Has this person had special training for the job?</td>
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<tr>
<td>Are these services used to remove the causes for:</td>
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<tr>
<td>(a) Non-attendance?</td>
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</tr>
<tr>
<td>(b) Poor attendance?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(c) Behavior problems?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community environment</td>
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<tr>
<td>Does the school promote and stimulate interest in:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(1) Adequate safe water supply?</td>
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<tr>
<td>(a) Fluoridation of water</td>
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<tr>
<td>(2) Proper sewage disposal?</td>
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</tr>
<tr>
<td>(3) Proper garbage disposal?</td>
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</tr>
<tr>
<td>(4) Insect and rodent control?</td>
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</tr>
<tr>
<td>(5) Other needed public health protective measures?</td>
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</tr>
<tr>
<td>Safety</td>
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<td></td>
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<tr>
<td>Are all stairways safe?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(1) Hand rails on all stairs in good repair?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(2) Safety treads on all steps?</td>
<td></td>
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<td>(3) Bottom and top steps painted in contrast?</td>
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<td>(4) Stairs and landings well lighted?</td>
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<td>Are corridors safe?</td>
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<td>(1) No projections?</td>
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<td>(2) No loose plaster?</td>
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<td>(3) Floor boards in good repair?</td>
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<td>Is non-skid wax used on all floors?</td>
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<td>Do all doors open outward?</td>
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<td>Are all combustible and inflammable materials stored in fireproof containers?</td>
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f. Is the heating unit checked regularly for unvented gases and fire hazards? Yes ___ No ___
g. Is the electrical circuit check regularly for overloading and other hazards? Yes ___ No ___
h. Does the fire protection equipment meet community fire regulations? Yes ___ No ___
   (1) Are they inspected regularly by the Fire Department? Yes ___ No ___
i. Does playground construction meet safety standards? Yes ___ No ___
j. Play equipment kept in good repair? Yes ___ No ___
k. Are hazardous materials kept off play- ground, such as nails, broken glass, stone, etc.? Yes ___ No ___
l. Is there a teacher trained in first aid designated as supervisor of all play periods? Yes ___ No ___
m. Is there a school patrol? Yes ___ No ___
n. Do all school buses meet Department of Public Safety Standards? Yes ___ No ___
   (1) Drivers having training in driver education? Yes ___ No ___
o. Have bicycle safety program? Yes ___ No ___
p. Fire escapes meet safety requirement? Yes ___ No ___

B. Health Service

1. Is there a Department of Public Health in your county? Yes ___ No ___
   a. Does it have a (check): Health Officer? Nurses? Engineer or Sanitarian? Dental Hygienist? Dental Clinic? ___
2. Does a close working relationship exist between your school and the local health department? Yes ___ No ___
3. Do local official and voluntary agencies participate in the school health program? Yes ___ No ___
4. Do teachers and public health nurse participate in teacher-nurse conference when public health nurse visits school? Yes ___ No ___
5. Do teachers do periodic "Teacher Observations" of children? Yes ___ No ___
   a. Do teachers keep up-to-date notes of "teacher observations" and transfer them with other records (School Health Form No. 2)? Yes ___ No ___
   b. Are your immunization standards in line with those recommended by the State Department of Public Health? Yes ___ No ___
6. Does the school receive reports of the visits of health officer? Yes __ No __
   a. Reports of visits of other public health personnel? List
   Yes __ No __

7. Is a health examination, including chest X-Ray, required of all school personnel before employment? Yes __ No __
   a. If not, which ones? ____________________________
   b. Periodically every two years thereafter Yes __ No __

8. Is there a program for health of school employees? Yes __ No __
   a. Do employees earn sick leave? Yes __ No __
   b. Is provision made for employee health insurance? Yes __ No __

9. Are preschool children examined and remediable defects corrected before entering school, including dental defects? Yes __ No __

10. First Aid
    a. Is there a health suite? Yes __ No __
        (1) Does it contain a special room for the care of the sick? Yes __ No __
        (2) Does this suite meet standards of Building Code? Yes __ No __
    b. Is there a first aid cabinet? Yes __ No __
        (1) Is this cabinet easily accessible in time of accident? Yes __ No __
        (2) Do you check contents weekly and refill if needed? Yes __ No __
        (3) Is someone trained in first aid designated to be called for all serious accidents? Yes __ No __
    c. Are all teachers trained in first aid? Yes __ No __
        (1) If not, what per cent? ____________________________

    a. Do you isolate sick children? Yes __ No __
    b. Do you have plans for transporting them to:
        (1) home? Yes __ No __
        (2) hospital? Yes __ No __
        (3) doctor? Yes __ No __

12. Civil Defense
    a. Does your school have an active civil defense program? Yes __ No __
    b. Is the school program of civil defense in accord with the state program of civil defense? Yes __ No __
    c. Does every child wear an identification tag? Yes __ No __
d. Has every child received instruction as to where to go when disaster hits?  
Yes ___  No ___

e. Has every child received instruction as to what to do and what precautions should be observed when disaster strikes?  
Yes ___  No ___

C. Physical Education and Recreation

1. Is the State law regarding physical education complied with?  
Yes ___  No ___

2. In Elementary School

a. By providing a program of physical education and recreation for all children?  
Yes ___  No ___

b. Teaching done by classroom teachers?  
Yes ___  No ___

c. Have they had training in physical education?  
Yes ___  No ___

d. Does the physical education teacher in high school help the elementary teachers?  
Yes ___  No ___

e. Is physical education coordinated with the total school health program?  
Yes ___  No ___

f. Is this a comprehensive instructional program planned progressively to promote:

   (1) The learning of motor skills? None __  Poor __  Fair __  Good __  Excellent __

   (2) The providing of sufficient physical activity for normal growth and development? None __  Poor __  Fair __  Good __  Excellent __

   (3) The teaching of games and sports for recreational use? None __  Poor __  Fair __  Good __  Excellent __

   (4) The teaching of arts and crafts for recreational purposes? None __  Poor __  Fair __  Good __  Excellent __

   (5) Does the program provide activities including:

      (1) Games, utilizing the fundamental activities of running, jumping, throwing, striking, dodging, falling and catching? None __  Poor __  Fair __  Good __  Excellent __

      (2) Rhythmic activities suited to the age of the child? None __  Poor __  Fair __  Good __  Excellent __

      (3) Stunts and self-testing activities? None __  Poor __  Fair __  Good __  Excellent __

      (4) Activities requiring self-expression, self-direction and group organization? None __  Poor __  Fair __  Good __  Excellent __

      (5) Modified activities suited to the abilities of the physically handicapped? None __  Poor __  Fair __  Good __  Excellent __

      (6) Intramural competition in sports and games adapted to age levels? (No interscholastic contests for children of these ages?) None __  Poor __  Fair __  Good __  Excellent __

      (7) Music (singing, piano, etc.) None __  Fair __  Good __  Excellent __
(8) Dramatics, hobbies, etc? None _ Poor _ Fair _ Good _ Excellent _

h. Time allotment:
   Daily period at least 30 minutes (most desirable) exclusive of lunch time and recess? Yes _ No _
   Three times per week? Yes _ No _
   Once a week? Yes _ No _

3. In High School
   a. By providing a program of physical education and recreation for all pupils? (band, chorus, military should not be substituted for physical education) Yes _ No _
   b. Is physical education coordinated with the total school health program? Yes _ No _
   c. Is the size of classes in keeping with that of other high school classes? Yes _ No _
   d. Are classes taught by teachers well trained in total school health program with special emphasis in physical education?
      (1) Women teachers for girls? Yes _ No _
      (2) Does this program provide opportunity for the promotion of normal growth through a wide range of activities, such as:
         (1) Free and individual play? None _ Poor _ Fair _ Good _ Excellent _
         (2) Sports and games? None _ Poor _ Fair _ Good _ Excellent _
         (3) Self-testing activities? None _ Poor _ Fair _ Good _ Excellent _
         (4) Stunts and tumbling, achievement tests in sports, and fundamental skill tests? None _ Poor _ Fair _ Good _ Excellent _
         (5) Swimming and life saving? None _ Poor _ Fair _ Good _ Excellent _
         (6) Prevention of fatigue through rest and relaxation? None _ Poor _ Fair _ Good _ Excellent _
         (7) Remedial and adapted sports? None _ Poor _ Fair _ Good _ Excellent _
         (8) Adequate program of intramural athletics for Junior high school students and all girls? (No interscholastic contests for children under 13 years of age.) None _ Poor _ Fair _ Good _ Excellent _
         (9) Intramural and interschool athletics for boys properly coached and supervised by teachers trained in total school health program with major in physical education? None _ Poor _ Fair _ Good _ Excellent _
(a) Are these programs in line with recommendations in New School Health Guide? Yes ____ No ____
(b) Is a physician present at each interscholastic contest? Yes ____ No ____
(10) Is the intramural and inter-scholastic athletic program for girls in line with that recommended in the new State School Health Guide? Yes ____ No ____
(11) Rhythmic fundamentals? None __ Poor __ Good __ Excellent __
(12) Co-educational and co-recreational activities? None __ Poor __ Fair __ Good __ Excellent __
(13) Properly dressed for all activities? None __ Poor __ Fair __ Good __ Excellent __
(14) Take showers following activities? None __ Poor __ Fair __ Good __ Excellent __
(15) Camping, hiking and outing? None __ Poor __ Fair __ Good __ Excellent __
(16) Arts and crafts? None __ Poor __ Fair __ Good __ Excellent __
(17) Music (singing, piano, etc.)? None __ Poor __ Fair __ Good __ Excellent __
(18) Dramatics, hobbies? None __ Poor __ Fair __ Good __ Excellent __

f. Facilities and Equipment
(1) Does your school have a gymnasium? Yes ____ No ____
(2) Is there one piece of play material per 8 children (i.e., soccer balls, bats, rackets, basketballs, etc.)? Yes ____ No ____
(3) Does your school have a locker room which provides:
   (a) A locker for each child participating in physical education program? Yes ____ No ____
   (b) Adequate shower facilities for physical education classes? Yes ____ No ____
   (c) Adequate toilet facilities? Yes ____ No ____
(4) Does your school have equipment for weighing and measuring pupils? Yes ____ No ____
(5) Does your school have adequate improved play space? Yes ____ No ____

g. Time allotment
(1) Does each pupil in high school participate in a period of physical activity comparable in length to other high school classes? Yes ____ No ____
   (a) Once each day? (desirable) Yes ____ No ____
   (b) Three times per week? Yes ____ No ____
   (c) Once per week? Yes ____ No ____
D. Health Instruction

1. Is health instruction integrated into the teaching of all subjects in:
   a. Elementary Schools?
      (1) Check subjects: Reading ___ Language ___ Science ___ Social Studies ___ Art ___ Music ___ Physical Education ___ Mathematics ___
   b. High School?
      (1) Check subjects: Biology ___ General Science ___ Chemistry ___ Physics ___ Physical Education ___ Home Making ___ Agriculture ___ English ___ Math ___ Social Studies ___ Military ___ Music ___ Art ___ Commercial ___

2. Is instruction given in the facts concerning the effects of alcohol on:
   a. The Body?
   b. Behavior of the individual?
   c. Economic conditions?
   d. Family relations?
   e. Civic responsibilities?
   f. Are teachers trained in alcohol education?

3. Is driver education offered in high school?
   a. Approved by State Department of Education?

4. Is instruction in safety measures included in the total school health program?
   a. Are records of accidents kept, giving location, cause and extent of injury?
   b. Are fire drills held as part of safety instruction?
   c. Are buildings and grounds checked regularly for safety hazards as part of instruction program?

5. Is a definite period set aside for health instruction in:
   a. Elementary School (7th-8th grades)?
   b. In High School?
      (1) Does this meet requirement of one unit of health instruction as outlined in Curriculum Framework for Georgia Schools and in New Georgia School Health Guide?
         (a) With at least one semester daily (more is desirable) in the ninth grade?
         (b) At least one semester daily (more is desirable) in the twelfth grade?
(c) Is this instruction done by teachers who are trained in total school health program with special emphasis on health instruction, comparable in quantity and quality to that required by teachers in other areas? Yes ___ No ___

c. Is this instruction in elementary and high school based upon the needs, interests and abilities of students as determined by:
   (1) Health examinations? Yes ___ No ___
   (2) Health practices? Yes ___ No ___
   (3) Health records? Yes ___ No ___
   (4) Teacher observations, etc.? Yes ___ No ___

   Does it include:
   (1) Health problems of school? Yes ___ No ___
   (2) Health problems of community? Yes ___ No ___

d. Instruction in mental health included? Yes ___ No ___
e. Instruction in dental health included? Yes ___ No ___
f. Instruction in first aid given to all students? Yes ___ No ___
g. Do teachers and pupils plan together health instruction?
   (1) Health department personnel participate in this planning? Yes ___ No ___

6. Is the health instructional program planned as part of the total school health program? Yes ___ No ___

a. Is it written into the total health program? Yes ___ No ___

7. Are other materials than textbooks used, as: (check)

   a. Is there adequate health material available in the school library? Yes ___ No ___
      (1) References for teachers? Yes ___ No ___
      (2) References for pupils? Yes ___ No ___

8. Is any health teaching done through such activities as: (check)
   trips to dairies Markets bakery water works grocery store fire department health department hospitals radio programs received at school special lectures assembly programs on health helping in community clean-up campaigns medical examinations immunizations weighing and measuring children dental examinations testing hearing vision using the cumulative health records school lunchroom program morning inspections teaching high school pupils how to drive
9. Is emphasis of health teaching directed to the formation of intelligent behavior and proper attitudes rather than knowledge for knowledge's sake, as evidenced by pupils:

a. Selecting adequate and balanced diet, when choices can be made at school and elsewhere? Yes No

b. Eating regularly and properly? Yes No

c. Drinking plenty of water daily? Yes No

d. Visiting dentist twice yearly and at other times when needed? Yes No

e. Brushing teeth properly before breakfast and after each meal? Yes No

f. Keeping their person clean and well groomed? Yes No

g. Practicing proper toilet habits? Yes No

h. Washing and drying hands with paper towels before meals? Yes No

(i) After visits to the toilet? Yes No

i. Playing outdoors except during inclement weather? Yes No

j. Working, resting, and relaxing at proper periods and getting proper amount of sleep? Yes No

k. Practicing good posture habits? Yes No

l. Taking proper care of eyes, ears, teeth? Yes No

m. Remaining at home when attacked with colds or other communicable diseases? Yes No

n. Helping to keep classrooms and other parts of buildings and grounds clean and attractive? Yes No

o. Helping to keep building properly ventilated and properly lighted? Yes No

p. Helping to keep seats properly adjusted to needs of pupils? Yes No

q. Observing proper safety rules at school? On streets? Yes No

Highways? Yes No

In homes? Yes No

r. Participating in monthly fire drills? Yes No

s. Showing interest in their growth and reasons for it? Yes No

t. Working together cooperatively and being kind and thoughtful? Yes No
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u. Having knowledge of and wearing and caring for proper clothing? Yes ___ No ___

v. Knowing how and properly caring for sick in home? Yes ___ No ___

w. Knowing how and administering first aid properly? Yes ___ No ___

x. Seeking scientific medical advice when ill rather than treating self with patent medicines or follow advice of unqualified person? Yes ___ No ___

y. Influencing in homes:
   Screening? Yes ___ No ___
   Providing better toilet facilities? Yes ___ No ___
   Better health habits of other members of family? Yes ___ No ___
   Improving water supply? Yes ___ No ___
   Helping to make home more attractive? Yes ___ No ___

E. Special Education

1. Does the school provide a program for exceptional children (mentally gifted, mentally retarded, with physical defects, emotionally disturbed or socially maladjusted)? Yes ___ No ___
   a. Which programs are included? 

2. Is this program approved by State Department of Education? Yes ___ No ___
   a. Which programs are needed? 

APPENDIX B

Tests -

Mental Health Analysis
Health Behavior Inventory
INSTRUCTIONS TO STUDENTS:

This booklet contains questions about a number of things the answers to which will show how you feel or think. There are no "right" or "wrong" answers to the questions. Some pupils will answer YES and others will answer NO to the same question. Work as fast as you can, but be sure to answer every question.

DO NOT WRITE OR MARK ON THIS BOOKLET UNLESS TOLD TO DO SO BY THE EXAMINER.
INSTRUCTIONS TO STUDENTS

DO NOT WRITE OR MARK ON THIS BOOKLET UNLESS TOLD TO DO SO BY THE EXAMINER.

You are to decide for each question whether the answer is YES or NO and mark it as you are told. The following are two sample questions:

SAMPLES

A. Have you ever washed an automobile?  YES  NO
B. Have you ever ridden in an airplane?  YES  NO

DIRECTIONS FOR MARKING ANSWERS

ON ANSWER SHEETS

Make a heavy black mark within the pair of dotted lines under the word YES or NO, whichever applies to you.

If you have ever washed an automobile, mark your answer to question A this way:

YES  NO

A  

If you have never ridden in an airplane, mark your answer to question B this way:

YES  NO

B

Mark the sample questions on your answer sheet now!

ON TEST BOOKLETS

Draw a circle around YES or NO, whichever applies to you.

If you have ever washed an automobile, make a circle around the YES in question A above this way:

A.  YES  NO

If you have never ridden in an airplane, make a circle around the NO in question B above this way:

B.  YES  NO

Mark the sample questions above now!

When you are told to begin, go right on from one page to another until you have answered all of the questions. Work as fast as you can without making mistakes, but be sure that you do not skip any questions. Now find item 1 in your test booklet and begin.
1. Do your folks usually let you choose some of your friends? **YES NO**

2. Have you found that you can talk freely with one or more of your teachers? **YES NO**

3. Are you usually able to get the best seat at a program or other gathering? **YES NO**

4. Do you often have to start eating before the others do because they take so long to get to the table? **YES NO**

5. Do several people seem to think that you will get along well in life? **YES NO**

6. Do people seem to hurt your feelings more often than they do the feelings of others? **YES NO**

7. Are things often so bad that you feel as though life is hardly worth living? **YES NO**

8. Are you often worried about dangers that you do not understand? **YES NO**

9. Have you found out how to keep people from feeling bad when they make some mistake? **YES NO**

10. Do you keep from showing that you are bothered when you lose at games or contests? **YES NO**

11. Are people often so unfair in their demands that you have to make many excuses for yourself? **YES NO**

12. Do you usually prefer being with people to being alone? **YES NO**

13. Do you have the reputation of doing your share when there are things to be done? **YES NO**

14. Have you found it hard to make friends with the people you like? **YES NO**

15. Do you usually try to join your friends in their work or play? **YES NO**

16. Have you found that most of your school subjects are interesting? **YES NO**

17. Do you feel less attractive than many of your classmates because your legs are too large or too small? **YES NO**

18. Are you troubled because your chin does not look right? **YES NO**

19. Are you unhappy because people notice that you have a scar on your face? **YES NO**

20. Do you like to spend more than the required amount of time on your schoolwork? **YES NO**

21. Do you believe that all people have some rights that should be respected? **YES NO**

22. Do you believe that people who have to work for a living are just as good as those who have so much money they need not work? **YES NO**

23. Do you have a hard time going to sleep? **YES NO**

24. Do you believe that people who do the right things will usually win out? **YES NO**

25. Do you have the habit of biting your fingernails? **YES NO**
26. Have you found that it pays to make a fuss when people try to stop you from doing the things you like? 

YES NO

27. Do some boys or girls get into your way so much that you have to push them aside? 

YES NO

28. Does your family sometimes go on picnics or other outings with you? 

YES NO

29. Do you have some friends of your own age among members of the opposite sex? 

YES NO

30. Do you have an especially good friend who will talk with you about your problems? 

YES NO

31. Do you often feel as though something holds you back from doing things that you would like to do? 

YES NO

32. Do you make a practice of trying to find out what your friends like to do? 

YES NO

33. Do you like to show people that you recognize their abilities? 

YES NO

34. Do you often become so interested in your thoughts that you fail to notice the people around you? 

YES NO

35. Do you find that you are more contented when you are alone than when you are with other people? 

YES NO

36. Are you a member of a group which often does interesting things together? 

YES NO

37. Do you usually have your best times with boys or girls who are younger than you? 

YES NO

38. Do you like to play games in the homes of your friends? 

YES NO

39. Do you take part in plays or programs at school? 

YES NO

40. Have you found that most students manage to get along in school better than you do? 

YES NO

41. Do you feel bad because of pimples or blemishes on your skin that keep you from looking attractive? 

YES NO

42. Do you have a job or do some kind of work that you like very much? 

YES NO

43. Do you feel that you are allowed to do most of the things that make life interesting? 

YES NO

44. When you play, do you like to play hard? 

YES NO

45. Do you feel bad because your body is not as well-formed as you would like? 

YES NO

46. Are you frequently troubled by stomach-aches? 

YES NO

47. Are you thinking or planning about what you are going to be when you grow up? 

YES NO

48. Do you believe that you should treat people the way you would like to be treated? 

YES NO

49. Do you find that you get dizzy rather often? 

YES NO

50. Do you find that you hum a great deal of the time? 

YES NO
51. Have you been able to get even with people you dislike by refusing to speak to them?  

52. Do you try to stay away from people who refuse to let you do the things you like?  

53. Is someone at home usually nice to you when you are in trouble?  

54. Have you found that someone else will usually take the biggest piece of something good to eat if you don't beat him to it?  

55. Have you found that other people's feelings are easily hurt by things you say?  

56. Have you found that it pays to tell people when they show good judgment?  

57. Do your friends seem to think that you are fair in your dealings with them?  

58. Have you often felt worried because people do not like you as well as they should?  

59. Are you often disappointed because few of your plans turn out the way you wish they would?  

60. Can you usually stop a quarrel between two people without hurting their feelings?  

61. Do you often feel that members of your family do not think as well of you as they should?  

62. Do people often claim that you have not done your work as well as you should?  

63. Do your classmates seem to think that their ideas are better than yours?  

64. Do you sometimes go camping or hiking with people of your own age?  

65. Have you felt that most of the other students seem to think they are better looking than you?  

66. Do you usually look forward with pleasure to the duties and responsibilities of each new day?  

67. Do you feel that teachers usually treat students as fairly as they deserve?  

68. Do you worry about the things that are said about you because you are too thin?  

69. Are you concerned because there are important things you cannot do because of your weight?  

70. Are you unhappy because people notice how uneven or unattractive your teeth are?  

71. Do you think that people who are either richer or poorer than you should be treated well?  

72. Do you have a great many headaches?  

73. Do you believe that people should be judged by what they do rather than by who they are?  

74. Do you think that good character is as important as the knowledge you get from books?  

75. Do you think that people should be as careful of the property of others as they are of their own?
76. Is there anyone at home with whom you can talk about your problems? **YES NO**

77. Have you found that you can get things more quickly by insisting on what you want? **YES NO**

78. Do your folks let you choose your clothes or other personal belongings? **YES NO**

79. Do the people at home often let you help decide what the family is going to do? **YES NO**

80. Have you found that it pays to tell others quite frankly about things you don't like? **YES NO**

81. Do you make a practice of going out of your way to help others? **YES NO**

82. Do you often feel unhappy without knowing the reason for your feelings? **YES NO**

83. Have you often caught yourself gazing into space or failing to hear what others were saying? **YES NO**

84. Does it make you feel better to let people know that you see their faults? **YES NO**

85. Is it easy for you to get your classmates to do things that should be done? **YES NO**

86. Are you a member of the Boy Scouts, Girl Scouts, or some other similar group? **YES NO**

87. Do you like to have your friends with you as much as you can? **YES NO**

88. Have you found that many people make the mistake of acting as though they cannot depend on you? **YES NO**

89. Do you go to school dances or socials, or would you like to if you were old enough? **YES NO**

90. Have you found that you do best in school when you receive considerable help from your teachers? **YES NO**

91. Do you feel bad because people notice that your mouth or lips have something the matter with them? **YES NO**

92. Are you troubled because there is something the matter with your feet or legs that keeps you from doing the things others do? **YES NO**

93. Does it seem to you that you are making good progress in school? **YES NO**

94. Do you usually feel good after you have worked or played hard? **YES NO**

95. Do you have interesting things to do when you get tired of work or study? **YES NO**

96. Do you stutter some at times? **YES NO**

97. Do you find that you must squint your eyes a great deal? **YES NO**

98. Do you believe that people of other colors, races, and beliefs are entitled to their rights? **YES NO**

99. Do you have the habit of “drumming” with your fingers? **YES NO**

100. Are you often bothered with eye strain? **YES NO**
101. Do you find that accidents and injuries hurt you much more than they do most people? **YES NO**

102. Do you find that it works to get mad at people who say mean things about you? **YES NO**

103. Do you have some good friends among your relatives? **YES NO**

104. Do people at home usually seem to believe the things you tell them? **YES NO**

105. Have you found that many people are unreasonable because they expect you to keep your feelings to yourself? **YES NO**

106. Do you like to give your classmates credit for what they know? **YES NO**

107. Have you found that it is best not to give people much advice? **YES NO**

108. Have people often claimed unfairly that you have many strange ideas? **YES NO**

109. Do you find that it is hard for you to rest and take things easy? **YES NO**

110. Are you often worried about what is going to happen to you in the future? **YES NO**

111. Do you take an active part in things rather than read or think about them? **YES NO**

112. Have you found that persons of the opposite sex are hard to get along with? **YES NO**

113. Do people often seem to think that you are not as bright as you really are? **YES NO**

114. When there is time, do you usually play or visit with your classmates? **YES NO**

115. Do you like to study with other boys or girls rather than alone? **YES NO**

116. Do you worry because you think you have an unsightly nose? **YES NO**

117. Do you choose to spend part of your time studying plants or animals? **YES NO**

118. Are there a number of topics which you like to discuss with your friends? **YES NO**

119. Have you sometimes felt bad because your feet are so large or so small? **YES NO**

120. Have you often felt that people considered you unattractive because of the shape of your ears? **YES NO**

121. Do you believe that people should accept the results of their acts? **YES NO**

122. Do you believe that happiness depends more on what you do than on what others do for you? **YES NO**

123. Do you sometimes walk or talk in your sleep? **YES NO**

124. Have you sometimes been troubled with nightmares? **YES NO**

125. Do you believe that everyone should be as careful to do what is expected of him as to insist on his rights? **YES NO**
126. No matter how hard it is, can you usually get people to pay more attention to you? YES NO

127. Do you feel that your folks like to have you bring friends home with you? YES NO

128. Do you often have good times at home with your folks? YES NO

129. Do many people pay so little attention to your needs that you have to quarrel with them? YES NO

130. Do you have to complain because you are expected to do so many things? YES NO

131. Have you often felt that you have more bad luck than most people? YES NO

132. Do you make a practice of helping other people have a good time at parties? YES NO

133. Do people seem to think that you usually keep your promises? YES NO

134. Do you make it a point not to talk much about the things you know? YES NO

135. Have you found that you sometimes like and sometimes hate the same people? YES NO

136. Do you have some hobbies in which other boys or girls are interested? YES NO

137. Have you often felt that you were left out of things you would like to have done? YES NO
151. Does someone at home help you get the money you need for things?  
YES NO

152. Are many people so unfair that you have to treat them badly?  
YES NO

153. Does one of your folks often take time to do things you like?  
YES NO

154. Do you know any people who can be trusted to keep your secrets?  
YES NO

155. Have you found that you get along best if you pay little attention to other people’s feelings?  
YES NO

156. Do you find it best not to tell people of the faults they have?  
YES NO

157. Do you often feel as though there is no use to keep on trying to do all the things you are supposed to do?  
YES NO

158. Is it easy for you to become interested in the things other people are doing?  
YES NO

159. Have you found that there are few people who deserve your friendship for long?  
YES NO

160. Have you found ways of getting out of most of your unpleasant duties?  
YES NO

161. Do you sometimes take part in planning or carrying on a party?  
YES NO

162. Are you a member of a boys’ or girls’ group that does interesting things?  
YES NO

163. Have you often felt that you will need more courage than other people if you are to succeed?  
YES NO

164. Do your friends seem to think that you are good at helping to get things done?  
YES NO

165. Have you found that it pays to tell people about the many things you have accomplished?  
YES NO

166. Do you have good times raising animals or playing with pets?  
YES NO

167. Have you often felt sensitive because of the size of your mouth?  
YES NO

168. Are you troubled because you are so stoop-shouldered you do not look as good as other people?  
YES NO

169. Have you often felt bad because you have many freckles?  
YES NO

170. Do you sometimes enjoy yourself by going fishing, swimming, or hiking?  
YES NO

171. Do you believe that people who are unable to take care of themselves should receive help?  
YES NO

172. Do you believe that most people are honest?  
YES NO

173. Do you frequently hear a buzzing sound in your ears?  
YES NO

174. Do your legs often feel too tense?  
YES NO

175. Do you often have shooting pains in your head?  
YES NO
176. Do most of your friends have the traits or qualities that you like?  
YES NO

177. Do you have many good talks about things with close friends?  
YES NO

178. Are there some people outside of your home who like to talk things over with you?  
YES NO

179. Have you found that if you want to be comfortable you cannot depend on others?  
YES NO

180. Have you found that you can often get out of trouble by stretching the truth a little?  
YES NO

181. Do you find it easy to be nice to people even when they disagree with you?  
YES NO

182. Have you found that it usually takes you a long time to get over it when you are not treated right?  
YES NO

183. Do your friends seem to think that you help them as much as they help you?  
YES NO

184. Do your friends seem to think that you stand by them as you should?  
YES NO

185. Have you learned to tell interesting stories when you have the chance to do so?  
YES NO

186. Do you enjoy trading, buying, or selling things?  
YES NO

187. Does it seem to you that most of your classmates are healthier than you are?  
YES NO

188. Does it seem to you that most of your friends can do things better than you can?  
YES NO

189. Have you found that it is usually someone else's fault when things go wrong?  
YES NO

190. Do you usually take part in the things that are going on at school?  
YES NO

191. Do you have pleasant times collecting stamps, coins, or other objects?  
YES NO

192. Do you often have an enjoyable time playing a musical instrument?  
YES NO

193. Are you concerned because you think your hair is too straight or too curly to look nice?  
YES NO

194. Do you like to spend part of your spare time making model boats, airplanes, or other objects?  
YES NO

195. Have you missed good times because something is the matter with your arms or hands?  
YES NO

196. Do you believe that most people are interested in seeing others succeed?  
YES NO

197. Are your arms extremely tense much of the time?  
YES NO

198. Are you often troubled with a stiff shoulder or back?  
YES NO

199. Do you think that, generally speaking, the world is becoming a better place in which to live?  
YES NO

200. Do you believe that most people spend too little time in play and recreation?  
YES NO
<table>
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DEvised by Louis P. Thorpe & Willis W. Clark • Ernest W. TiegS, Consultant

Examiner: __________________________ (_____ ) Your Age Today: __________ ( _____ ) Birth: __________ ( _____ )
GENERAL DIRECTIONS: The three parts of this inventory are concerned with your health habits, attitudes, and knowledge. Your answers will not be shown to any other student. Study the directions for each part and read the statements and questions carefully before marking your answers. When you finish Part I, go right on to the next part. Do not go back to a part once you have started on the next. DO NOT WRITE OR MARK IN THIS BOOKLET UNLESS TOLD TO DO SO.
DIRECTIONS: The first part of the inventory concerns your health habits. It is not a test of what you should do. Read each of the statements. Decide which of the three answer choices is closest to what you actually do. Mark

U if you usually do what the statement describes;
S if you sometimes—but not so often as “usually”—do what the statement describes;
N if you never do what the statement describes.

SAMPLE: A. Do you sleep in a room with a window open?  U  S  N  (A)

If you decided on “sometimes” as your response to Sample A, you would mark the S to show your answer.

IF YOU ARE MARKING ON AN ANSWER FORM, READ THIS COLUMN ONLY.

Since your answer is “sometimes,” you would mark the letter S in the answer row for Sample A as shown on your answer form.

IF YOU ARE MARKING IN THIS BOOKLET, READ THIS COLUMN ONLY.

Since your answer is “S”, make a circle around the letter “S” in the booklet, to the right of the question, as shown below:

U  S  N  (A)

If you make a mistake or wish to change an answer, erase the first circle. Then, make a circle around the new answer you have chosen.

Work as fast as you can without making mistakes. Now, begin Part I.
PART I

DIRECTIONS: Answer the twenty-five questions on this and the next page. Mark only one answer to each item. Remember, answer according to what you do, not what you think you should do or what you think is right or wrong.

1. Each day, do you eat at least two servings of vegetables, including one green leafy vegetable? USN (1)
2. Do you go to school when you have a cold? USN (2)
3. Do you follow a regular schedule for going to bed at night and getting up in the morning? USN (3)
4. When reading, do you arrange the light so that it comes over your shoulder? USN (4)
5. Do you take a bath or shower every day? USN (5)
6. When it is necessary to walk in the street or road, do you walk on the left side? USN (6)
7. Do you have your teeth examined by a dentist at least once every six months? USN (7)
8. When you feel the need for a bowel movement, do you put it off even though the toilet is handy? USN (8)
9. Do you work hard to become skillful in one or more sports? USN (9)
10. Do you treat skin disorders (acne, boils, athlete’s foot, etc.) with salves or other cures which have not been prescribed by a physician? USN (10)
11. Do you sleep at least nine hours each night? USN (11)
12. When you get a small cut or scratch, do you immediately wash the wound with clean, soapy water and bandage it lightly with a clean cloth? USN (12)
13. Do you eat some raw fruits and fresh vegetables every day? USN (13)
**MARK:** U if you *usually* do what the statement says;  
S if you *sometimes* do what the statement says;  
N if you *never* do what the statement says.

14. Do you drink at least one cup of coffee every day?  
   U S N (14)

15. After each meal, do you brush your teeth or rinse out your mouth?  
   U S N (15)

16. Do you smoke cigarettes?  
   U S N (16)

17. Do you cover your nose or mouth with a handkerchief when you cough or sneeze?  
   U S N (17)

18. Do you drink at least three glasses of milk each day?  
   U S N (18)

19. Do you accept as being true the health advertisements in newspapers and magazines or on television and radio?  
   U S N (19)

20. Do you throw waste paper on the school grounds?  
   U S N (20)

21. When bothered about a sex question, do you talk with your mother or father or the school counselor?  
   U S N (21)

22. On cool mornings, when you think it will be warm later in the day, do you come to school without a sweater or jacket?  
   U S N (22)

23. Do you avoid eating foods which require lots of chewing?  
   U S N (23)

24. If there are marked crosswalks, do you use them in crossing streets?  
   U S N (24)

25. Do you worry about your health?  
   U S N (25)

**GO RIGHT ON TO PART II.**
PART II

DIRECTIONS: Each of the following statements is an opinion about a certain health habit. Read each statement carefully, then decide which of the three answer choices is closest to your opinion. Mark

A if you agree with the opinion stated;
? if you are uncertain about the opinion stated;
D if you disagree with the opinion stated.

Remember! This part of the inventory is to find out how you feel or think, not what you do.

26. It is not healthy to play strenuous games. A ? D (26)
27. Eating raw fruits and vegetables every day is a poor food habit. A ? D (27)
28. One should have a regular schedule for going to bed and getting up. A ? D (28)
29. Overexposure to the sun is harmful to the skin, and should be avoided. A ? D (29)
30. Throwing paper on the school grounds or on public streets is a sign of poor citizenship. A ? D (30)
31. Constant worry about one’s health will probably lead to better health. A ? D (31)
32. When hungry between meals, it is a good idea to eat a candy bar. A ? D (32)
33. When coughing or sneezing, the nose and mouth should be covered by a handkerchief. A ? D (33)
34. It is usually best to discuss sex problems with one’s parents or with the school counselor. A ? D (34)
35. When the eyes hurt, they should be rubbed. A ? D (35)
36. Foods that require lots of chewing should be avoided. A ? D (36)
MARK: A if you agree with the opinion;  
? if you are uncertain;  
D if you disagree.

37. Boys and girls in the seventh, eighth and ninth grades should get at least nine hours of sleep each night. A ? D (37)
38. When walking, the toes should be pointed straight ahead. A ? D (38)
39. A good breakfast should include at least one cup of coffee. A ? D (39)
40. On days when the mornings are cool and the rest of the day warm, it is unnecessary to wear a jacket to school. A ? D (40)
41. Growing boys and girls should drink three or four glasses of milk each day. A ? D (41)
42. Quarrels should be settled quickly and then forgotten. A ? D (42)
43. It is dangerous to wash small cuts with clean, soapy water and then bandage them with a clean cloth. A ? D (43)
44. Wax should be carefully cleaned from the ears with a hairpin, toothpick, or some other small sharp object. A ? D (44)
45. The teeth should be examined by a dentist at least once every six months. A ? D (45)
46. It is all right to put off going to the toilet at the time the need is first felt. A ? D (46)
47. When necessary to blow one’s nose, it should be blown hard and forcefully. A ? D (47)
48. Drinking one or two bottles of soft drinks each day is a harmless habit. A ? D (48)
49. When one must walk in the street, it is best to walk on the right side. A ? D (49)
50. Health advertisements in newspapers and magazines and on television and radio can be accepted as true. A ? D (50)

GO RIGHT TO PART III.
PART III

DIRECTIONS: Your answer to each of the following statements will indicate your general knowledge about health. Each statement is followed by four answer choices. Read each item carefully, then decide on the one correct answer.
If you are using an answer form, continue to mark your answers as you have been doing. If you are marking in this booklet, write the number of your choice in the answer space to the right of each problem.

51. One's daily diet should include foods from four main groups. Two of these groups are (a) meat, fish, poultry, eggs, dried peas, and beans; (b) milk and milk products. The other two groups are:
   1. Leafy green and yellow vegetables; Potatoes, other vegetables, and fruits.
   2. Fruits and vegetables; Enriched or whole-grain bread and cereal.
   3. Leafy green and yellow vegetables; Butter, fortified margarine, or energy foods.
   4. Potatoes and other vegetables; Bread, flour, or cereals.

52. One of the main reasons why eating sweets between meals may be harmful is that they
   1. cause thirstiness, and as a result, the body takes in too much water.
   2. are expensive to buy.
   3. overheat the body.
   4. may discourage the eating of necessary foods.

53. It is a good practice to eat two good-sized servings of vegetables each day, because such foods
   1. are usually fresh and clean.
   2. provide vitamins, minerals, and bulk which aid regular bowel movements.
   3. contain large amounts of starches and fats.
   4. are important in providing quick energy.

54. A good daily diet usually includes some raw fruits and vegetables, because these foods
   1. contain valuable vitamins and minerals.
   2. are harder to digest when cooked.
   3. are inexpensive and fill you up.
   4. contain large amounts of protein.

55. Drinking plenty of water daily is important because
   1. water furnishes power to work.
   2. the body needs to replace water lost through excretion.
   3. water gives heat.
   4. water thins the blood.
56. It is a good health habit to drink about a quart of milk each day, because milk is
   1. a good source of the calcium necessary for building strong bones and teeth.
   2. easy to obtain and serve.
   3. one of the most sanitary types of foods.
   4. a good source of material for building white blood corpuscles.

57. A good, well-balanced breakfast is
   1. not necessary if one has a good lunch and dinner.
   2. necessary so that one can be in top physical and mental condition during the morning hours.
   3. necessary only for people who do hard physical labor.
   4. not necessary for growing boys and girls.

58. Putting off having a bowel movement may cause
   1. constipation.
   2. food poisoning.
   3. sinus trouble.
   4. ulcers.

59. A person who regularly takes laxatives in order to stimulate bowel movements is
   1. doing the best thing, because a daily bowel movement is necessary at any cost.
   2. following a practice that would be recommended by a doctor.
   3. probably going to be sick.
   4. probably doing the wrong thing (unless advised by his doctor), because he is disregarding the natural function of the body.

60. Eating foods that require lots of chewing is
   1. possibly harmful to the teeth and gums.
   2. healthy for the gums and teeth.
   3. hard on the digestive system.
   4. harmful because it uses up too much of the saliva in the mouth.

61. In cleaning the inner and outer surfaces of the teeth, the toothbrush should be
   1. rolled or drawn from the gum line to the biting edges.
   2. rolled or drawn from the biting edges to the gum line.
   3. rolled or drawn both away and toward the gum line.
   4. pushed forward and sideways on the surface of the teeth.
62. Brushing teeth after meals is a good health habit because
   1. it dislodges food particles which can be swallowed and digested with the food just eaten.
   2. food which remains between the teeth for several hours may contribute to tooth decay.
   3. it keeps the enamel on the teeth from getting stained.
   4. it helps prevent bad breath.

63. A daily habit of drinking one or two soft drinks
   1. is healthful because of energy-giving sugar in the drinks.
   2. has no harmful effects.
   3. may cause tooth decay because of the sugar in the drinks.
   4. aids the teeth, because it washes food particles out of the teeth and down the throat.

64. In order to keep teeth healthy, it is a good idea to visit the dentist
   1. at least once every six months, even though there is no sign of trouble.
   2. at the first sign of tooth trouble.
   3. when you have a bad toothache.
   4. if home remedies fail to cure a bad toothache.

65. The most important reason why boys and girls from eleven to fifteen years of age should get about nine hours’ sleep each night is that
   1. without plenty of sleep, the body may stop growing.
   2. without plenty of sleep, the brain cannot fully develop.
   3. the eyes need the rest.
   4. sleep helps save and build up energy.

66. Following a regular schedule in going to bed at night and getting up in the morning is a good health habit because
   1. the brain is rested more easily on a regular schedule.
   2. the bones and muscles will then grow at the same rate.
   3. it provides one of the best chances for pleasant, refreshing sleep.
   4. an alarm clock will not be needed.

67. Vigorous sports such as swimming, tennis, and basketball
   1. improve the general physical health.
   2. have a damaging effect upon the heart.
   3. are not as good exercise as walking.
   4. should be avoided by boys and girls who are underweight.
68. One of the best ways to make sure of continued participation in sports is to

1. use the best equipment that can be bought.
2. take part in sports every day, whether one feels like it or not.
3. develop skill so that playing is more enjoyable.
4. play with persons who are more skilled.

69. The best position for standing and walking is with one's

1. arms folded.
2. hands in pockets.
3. toes pointed slightly outward.
4. abdomen in, and feet pointing straight ahead.

70. Health advertisements in magazines and newspapers and on radio and television

1. can be believed completely.
2. are always of doubtful truth.
3. should be investigated thoroughly before buying any product advertised.
4. are reliable if the product is endorsed by well-known people.

71. A good way to avoid catching a contagious disease is to

1. keep all windows closed.
2. work only six hours a day.
3. keep the house warm.
4. avoid close contact with sick people.

72. In choosing clothes to wear for the day, the most important thing to consider is whether they

1. are suited to the weather.
2. are sturdy enough for school wear.
3. are the right style.
4. will show the dirt.

73. The most important times to wash the hands are

1. before breakfast and before going to bed.
2. before eating and after using the toilet.
3. after playing hard games.
4. when the hands look dirty.
74. It is best to stay at home when suffering from a cold, because
   1. one is more likely to obtain needed rest.
   2. drugstore cold remedies can be used.
   3. more food is available.
   4. one can be more easily protected from cold drafts.

75. Colds are caused by
   1. sitting or sleeping in a draft.
   2. one or more viruses.
   3. bacteria.
   4. exposure to rapidly changing temperature.

76. A good way to keep germs from spreading when coughing or sneezing is to
   1. use a handkerchief to cover the nose and mouth.
   2. cough and sneeze only when out of doors.
   3. turn the face away from nearby persons.
   4. keep a cough drop in the mouth most of the time.

77. The best way to avoid getting smallpox is to
   1. avoid people who have the disease.
   2. be vaccinated at age fourteen.
   3. be vaccinated every four or five years.
   4. keep the body clean and free from germs.

78. Traffic signals
   1. may be disregarded if there are no automobiles in sight.
   2. are to be obeyed by everyone.
   3. are put up mainly for the benefit of drivers.
   4. are unnecessary in smaller cities.

79. Playing in the street is
   1. dangerous under any circumstances.
   2. all right if a careful watch is kept for cars.
   3. not a good thing to do, because most streets are too narrow for games.
   4. advisable only when there is no other place to play.
80. A marked crosswalk at the corner is the safest place to cross the street, because

1. cars usually travel slowly near a crosswalk.
2. policemen are usually on duty near crosswalks.
3. motorists are usually more alert when driving in the vicinity of a crosswalk.
4. pedestrians are safe in a crosswalk since they have the right-of-way.

81. The best way to get the right amount of healthful sunlight is to

1. lie in the sun for about two hours on the first warm day of spring.
2. use plenty of sun-tan oil so the skin won't be burned.
3. play out of doors whenever possible, being careful to expose the bare skin to the sun gradually.
4. use a sun lamp at home for fifteen minutes each day.

82. If there is no path or sidewalk and it is necessary to walk in the street, it is best to

1. walk on the right, because it is easier to get a lift on that side.
2. walk in the center of the road, because motorists usually drive on the sides.
3. walk on the right side, because it is the side on which traffic is supposed to move.
4. walk on the left side, because oncoming traffic can be seen and avoided more easily.

83. The best treatment for a small scratch or cut is to

1. stop the bleeding at once and bandage the cut.
2. wash it off and leave it uncovered so the air can get to it.
3. cover it with a clean cloth.
4. promptly wash with clean, soapy water and bandage it lightly with a clean cloth.

84. Rubbing the eyes with the hands is

1. a good thing to do when the eyes are tired.
2. a good thing to do if something gets in the eye.
3. a poor thing to do because germs may be carried to the eye.
4. not desirable because the eyeball may be pushed out of focus.

85. When reading, the light should come over one's shoulder, because in this position

1. less light is needed.
2. the light is well distributed and other people can use it.
3. the light switch can be easily reached.
4. there is little chance of direct glare.
86. When a puzzling sex question arises, it is a good idea to talk it over with one or both parents or with the school counselor because

1. they are interested in finding out what is troubling young people.
2. they always have plenty of time to talk about such questions.
3. one of these persons probably has the knowledge and experience which can help in answering the question.
4. the right answer can always be obtained from one of these persons.

87. It is not natural to want to

1. play.
2. work.
3. always be alone.
4. have boy or girl friends.

88. The person having the best idea about his own health

1. spends most of his time and thought improving his health.
2. never says he is sick.
3. worries about his health most of the time.
4. takes sensible health precautions and then thinks about other things.

89. One of the best qualities a boy or girl can have is the ability to

1. do good work on a job which he or she enjoys.
2. do average work on jobs which are not enjoyable.
3. do the best he or she can on any task that is undertaken.
4. find short-cuts to a job so it can be finished quickly.

90. Quarrels should be settled quickly and then forgotten because

1. this will make the quarrelers good friends.
2. carrying grudges usually results in even more unhappiness.
3. quarrels are not important.
4. to do otherwise may cause trouble with the school principal or with parents.

91. Some of the main qualities that enable a boy or girl to make and keep friends are:

1. interest in others, willingness to help others, dependability, being a good listener.
2. dressing in smart, stylish clothes, being a good student, being on time for all appointments.
3. being a good athlete, knowing the latest slang, being on good terms with teachers.
4. being willing to go along with the group, talking a lot, doing something different in order to attract attention.
92. Coffee
   1. contains caffeine, which stimulates the heart.
   2. is harmless if one does not drink more than two cups a day.
   3. is a good quick-energy drink.
   4. has nicotine in it.

93. The drinking of alcoholic beverages can result in
   1. rotting of the lining of the stomach.
   2. destruction of brain cells.
   3. a habit that is very difficult to overcome.
   4. an unhealthy effect upon the brain, nervous system, heart and circulatory system.

94. The habit of smoking cigarettes
   1. has very little effect upon persons over 21 years of age.
   2. is harmful only to those who smoke excessively.
   3. is harmful to a few people and helpful to many.
   4. is harmful to all smokers.

95. A bath or shower each day
   1. is not necessary.
   2. is desirable, because it cleanses the skin of dirt and bacteria.
   3. is necessary for the prevention of disease.
   4. will prevent disagreeable body odors.

96. The best way to keep the skin free from pimples and blackheads is to
   1. scrub well with strong yellow soap.
   2. avoid sunlight and cold winds.
   3. use cleansing cream on the face each night.
   4. wash the skin thoroughly with mild soap and water and eat wholesome foods.

97. Removing wax from the ear by using a damp washcloth held over the index finger is a
   1. poor practice, because water may seep into the ear.
   2. poor practice, because the roughness of the cloth may irritate the lining of the ear.
   3. good practice, if care is taken.
   4. good practice, if the cloth is twisted into a sharp point so it penetrates deeply into the ear.
98. The best thing to do for skin troubles (boils, acne, athlete’s foot, etc.) is to
   1. watch newspaper ads to find the name of a good medicine.
   2. go to a physician for treatment.
   3. ask the drugstore pharmacist to recommend a good medicine.
   4. go to the drugstore, look at all the available medicines, and buy the one that
      seems best.

99. The student who is a good citizen and considers the appearance of his school
   1. throws waste paper in the corner of a room rather than in the center where
      it is easily noticed.
   2. crushes waste paper into a small ball before throwing it on the ground.
   3. puts waste paper in the containers provided for that purpose.
   4. crushes waste paper into a small ball and puts it in his school desk or locker.

100. Spitting on the floor or sidewalk is
    1. a dangerous practice, because disease germs are easily spread in this way.
    2. harmless if the person spitting is free from disease.
    3. sometimes necessary if a person has a cold.
    4. all right if the floors and sidewalks are cleaned daily.
# Health Behavior Inventory
## Junior High Level

- **Work Sheet and Profile**
  - Directions for both group and individual analysis are found in Part 2 of the Manual.

## Part 1 (Practices)

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<tr>
<td>2. Personal Cleanliness and Skin Care</td>
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<td>21</td>
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<tr>
<td>3. Mental Health</td>
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<td>4. Personal Health</td>
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<td>5. Community Health</td>
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## Part II (Attitudes)

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## Part III (Knowledge)

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<thead>
<tr>
<th>Item Number</th>
<th>Preferred Response</th>
<th>% of Preferred Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nutrition</td>
<td>A</td>
<td>5</td>
</tr>
<tr>
<td>2. Personal Cleanliness and Skin Care</td>
<td>B</td>
<td>21</td>
</tr>
<tr>
<td>3. Mental Health</td>
<td>C</td>
<td>8</td>
</tr>
<tr>
<td>4. Personal Health</td>
<td>A</td>
<td>2</td>
</tr>
<tr>
<td>5. Community Health</td>
<td>B</td>
<td>17</td>
</tr>
</tbody>
</table>

## Raw Score

- Raw Score: __________
- %-ILE: __________
- Standard Score: __________