August 1, 1958

A study of the status of the school health program in the negro schools, Houston County, Georgia, 1956-1957

Ethel Thomas
Atlanta University

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A STUDY OF THE STATUS OF THE SCHOOL HEALTH
PROGRAM IN THE NEGRO SCHOOLS, HOUSTON
COUNTY, GEORGIA, 1956-1957

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
ETHEL THOMAS

SCHOOL OF EDUCATION

ATLANTA UNIVERSITY

ATLANTA, GEORGIA

AUGUST, 1958

\( R = 1 \times R - 19 \)
DEDICATION

To My Advisor
Dr. Laurence E. Boyd
for
His Patience and Encouragement
Throughout the Period of this Research

E. Le T.
ACKNOWLEDGEMENT

The writer wishes to express her sincere appreciation to all of those who have assisted in making possible the completion of this research. Specifically, she wishes to express her heartfelt thanks to the following individuals and/or groups: (a) to the teacher-personnel in each of the four schools, the members of which, executed the questionnaire which constituted the basic source of the data for this study; (b) to Mr. L. W. Tabor, Superintendent of the Houston County Schools, for the approval of and cooperation in the conduct of this study; (c) to Mr. A. Chester Robinson, Instructor in the Health Department of the Fort Valley State College for his continuing encouragement throughout the study; (d) to Mr. B. F. Bullock, Instructor of Rural Life, School of Education, Atlanta University, whose lectures in a summer course inspired her to do this type of research; and (e) to Dr. Laurence E. Boyd, Advisor, Dr. Edward K. Weaver, Co-Advisor, and Mrs. Jennie Douglass Taylor, Instructor in Health, Atlanta University Summer School, Resource-consultant, for their assistance and guidance in the specific areas of their respective competence and interest.

E. L. T.
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CHAPTER I

INTRODUCTION

Rationale. -- The provision of a school environment where children can live, grow, and learn happily together has become an important feature of the school health program. This applies both to the physical environment and to the organization of the school program, the classroom procedures, the attitudes of both the teaching and non-teaching personnel toward the pupils and toward one another, and other elements which play a part in conditioning the atmosphere of the school.

The total health program involves four basic inter-related and coordinated aspects: health services, health instruction, physical education and recreation and healthful school environment. Unfortunately, many institutions of higher education operate their school health program from the viewpoint of health services only, leaving out the other three intimate aspects of the total program of health: health instruction, environment, and physical and recreational education.

"Health has been a fundamental concept in any educational objectives proposed by curriculum constructors."2 For instance, health was the first of the seven cardinal principles of Education; and was followed by emphasis in the Four Objectives (Purposes) set forth by the Educational Policies Commission. Within the past four years the State


Department of Education of Georgia has placed concentrated emphasis on a Health Program within the Georgia Curriculum Framework, a guide to the curriculum offering of the school.

Selby states, "Health education is a continuing and well-balanced educational program which has for its goal the improvement of human living. It is an integral part of the school curriculum and the day-by-day life in any community."¹

Each young child looks eagerly forward to the time when he will go to school. He brings with him to school his personality, his physical status, his intellectual background. He brings with him potentialities for growth, development and efficiency. Parents, in the main, want the schools to offer opportunities for every child to have the essential elements of wholesome and healthy living. Everyone in the home or in the school situation has a responsibility for this growth and efficient development of the individual child.

In the home, the program of health education includes: (1) a knowledge of and a determination to practice those procedures which hold to keep the family well; (2) a knowledge of healthful environmental factors (with provisions for them); and (3) procedures which help the mental, social, emotional and spiritual growth of children.

In the school, health education means the use of all natural situations occurring in the school day to give the children an understanding of the practices which help one to keep well and to live more effectively.

No health education program in any school can be successful unless it is developed in active cooperation with the home; and with interested community agencies.

In the community, public health is concerned with (1) sanitary problems, (2) keeping the masses of people well, and (3) improving ways of living through information, education, legislation and the cooperation of all agencies in the area which work for community progress.

During the past two years, the schools of Houston County, Georgia, have been in a consolidated school program. Educational programs in these consolidated school units are receiving new emphasis. One result has been a recognition of the need for providing varied types of health, physical and recreational opportunities appropriate to children and youth of all ages.

Administrators (Principals and Jeans Teachers) classroom teachers, custodial, lunchroom and other personnel must therefore, re-educate themselves to the increase services which they must render pupils and the lay public.

They must seriously examine the school health program for implications inherent in such questions as the following: What changed behaviors may be needed in terms of cleanliness and sanitations? How will the health program affect administrative and custodial services? How shall the buildings and grounds be kept aesthetically and educationally conducive to learning? Shall we purchase the same kinds of charts, maps, globes and the like for the larger, more adequately illuminated rooms? Will children be able to see with equal ease maps, charts and other visual
materials used in the small size rooms and in the large size rooms? Shall group discussions and other activities be carried on in the same manner? These, and many other questions, arise and should be dealt with in providing the kind of healthful school environment which is basic to the development of a total school health program.

The writer's interest in the problem of School Health was aroused and took shape during her participation in a course Rural Problems and Family Life which was pursued during a Summer School Session at Atlanta University, Atlanta, Georgia.

This interest was further intensified by the stepped up program of emphasis upon School Health in the Public Schools of Georgia in the recent years; therefore, the writer decided to do a research in the area of School Health as partial fulfillment of the requirements of Master of Arts Degree, Atlanta University, Atlanta, Georgia.

Statement of the Problem— The problem in this study is to determine the nature and scope of the separate areas of (a) Healthful School Environment, (b) Health Services, (c) Physical Education and Recreation, (d) Health Instruction and (e) Special Education, of the total Health Program in the Houston County Schools, Georgia, 1956-1957.

Limitations— This study was limited to the three elementary schools and the elementary department of Houston County Training School of Houston County, Georgia, 1956-1957.

Another limitation of this study was the inherent limitations of the questionnaire technique, itself, namely: (a) the extent of the knowledge about the required data possessed by the respondents; (b) the
willingness of the respondents to react to the questionnaire items, and
(c) the objectivity of the questionnaire items, together with the
objectivity of the responses of the respondents.

Purpose of the Study. -- The major purpose of this research was to
ascertain the nature and scope of the physical facilities, the services
rendered, the instructional activities, and the personnel involved in
the overall program of Health Education found to be operative in the
Negro schools of Houston County, Georgia, 1956-1957. More specifically,
the purposes of this research were as follows:

1. To determine the nature and scope of the present and projected
program of Health Education in the Houston County Schools,
Georgia, 1956-1957.

2. To determine the extent to which the facilities are adequate for
carrying on the Health Program in the schools.

3. To determine the extent to which there are cooperative Health
Services offered by the school and the community agencies.

4. To determine the extent to which there are cooperative Health
Services and Health Instruction which are integral parts of the
total instructional program of the school; and are provided
specific time allotment for their performances.

5. To determine the extent to which medical examinations, immuni-
sation, and follow-up services are carried out.

6. To determine to what extent a comprehensive system of records
and reports has been set up and maintained by the schools.

7. To develop a comprehensive scheme of appraisal and evaluation
of the operation of the Health Program in the schools.

8. To develop a suggestive program of Health Education for the
Houston County Schools, Georgia.

9. To formulate whatever educational implications, if any, for
educational theory and practices as may be derived from the
analysis and interpretations of the data.
Definition of Terms.-- Authorities differ in regard to the
terminology used in the field of health, physical education, and
recreation; therefore, it is necessary to define or characterize certain
significant terms as they will be used throughout this study.¹

1. The term, "Health," as used in this study refers to that quality
of life that renders the individual fit to live most and serve
best Health in the research is also used to mean that subject in
the classroom which deals with instructing one how to care for
his body to attain physical fitness.²

2. The term, "Healthful School Living," as used in this study
refers to a term which designates the provision of a safe and
healthful school day and the establishment of interpersonal
relationships favorable to the best emotional, social and
physical health of pupils.³

3. The term, "Health Services," as used in this study refers to
the 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 corrections of remedial defects;
(d) help prevent and control disease; (e) provide emergency
care for the sick or injured.⁴

4. The term, "Health Instruction," as used in this study refers to
that organization of learning experiences directed toward the
development of favorable health knowledge, attitudes and
practices.⁵

¹ American Association of School Administrators, Health in School,
² Ibid.
³ Journal of American Association for Health, Physical Education and
Recreation, XXII No. 7 (September, 1961), p. 14 as cited by "Report of
the Committee on Terminology" in School Health Education, University
of California, Los Angeles (August, 1962), p. 2
⁴ American Association of School Administrators, Health in Schools,
⁵ Journal of the American Association for Health, Physical Education
and Recreation, XXII No. 7 (September, 1961) p. 14 as cited by "Report
of the Committee on Terminology" in School Health Education, University
5. The term, "Recreation," as used in this study refers to leisure-time activity in which the individual engages because he desired and chose to do so. It has been variously defined as amusement, refreshment, diversion. Recreation is broad enough to include play and its every expression and also many activities that are usually not thought of as play—music, drama, the crafts, every free activity and especially creative activity which make for enrichment of life and abundant living.

6. The term, "Recreation," as used in this study refers to an attitude or spirit which finds expression in varied forms of activity of the children, youth and adults.

7. The term, "Mental Health," as used in this study refers to the ability of an individual to adjust satisfactory to the various strains which he meets in life.

8. The term, "Total Health Program," as used in this study refers to the school procedures that contribute to the maintenance and improvement of the health of pupils and school personnel, including health services, health education and healthful living.

Locale.—Perry is the county seat of Houston County, and is located in the central part of Georgia, twenty-eight miles south of Macon, Georgia. Two Federal highways run through Perry, Georgia. Highway 341 runs Northeast and southwest. U. S. highway No. 41 runs north and southeast which makes the town an alert clean touring town.

There is a population of 35,000 of which sixty-five per cent are Negroes.

The town of Perry, Georgia is located in a productive farming region. The leading products in the county are peaches, pedans, peanuts, cotton and watermelons. The Warner Robins Air Force Base is located in Houston County, and is commuting distance of both Macon and Perry. A large number of Negroes from Perry are employed at this Base. Most of the Negroes employed in the industries are classified as unskilled workers, a few are classified as skilled workers, a large number are classified as personnel and domestic workers, and a very small number as semi-professional and public workers.

There are three modern elementary schools and one modern combination high and elementary school in Houston County, namely: Southside, New Hope, Paul Stephens, and the County Training School.

There are 14 classrooms in the Southside School; 19 in New Hope Elementary School; 16 classrooms in the Pearl Stephens School; and 30 classroom in the combination High and Elementary County Training School, with 12 classrooms being used for the Elementary School work. The enrollment by Schools are:

<table>
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<th>School</th>
<th>Boys</th>
<th>Girls</th>
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<tr>
<td>Houston County Training</td>
<td>261</td>
<td>202</td>
<td>463</td>
</tr>
<tr>
<td>New Hope Elementary</td>
<td>258</td>
<td>235</td>
<td>493</td>
</tr>
<tr>
<td>Pearl Stephens</td>
<td>290</td>
<td>231</td>
<td>521</td>
</tr>
<tr>
<td>Southside Elementary</td>
<td>217</td>
<td>230</td>
<td>447</td>
</tr>
<tr>
<td>Total</td>
<td>1026</td>
<td>946</td>
<td>1972</td>
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There are three white doctors and one dentist; and two private clinics whose services are available to and are used by Negroes. However,
medical service in the homes of the Negroes is not available during the late hours of the night.

Description of the Subjects.—The subjects in this study were the fifty-eight elementary teachers and 1972 pupils who constitute the school population in three consolidated elementary schools and the elementary department of the Houston County Training School.

Description of the Instruments.—The research instruments used to collect the necessary data for this study were: (a) specifically designed questionnaire, (b) documentary analysis of official school records, and (c) interviews with the school and community population wherever indicated.

There were two types of questionnaires, namely: (a) The State Department of Education's Appraisal of the Health Program in Schools and (b) Teacher-Personnel and Healthful School Environment, which were used in this study. The Appraisal of the Health Program in Schools was designed for the health program in the schools and it consisted of questions in the areas of appraisal of (1) Organization and Administration of the School Health Program such as: Personnel, Evaluation Procedure, In-service Training and the Health Program; (2) the scope of the School Health Program such as: Health-School-Community Environment, Health Service, Physical Education and Recreation, Health Instruction and Special Education.

The questionnaire on Teacher-Personnel and Healthful School Environment was designed for the teachers and was concerned with the most important problems in the area of Healthful School Living such as: (a) Teacher qualifications and procedures; (b) general information on
lunchroom, personnel, services, and certification; (c) pupil-teacher relationship, discipline, individual differences and "fatigue-climate."

Method of Research.— The Descriptive-Survey Method of research, employing the techniques of the questionnaire, interview, official records, check-list, and observation, was used to gather the data required for this study.

Procedure.— The data for this study were gathered, analyzed, and presented as follows:

1. The literature related to this study was reviewed, summarized, and presented in the finished thesis-copy.

2. The questionnaire of Health Appraisal by the State Department of Health was executed by the principals of the cooperating schools.

3. The questionnaire on Teacher-Personnel and Healthful School Environment was executed by the elementary school teachers in four schools.

4. Interviews were held with teachers and the data derived therefrom was evaluated and presented in the thesis.

5. The data obtained from the questionnaires were assembled in proper tables, analyzed, interpreted and presented in the thesis copy.

6. Findings, conclusions, implications and recommendations derived from the analysis and interpretation of the data were presented in the finished thesis-copy.

Collection of Data.— During the month of April, 1957, the instruments were selected for gathering the data needed for this study. These instruments were: (a) Health Appraisal validated by the State Department of Health; (b) a questionnaire and checklist on "Healthful Living" constructed and used by Irma P. Ballard; (c) a questionnaire on Lunchroom Facilities and Services; and (d) Official School Records. These
data-gathering instruments were mailed to the principals of the four schools in Houston County, Georgia who cooperated in this research. The checklist on "Healthful Living" was distributed by the Jeans Teacher to the teachers in the cooperating schools.

The questionnaire forms and the check lists were returned properly executed within one week after their distribution to principals and teachers.

Wherever indicated interviews with teachers were held in order to document questionnaire data as well as to gain supplementary data which would add to the clarity and accuracy of the questionnaire response.

**Value of the Study.**—The findings of this study might well provide the basis for the following probable values:

1. To present a genuine picture of the present-day status of the instruction, activities, organizations, and services of the Health Program found to be operative in the Negro schools of Houston County, Georgia.

2. To provide the basis for a comprehensive appraisal and evaluation of the health facilities, instruction, and services of the Negro schools of Houston County, Georgia.

3. To point out more fruitful approaches to the problem of meeting the needs, the modification, and improvement of the Health Program in the Negro schools of Houston County, Georgia.
CHAPTER II

RELATED LITERATURE

Prefatory Statement.-- The survey and summation of the related literature pertaining to the problem of the School Health Program in the public schools has been reviewed and is here presented under the following captions:

1. Brief historical background
2. Philosophies of Health and Recreation
3. Related Research studies
4. The Health Program
   (a) Health service
   (b) Health Instruction
   (c) Healthful School Environment
   (d) Physical and Recreational Education

It is to be noted that the overall Health Program is organized and to be treated under the accepted four basic inter-related and coordinated areas indicated as (a), (b), (c) and (d) above. Further, recreation, in addition to be implied, will be discussed in terms of school and community recreation.

The discussion of the literature in the immediate paragraphs below will follow the sequence outlined above.

Historical Background.-- This section of the review of the related literature pertinent to the problem of Health Education will deal with the historical background of the program.
"There was some emphasis on the school child in the United States prior to the year 1900, however, the greatest efforts to establish what is today recognized as modern and accepted school health program is a comparatively new development."\(^1\)

"The main efforts in school health before 1900 centered largely in the more or less unorganized and haphazardous attempts to control communicable diseases, and in teaching physiology and hygiene with special reference to alcohol and narcotics. State law required that instruction in alcohol and narcotics be a part of a broader program of instruction in physiology and hygiene."\(^2\)

"Revelation of the adverse physical, mental and emotional condition of a substantial percentage of the draftees in World War I was a main factor in awakening a realization on the part of educators and the American Public of an urgent need for better school health programs. Educators became highly conscious of the need for progress designed to improve and maintain the health of school children."\(^3\)

"After World War I, the national education groups placed the health of the school child as one of the major objectives of education. Yet, this major objective moved comparatively slow. Two reasons are responsible for this: (1) that major emphasis was placed on health and physical education programs in attempting to improve and maintain child health; (2) that certain phases of the program require the assistance

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\(^2\) Ibid., p. 18.
\(^3\) Ibid., p. 19.
of many health specialists who are not ordinary a part of the school personal (physicians, nurses, dentists, dental hygienists, nutritionists, health educators and psychologists are among those considered necessary in certain phases of the modern school health program).

"If any criticism is justifiable, perhaps, it should be that in a majority of the schools in the United States there was almost a complete lack of what is now considered desirable and necessary for the proper improvement and maintenance of the health of children and youth. Since 1950, school administrators in increasing numbers are recognizing the obligations of the schools to provide healthful and safe conditions for work, and play; to maintain reasonable standards of appraisal of the health status of children and provide learning experiences which will prepare children to live healthfully throughout their lives."

Philosophies of Health and Recreation Programs.— At this point the literature pertaining to the problem of the philosophy of Health and Recreation Programs will be treated.

Turner states:

"The significant emphasis of the modern school health program has been upon improving health practices of pupils. It has been increasingly apparent that facts alone will not produce hygienic living, and that health education involves real training and problem solving, not merely instruction. Schools have found it necessary to concern themselves increasingly with the indirect learnings of children through sanitation, health services, and other school experiences which have often been found to be contradictory to direct health instruments. The home and school have come closer together.

2 Ibid., pp. 19.
in the health training of the child, and to an increasing degree, schools have joined in community-wide efforts to improve various aspects of the public health.\(^1\)

The idea of improving health practices of children is again emphasized by Turner when he states:

"The most valuable element in health education is work with the individual child. A carefully planned and graded general program in health education needs constant adaptation to particular needs of pupils, both in respect to educational practices and educational methods. The teacher makes this adaptation in three ways: (1) through making sure that no general classroom activity is ill-adapted for, or injurious to any individual member of the class; (2) through arranging the sequence and emphasis in health habit training in such a way that prompt attention is given to the most important items; (3) through working privately with individual children."\(^2\)

In commenting on the cooperation of State Department of Health and Education, Abernathy and Williams' state:

"Today, many State Departments of Health employ Health Education Specialist who devote themselves entirely to school health education.

This close cooperation between school health education and public health education has enormous advantages of the schools; as the department of education needs from the department of health factual data and scientific guidance in many areas and the department of health needs from education teaching methods and techniques for presenting scientific materials to various groups.\(^3\)

Further, Williams and Abernathy assert:

"The administrative machinery for cooperation at the state level, might well be an interdependent committee with representation


from education, health welfare and other interested departments, all working to solve the health problem of children and adults.1

Speaking of mental health and delinquency in the school situation, N. E. Cutts states:

"A child's behavior in the schoolroom is frequently a sign of some maladjustment of his life out of school. It may also be a warning to the teacher of approaching mental ill-health or delinquency."2

Further, Cutts states:

"If a majority of those committed to institutions were not cured and able to resume everyday life, it would cripple our civilization; if a large number can be cured, it stands to reason that in many cases their breakdown could have been prevented. This is our hope and our challenge, and the challenge is directed to the schools; for teachers are in a strategic position to discover maladjustment, and their long continuing association with a child give them an opportunity to help him straighten out his difficulties.3

Good Health Program.— The responsibility of teachers and pupils in promoting a functional Health Program is stated by Turner thusly:

"In a good health program pupils gain a sense of responsibility and respect for the care and proper use of property and the right of others involved. The difficult task of maintaining a clean school and responsibility of each pupil and teacher for preventing unnecessary dirt and litter became clear. Pupils realise the contribution to the discomfort of other pupils and possible danger to health by such personal practices as placing lips and mouth on drinking fountains, spitting on floors, marking walls, improper disposal of rubbish, improper use of toilets, and sinks. They gain the satisfaction of attractive surroundings, and learn to appreciate a clean, wholesome and healthful environment."4

3 Ibid., p. 4.
General Objective of Health Instruction.— The teaching of health through pupil participation is expressed by Turner as follows:

"Pupils should learn by examples what proper sanitation entails and through practice how to use their facilities adequately, learning specifically:
1. How to use drinking fountains.
2. When and how to wash hands.
3. How much light is required to promote eye health and that all light should come over left shoulder (for right-handed persons) and be free from glare.
4. How to provide for adequate ventilation by regulating windows.
5. How to read thermometers."¹

Major Objectives of the Health Program.— A means by which optimal pupil health may be achieved is outlined as follows by Turner:

"The major objectives of the school health program to which the health education activities of the teacher contribute may be stated as the achievement of optimal pupil health through:

1. Correction of physical defects.
2. The reduction of communicable disease.
3. The development of healthful living.
4. The interpretation of the school health program to home.
5. The development of health knowledge.
6. The development and maintenance of desirable health habits.
7. The development of desirable mental attitudes toward health, health practices and life."²

School Health Services.— Activities of School Health Services are stated as follows by Irwin:

"Health Services as applies to the school program embody all efforts of the school to conserve, protect and improve the health of the school population through activities and procedures such as medical and dental examinations; follow-up of health examinations;"

encouragement and assistance in plans for the correction of defects; observations of pupils; control of community disease; health counseling; appraisal of health status; providing emergency care for the sick and injured; provisions for the care and education of handicapped and exceptional children; and supervision and maintenance of hygienic and sanitary conditions of the school plant and facilities.\footnote{1}

Healthful School Environment.-- How a healthy school environment can be used to teach healthy (indirectly) is portrayed by Turner as he states:

"A healthful school environment (as well as adequate school health services, communicable disease control, a hygienic arrangements of the pupil's day, a good program of physical education, adequate safety precaution (and the maintenance of a health staff) provides a means of teaching health indirectly. These indirect health learnings are a vital part of the child's health education."\footnote{2}

Physical Education.-- Many interests and skills can be strengthened (and even developed) through Physical Education activities as expressed by Turner:

"Physical Education should contribute not only to the growth and development of the individual, but also to his ability to adjust to groups. An understanding interest in play and physical activities on the part of the teacher tends to promote a closer pupil-teacher relationship. Naturally, physical education situations abound in opportunities for emphasis upon sound health habits and healthful living as they arise in logical fashion. It is a means of developing a variety of recreational interests and skill, of providing a wealth of powerfully motivated socializing experiences, and building desirable attitudes of teamwork, sportsmanship, and respect for other persons.\footnote{3}

Mental Hygiene.-- Punishment in the classroom and a differentiation of mental hygiene and mental health is discussed by Cutts thusly:

\footnote{1} L. W. Irwin, Op. Cit., p. 22.  
"In their efforts to promote better behavior and to help children with problems, teachers need not feel diffident about applying the rules of mental hygiene to life in the classroom, provided they are ready to call upon expert help when it is available. We may define mental health as the ability to adjust satisfactory to the various strains we meet in life and mental hygiene as the means we take to assure this adjustment."

"Further, mental hygiene teaches us to study the child, to search for the causes of behavior, and to consider not only the immediate but also the possible ultimate effects of our methods of discipline. It does not say that children should never be punished, but it does say that punishment should be but a small part of discipline, "The art of training," which a good teacher practices."

Special Education.-- A logical sequence by which the health of the pupils can be maintained (and even promoted); and (2) the importance of teachers being able to recognize signs of physical and mental health (or any departure therefrom) is stated by Turner thusly:

"Instead of planning the corrective program first and then the program of positive training for supposedly healthy children, it is probable that the modern school administration would reverse the order. He would first plan to conduct the school and guard the children in such a way as to maintain health and promote it for all children. He would then plan to take care of those children who fall by the wayside physically, in spite of what he is able to do for them. It is not implied that we should reduce the amount of medical or nursing or corrective service. Such need may be extended."

Further Turner says:

"It does mean that a thoughtful educator should first consider his full responsibility in those educational activities which are considered under health promotion in order that he may reduce the amount of correctional service as much as possible."

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2. Ibid., p. 5.
4. Ibid., p. 21.
Again Turner states:

"The adaptation of health education to pupil needs is a fundamental importance. In understanding the individual child, the teacher needs to know the common signs of physical and mental health, and indication of any departures therefrom, as well as changes in the physical nature and capacities of children at different ages."

An understanding of the causes of poor mental, physical and emotional health is the first step in securing improvement.

"We must understand the signs of health, but we must also understand the individual child. A through acquaintance with one child and success in helping him solve his health problems is the best possible approach to health work with a class. One (teacher) then thinks of his pupils as individuals demanding individual consideration, but capable of receiving some aspects of health training as a group. He is not mislead by the belief that his main function is to operate upon an impersonal "audience" with a variety of group instructional methods."

Factors of Good Health.— As outlined by Turner:

"We recognize that the physically vigorous child enjoys a general sense of bodily comfort and well-being. He grows at a reasonably steady pace, making a satisfactory gain in weight from month to month. He possesses an habitually wholesome appetite, a clean, red tongue, and a sweet breath. He is energetic, alert, happy, and active. He does not become unduly fatigued by a reasonable amount of physical exercise, and responds to the invigorating effect of regular periods of rest and sleep. He adapts himself satisfactorily to new situations or to changes in environmental conditions."

Factors of Mental Health.— As outlined by Turner:

"We are likewise able to recognize certain signs of mental health, including: (1) an intelligence developed to a sufficient

2 Ibid., p. 158.
3 Ibid., p. 61.
4 Ibid.
degree to meet the demands of everyday life; (2) interest and curiosity about affairs and things in the world about them; (5) the ability to concentrate attention and to analyze a situation with some degree of skill and accuracy; (4) a capacity for facing realities and for overcoming difficulties; (5) self-confidence, so that one expects and achieves a reasonable amount of success; (6) emotional responses that are useful rather than detrimental, positive rather than of fear, shyness and timidity; (7) capacity for self expression in such objective interests as games or hobbies; (8) ability to cooperate and to enjoy normal social relations and other individuals of both sexes; and (9) a sympathetic appreciation and understanding of others.*

Related Research Studies.—This section of the related literature will review several studies which have been made in the areas of health and recreation.

A study made by George Edwards, Jr.* concerns the development of a health program in four Georgia counties. It gives an insight into conditions in the schools studied which have to do with school living. The poor conditions of the schoolhouses, the inadequate water supply, unsanitary toilets, unjacketed heaters, all point to primitive rather than scientific, healthful school living. The study was made in Cobb, Crisp, Spalding and Walton Counties, Georgia. The study was concerned with the organization and development of a health education program among Negroes in these four counties.

The purposes of the study were: (1) to discover the health status of the four selected counties as it related to the schools and community

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groups, (2) to show how the health needs revealed were being met through the coordinated efforts of the departments of education and health both on the state and local levels, (3) to serve as the basis for future study in the field of health education.

The data for the study were obtained through personal observations made by the writer during his travels in the counties selected, from records, reports from the office files, group conferences with city and county superintendents, county health officers, Jeanes Supervisors, health education workshop participants, community leaders and school personnel.

Surveys of the schools and communities were made to ascertain the general health status of the Negroes in these counties. The schools were found to be, for the most part, poorly housed, inadequately equipped in facilities. Poor sanitary conditions prevailed in the schools and many of the homes.

The study shows that: (1) through coordination and close cooperation of the schools with all community agencies interested in the welfare of the people, advancement in the promotion of health education was made possible; (2) the coming together of lay people with educational and health people in the organization of the city and countywide health educational committee showed some evidence of the development of a common point-of-view regarding the overall health problems of the counties; (3) the coming together of faculties of the same schools and those of a number of schools in a specific district for the purpose of studying problems and developing methods and techniques for the solution
of them has given rise to some degree of coordination of efforts; (4) faculties of the same school are devising means of escaping duplication of work within areas of specific subjects matter offerings, while faculties of schools within certain districts are focusing their attention on the solution of common problems of health; (5) student participation in the planning of all phases of the school program where it pertains to health has increased the awareness of their important place. Teacher’s philosophies of what education ought to do within the framework of democracy are beginning to change as the results of teacher-pupil planning, (6) instructions to midwives are proving to be valuable not only from the standpoint of increasing their efficiency while on the job, but because they have been able to explain and have their duties understood by many people; (7) finally the study shows that through these local workshops leadership potentialities were discovered and through these workshops and study groups a medium through which the programs could undergo constant examination for future refinement was realized.

As a result of the study Edwards offered several recommendations. These were: (1) that health be emphasized more in the in-service training program and all principals be given an opportunity to become familiar with the underlying philosophy of health education and the role of the school; (2) that greater efforts be made to eliminate the preponderance of schools housed in church property, lodge halls and other undesirable dwellings and substitute these existing conditions with a well-planned consolidation of schools and an adequate system of transportation; (3)
that more emphasis be placed by schools upon providing pupils with opportunities for directed play activities and the development of after-school and year-round supervised recreational programs; (4) that opportunity be provided for at least one lay person in each community to attend a summer health workshop; (5) and finally that educational leaders on all levels be encouraged to re-think; re-evaluate their philosophies of education in the light of the changes that education should bring about within the concepts of American democracy.

Irma Pearl F. Ballard made a Study of the Status of Healthful School Living in the Negro Elementary Schools of Limestone County, Texas in 1952.

The purposes of the study were four-fold: (1) to determine present practices of the healthful school living aspects of school health education in Negro elementary schools of Limestone County, Texas, (2) to determine the unmet healthful school living needs, if any, for which the school may assume complete or cooperative responsibility, (3) to stimulate the schools cooperating in the study to a more careful evaluation of their own healthful school living practices, (4) to gather reliable data which will serve as a basis for suggestions and recommendations for the improvement of healthful school living practices in the Negro elementary schools of Limestone County.

The major issue of this study in healthful school living was

limited to factors affecting the development of principals needed to conduct schools in a manner designed to safeguard and promote the health of pupils and employees.

The data for the study was obtained by use of questionnaires, checklists and personal observations made by the writer upon visits to various schools. Data indicated that (1) the school site areas were inadequate in many of the schools, and were undesirably located as relates to traffic hazards, (2) some of the schools failed to provide safe fences around playgrounds that presented traffic hazards, (3) water supply was proven to be unsanitary in some instances, (4) toilet facilities were inadequate, (5) handwashing facilities were not provided in half of the schools, (6) artificial lighting inadequate in all of the schools studied, color of interior walls and furnishings undesirable for best lighting effects, (7) most of the plants met the standards of proper heating. Thermometers were available but improperly placed in many rooms, (8) some schools failed to provide sufficiently for fire control or safe fire escape in case of a fire, (9) seating equipment inadequate in size but most of the schools used individual, movable seats, (10) the schools as a whole fell below standards for cleanliness and good housekeeping; there was a lack of cloak rooms and most of the plants had neither sidewalk nor janitors.

In factors relating to school organization, the study revealed that (1) all of the schools met the standard recommended for length of school day for the various grade levels, (2) most of the schools studied failed to make provisions for regular rest periods for the pupils, none
had cots or mats, (3) the majority of the schools reported over
crowded schedules, (4) most of the plants had inadequate classroom
space to house the activities that are required in a modern school
curriculum, (5) practice of selling candy and soft drinks found in most
of the schools.

Major findings relating to teacher-pupil relationships in the schools
studies were: (1) many teachers had recent training in health education
but very few had training in mental hygiene, (2) most of teachers
observed were scored by the writer as having generally acceptable per-
sonalities for working with children, (3) one half of the teachers in-
volved reported that they did not believe in directed guidance of
children, they believed that children should be corrected. Ten of the
teachers practiced corporal punishment as a disciplinary control, thir-
teen practiced depriving the pupils of their recess period and making
the children stand on one foot for a long period. Over one-half of the
teachers avoided all of these measures in disciplinary control, (4)
none of the teachers reported provisions for the handicapped children
in their room. Individual differences were overlooked by many. Over
one-half followed the traditional subject-matter schedule and emphasized
report cards and passing grades.

General conclusions reached were that the school sites and plant
facilities for the Limestone County Negro elementary schools were in-
adequate when compared with generally accepted standards for health-
ful school living, (2) provisions were not made to meet the pupil's
needs for rest and relaxation, (3) more of the elementary teachers need
training in health education, mental hygiene and modern trends in education.

Recommendations included: (1) adequate playground, fenced when necessary, should be provided, (2) safety patrols should be used, (3) classrooms should be properly lighted, (4) seats should be purchased and all seats distributed according to the sizes of the children who are to use them instead of grade level, (5) additional sanitary facilities such as covered trash cans, soap, and paper towels for handwashing be provided, (6) janitors, sidewalks, foot scrapers, more waste baskets and cloakrooms for better housekeeping should be provided, (7) steps should be taken to remedy overcrowding of schedules, (8) that teachers should initiate an In-service Training Program on school basis.

A five-year study was made in the grade schools of Tennessee, 1937, by Michael J. Brent and Paul Jensen.1 It treats the phase of developing techniques for improving health instruction. It was agreed by all interested in the program that progress could be accelerated by a program in the schools of the state, if the teachers could be properly trained in health education. A plan was proposed for a joint health education committee. The primary objectives of this committee was to experiment over a five-year period to evolve a satisfactory courses of study in health education to be taught the teachers in training in these colleges and to integrate the content and spirit of the work wherever possible into all college courses. The purpose was to devise the

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1 Michael J. Brent and Paul Jensen, "Outline of Syllabus For Teachers of Health Education in the Grade Schools of Tennessee." (Nashville, 1942).
most effective means and methods of improving personal and community hygiene among Negroes.

The study included (1) health knowledge and habit tests of the pupils in three schools, (2) a careful survey of the homes in the communities. These elementary schools were selected for two reasons: (1) because they were typical of the average Negro rural schools in Tennessee, (2) because of their proximity to the college in which the teachers were taught health education and methods.

The survey showed the existing hygienic practices, the status of health knowledge, the attitude toward health, the disease prevention measures being used, the attitude toward the physician, and the hygienic assets and liabilities of the communities. The directors visited the three selected schools weekly, at which time health lectures, demonstrations and quizzes were given to pupils and teachers.

The outcome of this study showed that the most outstanding improvements observed were: grounds graded and beautified, cleaner appearance of classrooms, better ventilation of rooms, improved personal appearance of children, an attempt to provide a balanced meal once a week; home environment findings—there was little or no changes in habits of cleanliness observed in the homes.

The third phase on discovering services needed and provided is discussed by William, Hubbard, and Bain.1 These authorities made a study of a community health services for children in eight states. This study was centered in Washington, D.C. It was made to fill wide gaps

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in our knowledge of the extent and kind of health services available for children. The study reported that all children, regardless of their parent's economic status, are entitled to essential preventive health services. This group of states contain about 5½ million children under 15 years of age, or approximately 15 per cent of the nation's children. The study revealed the following: the number of patients seen in mental hygiene clinics was 1.7 per 1,000 children under 15, and that 20 per cent of every 1,000 children under 15 years are receiving care under community health programs and 80 per cent of every 1,000 are receiving only examination without treatment.

A Study of the Recreational Facilities and Leisure Time Needs of Negro Youth in Salisbury, North Carolina was made by Rosalind E. Wyatt.¹

The purpose of the study was to show the recreational facilities and leisure time needs of the Negro youth's participation in facilities and the results obtained.

The data were gathered through interviews with directors and persons in charge of recreational programs, and a questionnaire was filled out by 424 Negro youth in the public schools. Books, papers, pamphlets, and reports were consulted for pertinent data.

The study showed that (1) there was one Negro Branch Library available for the youths; (2) number one reading preference for boys and girls were magazines; (3) the boys preferred detectives movies, the

romantic ones; (4) boys and girls listed bicycle riding as their favorite sport; (5) a majority of the girls listed cooking as their number one hobby interests; (6) the first hobby interest of boys was collecting records; (7) most of the young people in Salisbury could not participate in the activities they liked best because of a lack of facilities; (8) out of three theaters located in Salisbury Negroes were able to attend two, (9) the city provided the civic league park for its Negro citizens; (10) a Negro Boy Scout Troop and Girl Scout Troop provided some forms of recreation for the Negro youth of Salisbury.

Wyatt recommended that the recreational needs of the Salisbury Negro youth be made known to the recreation department, and Negro citizenry and that a long-range recreation program be formulated for the youth of the community; (2) that the youth of the community share in planning for recreation either through direct representation upon all major boards and councils or through special advisory committees of young people and (3) that the schools encourage their pupils to form wholesome recreational interests.

Mary Agnes English made a study of the Recreational Needs and Interests of One-Hundred Twenty-Five Students in Charlton-Pollard High School, Beaumont, Texas, 1948-1949. She made this study to determine (1) the recreational interests of 125 senior high students, (2) what recreational facilities and equipment were provided, their adequacy and the extent utilized and (3) the nature of recreational programs in

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English obtained her data by selecting at random 125 students to fill out questionnaires, interviewing persons engaged in recreational work and by the use of books and other material pertinent to the study.

The study showed that bicycling was engaged in most as an activity although baseball, skating, basketball, swimming and football were the most popular sports. A large number of the pupils spent their leisure time reading. The materials consisted most of comic books, love and adventure stories. The choice of stories was of inferior quality. It indicated also that most of the reading was from magazines.

The study showed further that there was not a properly supervised, organized playground in the community. The most popular form of recreation was attendance at movies. Activities most desired and inadequately provided for were hobby groups, tennis, and swimming.

The home was the most frequently used place for recreation by all of the family members.

English concluded that the churches, schools, and community agencies should work together to "give best possible recreational activities and facilities to the youth."

Katherine W. Gray¹ made a survey in Laurens County, Georgia, in order to get an overall picture of the health and recreational facilities which were to be found presently available and which were desired by the

people of Laurens County, Georgia. The purposes of the study were eight-fold: (1) to present a general picture of the facilities for health and recreation provided in the Negro schools of Laurens County, Georgia; (2) to identify the health and recreational activities presently available in the Negro schools of Laurens County, Georgia; (3) to discover the desired activities and facilities as indicated by the Negro citizens of Laurens County, Georgia; (4) to determine the factors underlying stated desires for various types of health facilities for the Negro schools of Laurens County, Georgia; (5) to discover acceptable criteria for a good health and recreation program for the Negro schools of Laurens County, Georgia; (6) to formulate a plan to obtain cooperation in fostering community programs of health in the Negro schools of Laurens County, Georgia; (7) to list types of activities that may be used in rural and semi-rural school communities, and (8) to formulate whatever feasible implication for the educational program of the Negro schools of Laurens County, Georgia as may be derived from the interpretation of the data of this research.

The data for the study were obtained by the writer through personal observations, interviews, questionnaires and check-lists filled by students and patrons of the communities.

The study revealed, not only the interests and desires of citizens of the community for health and recreation, but also their attitude toward health and recreational facilities, also their attitude toward health and recreational practices and facilities throughout the school. The findings from the study show that (1) the desirable attitudes could not be fully realized under the conditions and with present facilities in
the Laurens County Public Schools for Negroes, (2) Health Instruction should be made more practical in the schools and communities, (3) and authorities are not facing up to their responsibilities for providing adequate facilities.

Katherine W. Gray showed the need for: (1) teachers with adequate training in first-aid; the study of the modern concept of health instruction and more purposeful applications in classrooms, (3) adequate bus transportation in order to meet the needs in a consolidated school program, and (4) the need for an adequate program of health services and facilities for the Negro children of Laurens County, Georgia.

Summary of Related Literature.— The survey of the related literature pertinent to the problems inherent in this research is presented under two captions: (a) Theories and Criteria, and (b) Research Studies, in the condensed general statements presented under the appropriate caption.

Theories and Criteria.— Significant excerpts from the theoretical literature on Health Education are presented below.

1. Turner states that the significant emphasis of the modern school health program has been upon improving health practices of pupils. In another connection Turner states that health habits should be learned by practicing (doing) correct health habits.

2. Abernathy and Williams state that a sizeable majority of States Departments of Health employ Health Education Specialist who devote themselves entirely to school health education.

3. N. E. Cutts states that a child's behavior in the classroom is frequently a sign of some maladjustment of his life out of school. It can also be a warning to the teacher of approaching mental ill-health or delinquency.
4. Turner states that a good health program pupils gain a sense of responsibility and respect for the care and use of property and the right of others involved.

5. Turner states the school health program should be to achieve optimal pupil health through correction of physical defects, the development and maintenance of desirable health habits, desirable mental attitudes to health, health practices, healthful living, and the interpretation of the school health to the home.

6. Irwin states that School Health Services embody all efforts of the school to conserve, protect and improve the health of the school population through activities of remedial and corrective measures.

7. Turner states that a healthful school environment provided a means of teaching health indirectly, which is a vital part of the child's health education.

8. Turner states that Physical Education is a means of developing socialising experiences and attitudes of teamwork as well as growth and development of the individual.

9. Cutts states that punishment is permissible in the classroom, but should be but a small part of discipline.

10. Turner gives a logical sequence by which the health of the pupils can be maintained and even promoted; and the importance of the teachers being able to recognize signs of physical and mental health (or any departure therefrom).

Research Studies. -- Pertinent literature which reports the Research Studies which have been conducted in the area of Health Education will be found in the selected abstraction therefrom in the summarizing statements to follow.

1. George Edwards, Jr. in a study of the development of a health program in four Georgia Counties—Cobb, Crisp, Spalding and Walton, found that the school living conditions were rather primitive; for the physical environment of the school and communities were, in the main, far below the accepted standards.

2. Irma Pearl F. Ballard in a Study of the Status of Healthful School Living in the Negro Schools of Limestone County, Texas, in 1962, found that the school sites and plant facilities were inadequate; and that an In-service Program was needed in the areas of health education, mental hygiene and modern trends in Education.
3. Michael J. Brent and Paul Jensen in a Five-Year Study in the Grade Schools of Tennessee, 1937, were able to improve the health practices in the schools, but were unable to change the health habits of cleanliness observed in the home.

4. Williams, Hubbard, and Bain in a Study of Community Health Services for Children in Eight States, found that 1.7 per 1,000 children under 15, and 20 per cent of every 1,000 children under 15 years are receiving care under community health programs and 80 per cent of every 1,000 are receiving only examinations without treatment.

5. Rosalind E. Wyatt in a Study of the Recreational Facilities and Leisure Time Needs of Negro Youths in Salisbury, North Carolina, 1948, found that no facilities were provided for the Negro youths and that there was only one Negro Branch Library.

6. Mary Agnes English in a Study of Recreational Needs and Interests of One Hundred Twenty-Five Students in Charlton-Peckland High School, Beaumont, Texas, 1948-1949, found that the recreational activities (hobby groups, tennis and swimming) were poorly supervised and adequately provided for.

7. Katherine W. Gray in a Survey in Laurens County, Georgia, found that there was a great need for In-Service Training in the areas of: (1) First-Aid, (2) Health Instruction and (3) Health Education; and adequate bus transportation in order to meet the needs in a consolidated school program.
CHAPTER III

PRESENTATION AND ANALYSIS OF DATA

Prefatory Statement.-- This chapter which is concerned with the presentation and analysis of the data of this study has been organized as follows: (1) there are two main sections: (a) the data on the present provisions and facilities of the health program in the Negro Schools of Houston County, Georgia and (b) the data on the desired provisions and facilities of the health program in the Negro Schools of Houston County, Georgia, as indicated by the research participants; (2) each of the major sections is, in turn, sub-captioned as follows: Healthful School Living, Health Instruction, Health Services, Recreation and Physical Education, and Special Education.

The Frame-of-Reference.-- "If the school health program is to be organized and administered to the best advantage for the children, those responsible for the schools must have a clear concept of the relationship of health to the total educational program. Perhaps the first in considering a school health program is to determine the aims and objectives and the proceed to the next step of setting up ways and means to accomplish them. (In this the school administration must accept the main responsibility in assuring that the aims and objectives are accomplished to the best ability of the school personnel)."¹

In the Negro schools of Houston County, Georgia, the desirable factors such as the condition of buildings, water supply, drinking and handwashing facilities, toilets facilities, conditions for heating, seating and lunch facilities are potent conducive influence in the promotion of healthful school living.

General Information of School Building.— The data on the general information on the characteristic aspects of the school buildings for the Negro pupils of Houston County, Georgia, 1956-1957 are presented in Tables 5 through 9.

Three new school centers namely: Houston County Training School, Southside and Pearl Stephens were erected in 1954-1955; and at the same time one school center namely, Perry Training School was renovated. These four school centers for Negroes in Houston County are quite modern and provide the environments and opportunities for healthful school living. Before the consolidations there were fifty-two one and two-teacher schools; later they were consolidated to 16. At present, the three distinct elementary school centers: Southside, New Hope, and Pearl Stephens, offer work in grades one through seven; whereas, the Houston County Training School, offers elementary schoolwork in grades one through five, and high school work in grades eight through twelve. With good bus transportation to these, four consolidated centers, the school enrollment has greatly increased at each center, thereby, causing over crowded classrooms. To relieve these overcrowded classrooms, the old city elementary school on Spring Street was renovated; and presently house pupils from Houston County Training School (Perry, Georgia),
Southside School (Elko, Georgia) as well as pupils of New Hope Elementary School (Spring Street, Perry, Georgia).

Personnel Responsible for and Committee Used in the Health Program.-- The data on the personnel responsible for the Health Program, together with the committee used in the Health Program in the four Negro school centers of Houston County, 1956-1957, are presented in Table 1, page 39.

Each of the four schools reported that it had a person directly responsible for the administration and promotion of the health program. There was an active health committee in each of the four schools. Further, the schools reported that the personnel of the health committee was usually composed of school personnel. All of the schools indicated that the health committee met regularly and participated in the task of planning, operating, and evaluating the health program.

It would appear that the reported administration and promotion of the health program in these four Negro schools of the Houston County, Georgia indicated the promise for an effective health program.

Factors in the Evaluation of the Health Program.-- The data on the factors in the evaluation of the health program of the four Negro schools centers of the Houston County, Georgia, 1956-1957, are presented in Table 2, page 41.

The four schools indicated that they were using the varied evaluative techniques in measuring the effectiveness of their health program. Two of these schools reported that they did not use health knowledge tests, health attitude tests, and training pupils to evaluate themselves by keeping anecdotal records, diaries, etc. All of the
TABLE 1

DISTRIBUTION OF SELECTED FACTORS OF RESPONSIBILITIES FOR AND COMMITTEE USED IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Is there an active school health committee?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Are teachers members of this committee?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are administrators?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are pupils?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Are lay people?</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>5. Is a physician included?</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>6. Is a dentist included?</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>7. Is a nurse included?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8. Sanitation personnel</td>
<td>4</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>9. Does this committee meet regularly?</td>
<td>4</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Does it help plan, activate, and evaluate the health program in the school?</td>
<td>4</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
schools reported that conferences with school and community personnels were used in evaluating the health program; and three of them indicated that the evaluation was designed to improve the health program, being carried in the school.

A summary of the data on the evaluation of the health program would appear to indicate that the Negro Schools of Houston County, Georgia are using the usual techniques in the evaluation of their respective health programs. It is of interest to note that the schools gave high ratings to the evaluation of the attitudes and practices of the pupils toward health and in effort to improve the health program.

**Basic Training of the School Health Personnel.**— The data on the Basic Training of the School Health Personnel found in the Negro Schools of Houston County, Georgia, are presented in Table 3, page 42.

The four schools indicated that four or 100% of the school health personnels have adequate training in the area including mental and social health as well as physical education. The four schools indicated that they did not have an In-service Training Program in Health except a three weeks course in First-Aid for Health Coordinators and other interested persons.

Health personnel pre or post-planning meetings are held monthly throughout the school year as an attempt to promote the health of the pupils.

**Program Planning.**— The data in the procedures used in planning the School Health Program in the Negro schools of Houston County, Georgia, 1956-1957, are found in Table 4, page 44.
TABLE 2

DISTRIBUTION OF SELECTED FACTORS IN THE EVALUATION OF THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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. Does the evaluation include:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Health knowledge tests?</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>(2) Health attitude tests?</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor</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>C. Do school personnel have training in the school health program?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. All?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. More than half?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Less than half?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. None?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Does this training include mental and social health as well as physical health?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Do they feel that each has responsibilities in the school health program?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Is there an in-service training program in the school health program for all school personnel as part of total school program?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Study and planning during present and post planning week?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Three of the four schools reported they have an operative Program in Health Education that coincides with the Community Health Program.

Each of these three schools utilize the services of the school health personnel, public health personnel, student representatives, representatives from the Parent-Teacher-Association and laymen from the community.

The School-Community Environment.-- The data on the selected factors of the School-Community Environment of the four Negro schools of Houston County, Georgia, 1956-1957, are presented in Table 5, page 45.

It appears that the four schools are making progress in their efforts to landscape and beautify their school grounds. The Parent-Teacher-Association donated to shrubbery and flowers.

In each of the school centers the playground area is suitable for the pupils attending the school except New Hope Elementary School. In this particular school center the play area is limited, unsafe and gives rise to accidents even with proper supervision.

Each of the four schools reported that it had 45-minute play periods under proper supervision.

Buildings.-- The data on School Community-Environment (Building and Grounds) are found in Table 6, page 47.

Three of the four school centers are newly constructed; one of the four schools was recently renovated. These schools reported excellent opportunities for healthful school living.

Custodial services are provided in each school, and each school is properly equipped with adequate supplies for good housekeeping. This
### TABLE 4

**DISTRIBUTION OF SELECTED FACTORS IN THE PROCEDURES USED IN PROGRAM PLANNING OF THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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>E. Is there a written program of health for your school?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is this written program revised and improved at least annually?</td>
<td>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does the written program of health for your school conform to the county written program of school health?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</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>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></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>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. P. T. A., etc.</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Community etc.</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 5

DISTRIBUTION OF SELECTED FACTORS ON THE SCHOOL-COMMUNITY ENVIRONMENT (SCHOOL GROUNDS)
IN THE SCHOOL HEALTH PROGRAM IN THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</th>
<th>None</th>
<th>Per Cent</th>
<th>Poor</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>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Grounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Suitable in size to meet State standards?</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Landscaped for:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. beautification</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. drainage</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Grass, flowers, and shrubbery in proper place well kept?</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Are there objectionable commercial or industrial areas nearby creating excessive noise, dust, or other hazards?</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are grounds clean and well kept?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

65
may be attributed to the fact that all janitors have had special training for their jobs and are directly responsible to the principals of their respective schools.

Sanitation.— Three of the four schools get their water supply from the city; one of the four maintains its own deep well.

The water supply of the four schools is adequate, safe, protected and approved by the local Health Department.

Drinking-fountain facilities of the four schools are suitable and are located inside of the buildings. The fountains are adjusted to the height and size of pupils (according to age and grade levels), using them.

Handwashing facilities are provided for in the four schools, but are not utilized to the greatest extent (from the administrative point-of-view).

The toilet facilities of the four schools were reported to be adequate. The first-grade classrooms are self-contained; grades 2 and 3; and 6 and 7 utilize handwashing facilities in their classrooms, but toilet facilities in the area designated for pupils of grades 4-7.

Heating and Ventilation.— The data on the Factors of the School-Community Environment (Heating and Ventilation) pertaining to the Negro schools of Houston County, Georgia, 1956-1957, are presented in Table 7 page 48.

Each school center has a central heating system; three school centers use gas; one uses oil. Each classroom has a thermometer which is properly located. The classrooms are well ventilated and free from
<table>
<thead>
<tr>
<th>Factor</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>2. Buildings:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Attractive and in good state of repair?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Adequate number of suitable classrooms? (minimum 20 sq. ft. per pupil)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Adequate number of other buildings?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Is there a separate rest room for teachers where they may relax during free periods?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are buildings clean and well kept?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Ramp entrance that will accommodate wheelchair?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Sanitation:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Is drinking water available on grounds?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Are adequate sanitary-type drinking fountains available with heights adjusted to age groups using them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Are there always plenty of paper towels?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Is liquid soap or powder properly dispenses, used for handwashing?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are toilets approved by the Department of Public Health?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Flush type X Pit</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Inside building?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Provided with adequate number of children using them?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Kept clean?</td>
<td>6</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Free from marks?</td>
<td>1</td>
<td>.25</td>
<td></td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Well ventilated?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) Well lighted?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) Supplied with plenty of toilet paper</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) Provided with fixtures suitable in height and size for children using them?</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) Is disposal by septic tank?</td>
<td>1</td>
<td>.25</td>
<td></td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) Or city sewage system?</td>
<td>5</td>
<td>.75</td>
<td></td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Are children trained in proper use and maintenance of toilet?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Is there a toilet that will accommodate a wheelchair patient?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor</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>
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<td>----------</td>
<td>----</td>
<td>----------</td>
<td>-------------</td>
<td>----------</td>
</tr>
<tr>
<td>4. Heating and Ventilation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Adequate central heating system?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Or adequate jacketed stoves?</td>
<td></td>
<td></td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Do stoves have fresh air inlet from outside?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Or properly vented individual gas heaters?</td>
<td></td>
<td></td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Can an adequate portion of windows be opened to provide sufficient ventilation?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are the rooms free from drafts?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Is there an adequate supply of fresh air?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Is there an accurate thermometer in classrooms?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Is properly located?</td>
<td>4</td>
<td>100</td>
<td></td>
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</tr>
</tbody>
</table>
The adequate heating systems, sufficient thermometers and well-ventilated classrooms, without drafts, indicate an excellent opportunity for the maintenance healthful living program and situation in these schools.

**Lighting.**— The data on the Factors of the School-Community Environment (Lighting) are found in Table 8, page 50.

The classrooms in the four school centers have electric lights. Three of these centers and half of the fourth center are well lighted. Two-way roller shades are used at windows. The desks are arranged for minimum glare and maximum light. The desks and other furniture are of natural wood finish. The walls are a pale green dull finish (which do not produce a glare). The chalkboards are a medium green. Along with other conditions, the teachers are promoters of health (they stand away from windows when teaching so that "pupils will not have to face windows (light) when looking at them (teachers)").

**Classroom Arrangement and Cleanliness.**— The data on the classroom arrangement and cleanliness are presented in Table 9, page 51.

Some of the favorable factors in the classroom arrangements and the cleanliness of the classrooms are that well-trained custodians are provided in each school center; the custodians realize their importance in the general scheme for school sanitation and child welfare. Adequate equipment and supplies are provided.

**Classrooms.**— Movable desks (adjusted to age-level and size) are provided in adequate number for all classrooms in the four school
TABLE 8
DISTRIBUTION OF SELECTED FACTORS OF SCHOOL-COMMUNITY ENVIRONMENT (LIGHTING) IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>Lighting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Are there electric lights?</td>
<td>4</td>
<td>100</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Properly shielded?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Do they give sufficient light to all parts of the room (at least 30 feet candles of artificial light)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Are translucent window shades used?</td>
<td>3 1/2</td>
<td>87 1/2</td>
<td>0</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are proper light control used to shield the windows adequately, so arranged that light enters from upper part of windows? Check: diffusers - - Venetian blinds - - two way roller shades - -</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k. Are desks arranged for minimum of glare and maximum of light? (Pupils should not face light or work in shadows created by their bodies)</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Are reading tables also thus placed?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Are desks and furniture of natural wood?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Floors natural wood, or light green marbled linoleum or asphalt tile free from glare?</td>
<td>3 1/2</td>
<td>87 1/2</td>
<td>0</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. Are walls and ceiling a light shade?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Are walls without glare?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Woodwork and trim same as walls, darkened to 50% reflection factor with nonglossy finish?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m. Do chalk boards have dull finish? (Should be green with a minimum of 20% light reflection).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) May be used without facing the light?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Do teachers stand away from windows when teaching so pupils will not have to face light when looking at them?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 9

DISTRIBUTION OF SELECTED FACTORS IN THE SCHOOL-COMMUNITY ENVIRONMENT (CLASSROOM ARRANGEMENTS AND CLEANLINESS) IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>5. Classroom Arrangements and Cleanliness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Is janitorial service provided?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Does he realize his importance in the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>general scheme for school sanitation and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>child welfare?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Has he had special training for his job</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>through the State Department of Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>custodial training program or elsewhere?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Are there adequate equipment and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>supplies for cleaning?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Is room arrangement orderly and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>attractive?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Are there growing plants in the rooms?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are there a few appropriate well</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>placed pictures?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Is there a mirror placed at such a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>height that all pupils can use it?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Are screens on all windows?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Are desk and seats movable?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Are desks and seats suitable for age</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>using them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Are satisfactory facilities provided for</td>
<td>3\frac{1}{2}</td>
<td>87\frac{1}{2}</td>
<td>3</td>
<td>.12\frac{1}{2}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>wraps and other garments, either in</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>classroom or halls?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k. Are floors finished for beauty and</td>
<td>3\frac{1}{2}</td>
<td>.87\frac{1}{2}</td>
<td>3</td>
<td>.12\frac{1}{2}</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ease of cleaning?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
centers. The classrooms are cleaned and the desks arranged after school each day. However, the desks may be rearranged by students during the day to meet the immediate activity needs. Three of the centers and half of the fourth center have sufficient cloakroom area or facilities. Growing plants are kept in all the classrooms in each of the centers. The floors are finished for "beauty and ease of cleaning."
The unfavorable aspects at each center are that the windows are not screened and no mirrors (adjusted to the height of the children) are provided in the classrooms.

On a whole the classroom arrangements and cleanliness of the schools provide an atmosphere that is quite conducive to healthful school learning and living.

School Lunch Program.--- The data on the School Lunch Program are presented in Table 10, page 53.

Each of the four Negro school centers has a cafetorium (a room that is used both as a lunchroom and as an assembly room).

The lunchrooms, though in their infancy at present, are well equipped. The lunch rooms are certified by the State Department of Public Health and is inspected regularly by the personnel of this department. The rules of operation are complied with as have been designated by the Department of Health. Some of these rules are that lunchroom workers must have physical examinations, training in sanitation, and proper methods of food handling, etc.; and that no packaged foods should be sold at the schools. Along with hot lunches, only pasteurized milk is served with the meals at the schools. Federal-Aid is given to each school center's School Lunch Program.
---

**TABLE 10**

**DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (SCHOOL LUNCH PROGRAM) IN THE HEALTH PROGRAM OF THE HEBREO COMMUNITY SCHOOLS OF HOUSTON COUNTY SCHOOLS, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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>6. School Lunch</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Does the school have adequate facilities for a school lunch program?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Is the school refraining from selling soft drinks and package foods?</td>
<td>2</td>
<td>47 1/2</td>
<td>2</td>
<td>23 1/2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Is the school lunch program receiving Federal Aid?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Is the lunch room inspected regularly by the Department of Public Health?</td>
<td>4</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>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Do school lunch personnel having training in sanitation and proper methods of food handling?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Do all children eat in lunch room?</td>
<td>4</td>
<td>100</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Do all children eat lunch?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Are all children provided a hot lunch?</td>
<td>1</td>
<td>25</td>
<td>3</td>
<td>75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Are 80% or more of the children participating in the lunch room?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Is anything being done to increase the participation in the lunch program?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Are the children who bring packed lunches given an opportunity to eat in the dining room?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Taught to pack a good lunch?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Is pasteurized milk provided for every child daily?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) Are free meals given to those who need them?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Is 20 minutes or more allowed for children to eat lunch exclusive of time consumed in washing hands, standing in line?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Are all children encouraged to remain at the table until each child has had ample time to eat lunch?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Are children allowed adequate time to wash hands before eating?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Do children return immediately to classroom from lunchroom?</td>
<td>4</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></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
To further promote the welfare of the pupils, all pupils are encouraged to participate in the school lunch program; however many do not participate. Free hot lunches are provided for many pupils each day.

The school lunch program is bringing about positive learning experiences in that the pupils are taught proper handwashing techniques; how to use properly flat ware (silver); to remain at the table until all in his group has finished eating; to practice the common courtesies in the lunchroom as well as other areas of the school-community environment; and not to indulge in play immediately after a meal.

Though the pupils do not have an opportunity to select their foods in the lunchroom, they are given the balanced and appetisingly prepared meals necessary for their growth and development. When the pupils are introduced to "new" foods, they are told of the new foods' importance in the diet.

On a whole, the lunchroom serves more than as a place for palatable meals, but also as a means of bringing about positive learning experiences to the pupils: demonstrations are given in the classrooms as to how certain foods should be eaten, their importance, etc.

Scheduling the School Day and Promotion Policies.— The data on the School Environment (Scheduling the School Day and Promotion Policies) are presented in Table 11, page 55.

In considering the welfare of the pupils of the four Negro School centers, the school programs were planned so that the school day would be long enough to give time for classroom activities,
TABLE 11
DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (SCHEDULING THE SCHOOL DAY AND PROMOTION POLICIES) IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>7. Organization and Administration of the school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Is the school day long enough to prevent too much hurry?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Is there enough time given for rest, relaxation, play?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Are pupils burdened with home work and extra class activities?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d) Are examinations, marks, reports to parents subjected to undue amount of fear of failure?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e) Does the method of promotion take into consideration the total development of the pupil, rather than merely his knowledge of subjects-matter?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
outdoor supervised play-periods, and indoor activities that would be relaxing to the pupils. Rest periods are taken when deemed necessary by the teachers.

B. Promotion Policies.-- It is not the policy of the Negro schools of Houston County to retain pupils unless under extreme situations, such as excessive absentism, and very poor effort on the part of the child. Reports to parents should be improved. The teacher takes into consideration the total development of the child, yet she's (only) able to report on the child's scholastic achievement according to the present reporting system, which gives the parents and the future teacher only one side of the child's growth and development (Two years prior to this study this situation was studied and recommendations were made; a year later this situation was restudied and recommendations were made, but to date no definite steps have been made to provide a reporting system to parent that would express the teacher's observations and/or findings of the pupils growth and development).

The Negro schools (of Houston County, Georgia) are hoping that parents and pupils are made to feel that the school is another agency that is ready to help in whatever healthful way which is possible in developing the pupils to the fullest of their potentialities.

Personal Relationship.-- The data on the school-community Environment (area of Personal Relationship) are presented in Table 12, page 57.

In order to really meet the needs of the pupils in our schools, it's quite necessary that the teachers have a knowledge of the pupils background. This knowledge can be secured by talking (constructively) with pupils and visiting their homes.
**TABLE 12**


<table>
<thead>
<tr>
<th>Factor</th>
<th>Poor</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) School and community?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) School and home?</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Principal and administration?</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Principal and Teachers?</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Teachers?</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. *Are the relations between:*

(1) School and community?
(2) School and home?
(3) Principal and administration?
(4) Principal and Teachers?
(5) Teachers?
Visitaion to the homes is one of the policies of the Negro schools of Houston County, Georgia.

Evidence of the influence of home visitation is indicated from the reports of the good relationships between the communities and schools of the four Negro school-centers. There is included in this report the status-relationships of other personal relationship factors. The reporting is as follows: three school centers report that the relationship between homes and school and the relationship between principals and teachers were good. Likewise, the relationship between teachers was reported as being good in all of the school centers. This means that good citizenship and professional ethics as practiced by the teacher-personnel are conducive to promoting good citizenship and excellent human relations among the pupils.

With a knowledge of the pupils background the teacher is better able to help the pupils make the necessary adjustment that will aid them in functioning in a democratic society.

Program of Counseling.-- The data on the Factors School-Community Environment (Counseling) are presented in Table 13, page 59.

The area of counseling is quite inadequate in the educational programs of the Negro schools of Houston County, Georgia. Teacher-pupil conferences and Parent-Teacher conferences have been the means of making satisfactory adjustment of situations in the area of behavior problems.

There is a very congenial and efficient visiting teacher, who has been quite instrumental in the area of promoting attendance on the part of poor attenders and non-attenders. Although the area of counseling
### TABLE 13

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY ENVIRONMENT (PROGRAM COUNSELING) IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF THE HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>7. g. Is there a program counseling?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Is there a trained counselor?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Is he trained in mental health?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Are services of visiting teachers available?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Has this person had special training for the job?</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>(2) Are these services used to remove the causes for:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Non-attendance?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Poor-attendance?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Behavior Problems?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
is quite inadequate in these schools; the old method of teacher-pupil and Parent-teacher relationships in the more urgent cases, have been quite fruitful in making satisfactory adjustments in the area of behavior problems. Moreover, the visiting teacher has aided in improving poor attendance, along with the teachers' 'home visits.'

**Community Environment.** The data on the Factors of the School-Community Environment (Community Environment) in the School Health Program in the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 14, page 61.

The schools, along with the local Public Health Department, are quite sensitive to the protective measures to be used in helping promote the health of the community. Realizing that a healthy community is a necessity in order to develop and maintain health habits that are desirable and liveable, the Negro schools of Houston County have included in their health programs or activities those materials that will enlighten and stimulate the pupils to want and appreciate having an adequate and safe water supply, fluoridation of water, proper garbage disposal and insect and rodent control.

The Negro schools of Houston County are instructing their pupils in the areas of protective measures of the community environment thereby promoting the opportunity for an appreciation of the Public Health Department and the services it renders the public.

**Safety.** The data on the School-Community (Safety) of the School Health Program in the Houston County Schools, Georgia, 1956-1957 are presented in Table 15, page 63.


<table>
<thead>
<tr>
<th>Factor</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>8. Community Environment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Does the school promote and stimulate interest in:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Adequate safe water supply?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Fluoridation of water</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Proper sewage disposal?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Proper garbage disposal?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Insect and rodent control?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Other needed public health protective measures?</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
All of the school buildings for Negroes in Houston County, Georgia are one-story buildings which have no need for stairs except to enter the rostrum. These are provided with hand rails and are lighted. Two or 50% of the schools reported having treads on stairs; one or 25% reported "no treads" on stairs and one or 25% gave no response. Four or 100% stated that the floors are in good repair.

**Housekeeping and Maintenance.**— The data on safety measures in housekeeping, and maintenance in the Negro schools of Houston County, Georgia, 1956-1957 are presented in Table 32, page 64.

Practically all of the Negro schools of Houston County, 1956-1957 reported quite favorably on the factors of housekeeping and maintenance in the schools, such as: non-skid wax is used on the floors; the doors open outward; all inflammable and combustible materials are stored in fire-proof containers; the heating units are checked regularly for overloading and other hazards. The fire protection equipment meets the community fire protection regulations and they are inspected regularly by the Fire Department of the county.

The Negro Schools of Houston County, Georgia offer adequate safety measures in housekeeping and maintenance for the protection of the educational personnel and the pupils of these schools.

**Safety on Playground (Construction, Upkeep and Equipment).**— The data on the construction of playgrounds, Upkeep and Equipment in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957 are presented in Table 17, page 66.

Three of the four schools reporting indicated that the playground
TABLE 15

DISTRIBUTION OF SELECTED FACTORS OF THE SCHOOL-COMMUNITY (SAFETY) IN THE SCHOOL HEALTH PROGRAM OF THE SCHOOL HEALTH PROGRAM IN THE HOUSTON COUNTY SCHOOLS, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>9. Safety</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Are stairways safe?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Hand rails on all stairs in good repair?</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>(2) Safety treads on all steps?</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>(3) Bottom and top steps painted in contrast?</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Stairs and handing rails well lighted?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Are corridors safe?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) No projection?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) No loose plasters?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Floorboards in good repair?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor</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>
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<td>----------</td>
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</tr>
<tr>
<td>Safety:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. a. Is non-skid wax used on floors?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Do all doors open outward?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Are all combustible and inflammable materials stored in fireproof containers? (grease rags, oil mops)</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Is the heating unit checked regularly for unvented gases and fire hazards?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Is the electrical circuit checked regularly for overloading and other hazards?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Does the fire protection equipment meet community fire regulations?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Are they inspected regularly by the Fire Department?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
construction meets the standards. Proper repairs are made on equip-
ment and the playgrounds are kept free of hazardous materials, such as:
nails, broken glass, and stones, etc.

The pupils are also taught the proper use (and upkeep) of the play-
ground and playground equipment. Each school center has a person
trained in First-Aid on duty at all supervised play periods to further
aid in promoting safety on the playground.

All of the school-bus drivers meet the Public Safety standards; and
each has had training in Driver Education.

Generally, the playgrounds are kept in good repair, with adequate
supervision during play periods; the bus drivers are properly trained.

There are no fire escapes as the buildings are of the one-story
type, but pupils are instructed in "fire safety" through Fire Drills.

Health Services. -- The data on Health Services rendered by the
County Department of Health in the School of Houston County, Georgia,
1956-1957 are presented in Table 18, page 67.

Houston County has a Public Health Department. The services of the
following personnel of the Department are available to the Negro
Schools of Houston County: the Health Officer, Nurse, and a Sanitarian.
There is not a Dental Health Service or a Dental Hygienist in the
program.

Health Services (continued). -- The data on the relationship be-
tween the Houston County Schools and the local Health Department are
presented in Table 19, page 69.

A close-working relationship exists between the schools' personnel
<table>
<thead>
<tr>
<th>Factor</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>Playground Safety</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Does playground construction meet safety standards?</td>
<td>4</td>
<td>100</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Play equipment kept in good repair?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>k. Are hazard materials kept off playgrounds, such as nails, broken glass, stone, etc.?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>l. Is there a teacher trained in First-aid designated as supervisor of all play periods?</td>
<td>4</td>
<td>100</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>m. Is there a school patrol?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>n. Do all school buses meet Department of Public Safety standards?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Drivers have training in Drivers Education?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>o. Have bicycle safety program?</td>
<td></td>
<td></td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>p. Fire escapes meet state requirement?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**TABLE 16**

**DISTRIBUTION OF SELECTED FACTORS ON THE HEALTH SERVICES OF THE DEPARTMENT OF PUBLIC HEALTH IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY SCHOOLS, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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>B. Health Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there a Department of Public Health in your county?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Does it have:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Health Officer?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Nurse?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Engineer or Sanitation?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Dental Hygienist?</td>
<td></td>
<td></td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Dental Clinic?</td>
<td></td>
<td></td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
and the local health department. Both local officials and voluntary agencies participate in the health program.

The health nurse visits the schools on regular schedule as well as "on-call." Class cases are made through the offices of each school center. From these requests further observations or examinations are made by the nurse. Conferences with the teacher or parents are made after the examination by nurse.

The immunization standards "are in line with those recommended by the State Department of Public Health." Adequate and up-to-date records are not kept of the visits and observations of the children.

Health Services (continued).— The data on the Reports of Health Personnel of the Department of Public Health in the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 20, page 70.

As the Public Health Nurse is scheduled for monthly visits, it's not necessary to receive notices of her visits.

There is a program for health of school employees. Under this program a sick-leave of five days is granted per school term. Earlier, a fee of $7.50 per day was paid for the period of 5 days-leave. If the total days of the sick-leave were not used a bonus was paid the employees for the unused days. This policy was recently changed. Now a twelve day-leave is given, but no compensation is allowed for the unused days. Five of these days are cumulative.

Most of the preschool children have their minor defects corrected before entering school. This practice depends on the parents' intelligence and interest in children.

First-Aid.— The data on the Service Rendered and Type of
<table>
<thead>
<tr>
<th>Factor</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>Health Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Does a close working relationship exist between your school and the local health department?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Do local official and voluntary agencies participate in the school health program?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Do teachers and public health nurse participate in teacher-nurse conferences when public health nurse visits the school?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Do teachers do periodic teacher observation of children?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Do teachers keep up to date notes of &quot;teacher observations&quot; and transfer them with other records?</td>
<td>2</td>
<td>.50</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>(b) Are your immunization standards in line with those recommended by State Department of Public Health?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 30

DISTRIBUTION OF SELECTED FACTORS ON THE REPORTS OF HEALTH PERSONNEL OF THE DEPARTMENT OF
PUBLIC HEALTH IN THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1967

<table>
<thead>
<tr>
<th>Factor</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>Health Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9B. Does the school receive reports of the visits of health officer?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>(a) Reports of visits of other public health personnel?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Is a health examination, including chest x-ray, required of all school personnel before employment?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) If not, which ones?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>(b) Periodically every two years thereafter?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Is there a program for health of school employees?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Do employees earn sick leave?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Is provision made for employee health insurance?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Are pre-school children examined and remediable defects corrected before entering school?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Equipment for First-Aid in the School Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 21, page 72.

The provision and equipment for First-Aid are quite adequate. There is a clinic room with a cabinet well stocked with First-Aid supplies. Sufficient supplies are always on hand. The cabinet is easily accessible in time of accidents.

An adequate means of transporting pupils home or to the doctor is provided for by the administrators (Principals).

During the school year an in-service course in First-Aid was held in which twenty-five (25) teachers participated.

Civil Defense Program.— The data on the Civil Defense Program in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 22, page 73.

Of the four schools reporting, three or .75 reported an inadequacy or a lack in the following areas:

1. Do not have a Civil Defense Program.
2. Children are not required to wear identification tags.
3. Children are not instructed in safety measures should disaster strike.

The Negro schools in Houston County are in need of an adequate Civil Defense Program; and the program should be enforced.

Physical Education.— The data on Physical Education and Recreation in the School Health Program of the Negro Schools of Houston County are found in Table 23, page 75.

The Negro Schools of Houston County, Georgia, have a Physical
### TABLE 21

**DISTRIBUTION OF SELECTED FACTORS OF THE SERVICES RENDERED AND TYPE OF EQUIPMENT FOR FIRST-AID IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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>10. First-Aid</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Is there a health suite?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Does it contain a special room for the care of the sick?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Does this suite meet standards of Building Code?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Is there a First-Aid cabinet?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Is this cabinet easily accessible in time of accident?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Do you check contents weekly and refill if needed?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Is someone trained in First-Aid designated to be called for all serious accidents?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Are all the teachers trained in First-Aid?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) If not what per cent?</td>
<td>50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>11. Plan for Sick Children</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Do you isolate sick child?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Do you have plans for transportation?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) home?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) hospitals?</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) doctor?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### TABLE 22

**DISTRIBUTION OF SELECTED FACTORS OF THE CIVIL DEFENSE PROGRAM IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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>Civil Defense</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Does your school have active civil defense?</td>
<td>1</td>
<td>.25</td>
<td>1</td>
<td>.25</td>
<td>2</td>
<td>.50</td>
</tr>
<tr>
<td>b. Is the school program of civil defense in accord with State program of civil defense?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td></td>
<td></td>
<td>.75</td>
</tr>
<tr>
<td>c. Does every child wear an identification tag?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td></td>
<td></td>
<td>.75</td>
</tr>
<tr>
<td>d. Has every child received instruction as to where to go when disaster hits?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td></td>
<td></td>
<td>.75</td>
</tr>
<tr>
<td>e. What to do and what precautions should be observed when disaster strikes?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td></td>
<td></td>
<td>.75</td>
</tr>
</tbody>
</table>
Education and Recreation Program in the elementary schools in compliance with the state-law; however, these respective programs are inadequate.

The inadequacy is due to (1) no provision is made for instruction of Physical Education and Recreation; (2) Physical Education is referred to as "Supervised Play Periods," and (3) no teaching of Physical Education is done by the classroom teachers due to the lack of professional preparation in Physical Education on the part of the teachers, especially the elementary school teachers.

The teacher trained in Health and Physical Education at the High School level is unable to work with elementary program due to regular classroom duties, duties of Health Coordinator and coach of varsity and Intermural Activities (for high school).

The play periods are supervised thirty minutes each day.

Activities of the Physical Education Program—The data on the activities of the Physical Education Program in the School Health Program of the Negro Schools of Houston County are presented in Table 24, page 76.

Three of the four schools reported that the instruction dealing with the motor skills was fair; three of the schools indicated that the instructional provisions of activities for normal growth and development was only fair; three schools reported that teaching the arts and crafts for recreational purposes was fair and one reported it was good; all four schools gave no response for a program of fundamentals in activities involving the basic skills of running, jumping, throwing, dodging,
### TABLE 23

DISTRIBUTION OF SELECTED FACTORS OF THE PHYSICAL EDUCATION AND RECREATION PROGRAM IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>Physical Education and Recreation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. c. 1. Is the state law regarding physical education complied with?</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. In Elementary School</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) By providing a program of physical education and recreation for all children?</td>
<td>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) Teaching done by classroom teachers?</td>
<td>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Have they had training in physical education?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d) Does the physical education teacher in high school help the elementary teacher?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e) Is physical education coordinated with the total school program?</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 24

DISTRIBUTION OF SELECTED FACTORS OF THE INSTRUCTIONAL PROGRAM (AND ACTIVITIES)
OF THE PHYSICAL EDUCATION AND RECREATION PROGRAM OF THE SCHOOL HEALTH PROGRAM
OF THE NEGRO SCHOOLS OF HOUSTON COUNTY SCHOOLS, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) The learning of motor skills?</td>
<td>3</td>
<td></td>
<td></td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>(2) The providing of sufficient physical activities for normal</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>growth and development?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) The teaching of arts and crafts for recreational purposes?</td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>12. Is the program planned progressively to precede:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Games, utilizing the fundamental activities of running, jumping,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>throwing, striking, dodging, falling and catching?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Rhythmic activities suited to the age of the children?</td>
<td></td>
<td>4</td>
<td></td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>(3) Stunts and self-testing activities?</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>(4) Activities requiring self-expression, self-direction and group</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>organization?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Modified activities suited to the abilities of the physically</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>handicapped?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Intramural competition in sports and games adapted to age levels?</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>(7) Music (singing, Piano etc.)</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>(8) Dramatics, hobbies, etc.</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>
falling, and catching; rhythmic activities were reported as only fair or good; intramural activities in games and sports adapted to age levels were reported as fair for the most part; three of the schools reported either no program or did not respond on the item pertinent to the activities for the physically handicapped; and three of the schools reported only fair programs calling for self-expression, self-direction, and group organization on the part of pupils.

The overall data would appear to indicate that the Houston County (Georgia) Schools were either poor or promising good in their provisions of activities in the physical skills and social competence of their pupils.

Integration of Health Instruction.--- The data on the integration of Health Instruction in the Health Program of the Negro Schools of Houston County, Georgia, are presented in Table 25, page 78.

Three of the schools stated Health is integrated with the other subjects - subjects such as reading, science, the social studies, arts, music, physical education and arithmetic.

Schedule of Health Instruction.--- The data concerning the Scheduling of Health Instruction in the Health Program of the Negro Schools of Houston County Schools, Georgia, 1956-1957, are presented in Table 26, page 79.

Insipite of the fact that the grades were not extended beyond seventh grade, four or 100% of the schools stated they had set aside definite periods for health instruction. It is safe to assume that the State Law requiring that thirty minutes per day be assigned to
TABLE 25

DISTRIBUTION OF SELECTED FACTORS OF INTEGRATION OF HEALTH INSTRUCTION AND OTHER SUBJECTS IN THE SCHOOL HEALTH PROGRAM IN THE NEGRO SCHOOLS OF HOUSTON COUNTY SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>D. Health Instruction</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Is health instruction integrated into the teaching of all subjects in:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Elementary Schools?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Check subjects: Reading X Science X Social Studies X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Art X Music X Physical Education X Arithmetic X</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### TABLE 26

DISTRIBUTION OF SELECTED FACTORS OF HEALTH INSTRUCTION IN THE SCHOOL HEALTH PROGRAM IN THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>D. 5. 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. Elementary school (7-8 grades)</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

79
health activities is the main factor in the report of a definite period for health instruction in each of the four schools.

**Supplementary Materials.**— The data on Supplementary Materials used in the School Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 27, page 81.

Three of the schools reported using the following aids as supplementary materials: films, posters, and magazines. Two of the schools used charts, and models extensively; none reported using exhibits, reference books and pamphlets; two of the schools reported using, extensively, the materials available from the local Health Department. Only one school reported having sufficient and adequate materials in the Library. Three schools reported having adequate health reference materials for teachers. The same three schools reported their pupil reference materials happened to be adequate in quantity and presumably adequate as to quality.

**Activities Carried on in the School Health Program.**— The data on the activities carried on in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are found in Table 28, page 82.

Four of the schools reported that no health teaching is done through such activities as: trips to (1) markets; (2) Daries, (3) Bakeries, (4) Water Works, (5) Health Department, (6) Hospitals, (7) Special Lecture, (8) Radio Programs, (9) Campaigns, (10) Immunization and (11) Weighing and measuring children.

Further, 2 or 3 or 4, that is, all of the schools reported that no teaching of health was done through activities such as: (1) dental,
### TABLE 27

**DISTRIBUTION OF SELECTED FACTORS OF SUPPLEMENTARY MATERIALS USED IN THE SCHOOL HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957**

<table>
<thead>
<tr>
<th>Factor</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. Films</td>
<td>3</td>
<td>75%</td>
<td>1</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Charts</td>
<td>2</td>
<td>50%</td>
<td>2</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Posters</td>
<td>3</td>
<td>75%</td>
<td>1</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Exhibits</td>
<td>4</td>
<td>100%</td>
<td>4</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Reference Books</td>
<td>4</td>
<td>100%</td>
<td>4</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Pamphlets</td>
<td>4</td>
<td>100%</td>
<td>4</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Magazines</td>
<td>3</td>
<td>75%</td>
<td>1</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Models</td>
<td>2</td>
<td>50%</td>
<td>2</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Materials available from local health department</td>
<td>2</td>
<td>50%</td>
<td>2</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Is there adequate health materials available in the school library?</td>
<td>1</td>
<td>25%</td>
<td>3</td>
<td>75%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) References for teachers?</td>
<td>3</td>
<td>75%</td>
<td>1</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) References for Pupils?</td>
<td>3</td>
<td>75%</td>
<td>1</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### TABLE 28

**DISTRIBUTION OF SELECTED FACTORS OF ACTIVITIES CARRIED ON IN THE SCHOOL HEALTH PROGRAM IN THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956—1957**

<table>
<thead>
<tr>
<th>Factor</th>
<th>Home</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Fair</td>
<td>Poor</td>
<td>Good</td>
<td>Excellent</td>
<td>So Response</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**D. S. Is any health teaching done through such activities as:**

- Trips to dairies
- Market
- Bakery
- Water Works
- Grocery Store
- Fire Department
- Health Department
- Hospitals
- Special lectures
- Radio program (received at school)
- Assembly programs on health
- Helping in community clean-up campaigns
- Medical examinations
- Immunizations
- Weighing and measuring children
- Dental examination
- Testing hearing
- Testing vision
- Using cumulative health records
- School lunchroom program
- Morning inspection
- Teaching high school pupils how to drive a car
- Safety on school bus
- Safety at school
- Safety in the community
- Safety in the home
- Fire drills
- Use of fire extinguishers
- Laboratory experiments
- Making a study of what children are eating
- Nutritional experiments with white rats
- Having children assume responsibility for regulating heating and ventilation to maintain temperatures 68 to 70 degrees
- Having pupils adjust curtains and lights for best lighting effects
- Play activities of children
- Having children help keep grounds and buildings clean and attractive
- Planting of vegetable gardens:
  - (a) at home
  - (b) at school

<table>
<thead>
<tr>
<th>Factor</th>
<th>Home</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Fair</td>
<td>Poor</td>
<td>Good</td>
<td>Excellent</td>
<td>So Response</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 4 100
- 4 100
- 4 100
- 3 75
- 5 75
- 4 100
- 2 80
- 4 100
- 4 100
- 4 100
- 4 100
- 4 100
- 2 80
- 5 75
- 5 75
- 5 75
- 2 80
- 2 80
- 4 100
- 4 100
- 3 75
- 2 80
- 3 75
- 1 25
- 3 75
- 2 80
- 1 25
- 3 75
- 1 25
- 3 75
- 1 25
- 3 75
- 1 25
- 3 75
- 2 80
- 3 75
hearing and vision examinations, and morning inspections, (2) driver
education, (3) safely practices on buses, at school, at home, or in
the community, (4) experimental projects in nutrition, (5) lunchroom
decorium, (6) pupil regulation of the factors of heating, lighting, and
ventilation within the school building, (7) playground activities, (8)
buildings and grounds upkeep or maintenance, and (9) vegetable garden
projects.

It is quite evident that the Negro schools of Houston County,
Georgia are unmindful and/or indifferent to the wealth of worthwhile and
accessible activities through which to enrichen and vitalize the
"learning experiences" in health for their pupils.

Moreover, it is apparent that the investment in a Health Coordi-
nator for these schools is not paying off in the expected returns of
an effective program of health the children and youth of Houston County,
Georgia.

Health Habits.-- The data on Health Habits in the Health Program of
the Negro Schools of Houston County, Georgia, 1956-1957, are presented
in Table 29, page 84.

Four or 100% of the schools reported that the pupils practiced
personal health habits, but a very low percentage (25%) to fifty per-
cent of pupils being able to select adequate and balanced diets, eating
regularly and properly and visiting dentist, which means more motiva-
tion should be done in these areas by the school personnel and Parent-
Teacher Associations.

Healthful Practices.-- The data on Healthful Practices in the
DISTRIBUTION OF SELECTED FACTORS OF HEALTH HABITS IN THE SCHOOL HEALTH PROGRAM OF THE NSREO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>Health Habits</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. In 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 behaviors and proper attitudes rather than knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>for knowledge's sake, as evidenced by pupils:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Selecting adequate and balance diet when choices can be made</td>
<td>1</td>
<td>.25</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>at 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>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c) Visiting dentist twice yearly and at other times when needed?</td>
<td>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d) Drinking plenty of water daily?</td>
<td>2</td>
<td>.50</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e) Brushing teeth properly before breakfast and after each meal?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(f) Keeping their person clean and well groomed?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(g) Practicing proper toilet habits?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(h) Washing and drying hands with proper towels before meals?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) After visiting toilet?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i) Playing outdoors except during inclement weather?</td>
<td>4</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</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>proper amounts of sleep?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(k) Practicing good posture habits?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(l) Taking proper care of eyes, ears, teeth?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Health Program of the Negro Schools of Houston County, 1956-1957, are presented in Table 30, page 86.

Four or 100% of the schools reported progress in healthful practices that prevent the spread of communicable diseases, maintaining sanitary conditions at home and school, selecting clothing suitable for weather conditions, and choosing scientific medical advice in preference to self treatment of illnesses. On the other hand, motivation is needed in the areas of safety in the homes and thoroughfares, showing interest in growth and reasons for it; working together cooperatively; and being kind and thoughtful.

Special Education. — The data on the Special Education Program in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are presented in Table 31, page 87.

Four or 100% of the schools reported that no provision is made for Special Education in the Health Program; two of the schools reported a need for a program for the mentally retarded; and one school reported a need for provisions to be made in all areas of Special Education. One or 25% of the schools gave no response with reference to the provision for the mentally retarded.

It is evident that the Houston County (Georgia) Schools should give serious consideration to the need for and feasibility of making some type of provisions for a program of Special Education to serve the needs of the school children and youth which they serve.

Lunch Room. — The data on the Lunch Room in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957, are presented
TABLE 30
DISTRIBUTION OF SELECTED FACTORS OF HEALTHFUL PRACTICES IN THE HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>Healthful Practices:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Remaining at home when attacked with colds or other communicable diseases?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Helping to keep building properly adjusted to needs of pupils?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Helping to keep seats properly adjusted to needs of pupils?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Observing proper safety rules at school?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- On streets?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- In homes?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Participating in monthly fire drills?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Showing interest in their growth and reasons for it?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Working together cooperatively and being kind and thoughtful?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Having knowledge of and wearing and caring for proper clothing?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Knowing how and properly caring for sick in the home?</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Knowing how and administering First-Aid properly?</td>
<td>1</td>
<td>25</td>
<td>3</td>
<td>75</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Selecting scientific medical advice when ill rather than treating self with patent medicine or following advice of unqualified persons?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Influencing in homes:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Screening?</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Providing better toilet facilities</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Better health habits of other members of family?</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Improving water supply?</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Helping to make homes more attractive?</td>
<td>3</td>
<td>75</td>
<td>1</td>
<td>25</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 31

DISTRIBUTION OF SELECTED FACTORS OF SPECIAL EDUCATION IN THE HEALTH PROGRAM OF THE NEGRO SCHOOLS OF HOUSTON COUNTY SCHOOLS, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Factor</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>E. Special Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<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>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is this program approved by State Department of Education?</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Which program are needed?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentally retarded</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No response</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Four or 100% of the schools stated that school lunchroom personnel were holders of health certificates; three or .75 of the schools reported that menus were made by persons trained in nutrition; yet 3 or .75 of these schools reported selling soft drinks, and 2 or .50 sold ice cream.

The Houston County (Georgia) Schools need to reconcile the conflicting philosophies and practices in the nutritional pattern posed by the School Lunch Program on the one hand and soft drinks and snack bar program, on the other hand.

Teacher Traits.— The data on Teacher Traits in the Health Program of the Negro Schools of Houston County, Georgia, 1956-1957 are presented in Tables 33 - 37.

The majority of the teachers (43-56) of Houston County Schools, 1956-1957, was indicated as possessing an array of the more "desirable" characteristics looked for in an excellent teacher; therefore, under such optimum climates, most of the pupils should be able to develop to their highest potentialities. Most of the teachers possessed those qualities that, from health education standpoint, would provide teaching and learning experiences and activities most conducive to the purpose of favorably influencing the knowledges, habits, attitudes, practices, appreciations and conduct pertaining to individual and group health. From the standpoint of healthful school living, most of the teachers should have been able to plan procedures and activities which provided conditions within the schools that were most conducive to
### TABLE 32

**DISTRIBUTION OF GENERAL INFORMATION PERTAINING TO THE PERSONNEL AND SERVICES OF THE LUNCHROOM PROGRAM OF THE HOUSTON SCHOOLS**

<table>
<thead>
<tr>
<th>Services / Certificates</th>
<th>No</th>
<th>Per Cent</th>
<th>None</th>
<th>Per Cent</th>
<th>No Response</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Only persons holding health certificates handle the lunchroom food</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Menus are made by a trained person in nutrition</td>
<td>3</td>
<td>.75</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Menus are made by a person who has had no training in nutrition</td>
<td>1</td>
<td>.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Sell soft drinks</td>
<td>3</td>
<td>.75</td>
<td></td>
<td></td>
<td>1</td>
<td>.25</td>
</tr>
<tr>
<td>5. Sell ice cream</td>
<td>2</td>
<td>.50</td>
<td></td>
<td></td>
<td>2</td>
<td>.50</td>
</tr>
<tr>
<td>6. Sell candy</td>
<td>4</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
optimum physical, mental and emotional health and safety of the school population. These teachers were indicated as providing and fostering a "psychologic-climate" in the schools which was markedly by such factor-conditions as: wholesome and favorable classrooms and school environment; school organization designed to maintain optimum health; satisfactory relationship among teachers, pupils and administration; satisfactory relationship between pupils; ample periods of rest, relaxation and recreation; and facilities and activities free from unnecessary safety hazards.

Obviously, such a "psychologic-climate" for the "teaching-learning Situations" in the Houston County (Georgia) Schools should provide the most conducive environment for the mental, physical, emotional, and social growth and development of their respective school populations.
<table>
<thead>
<tr>
<th>Traits</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Teacher has a neat, clean appearance</td>
<td>55</td>
<td>.95</td>
</tr>
<tr>
<td>2. Alert, cheerful, and enthusiastic</td>
<td>51</td>
<td>.87</td>
</tr>
<tr>
<td>3. Pleasing facial expression</td>
<td>55</td>
<td>.95</td>
</tr>
<tr>
<td>4. Well modulated voice</td>
<td>49</td>
<td>.84</td>
</tr>
<tr>
<td>5. Shrivl voice (or loud voice)</td>
<td>5</td>
<td>.08</td>
</tr>
<tr>
<td>6. Uses gestures and facial expression to call attention to pupil's shortcomings</td>
<td>7</td>
<td>.12</td>
</tr>
<tr>
<td>7. Helpful, calm, unruffled, patient, and soothing</td>
<td>33</td>
<td>.32</td>
</tr>
<tr>
<td>8. Sarcastic, nervous, critical and curt</td>
<td>6</td>
<td>.10</td>
</tr>
<tr>
<td>9. Helps in a calm, but business like a way</td>
<td>48</td>
<td>.82</td>
</tr>
<tr>
<td>10. Gets order by promising punishment</td>
<td>23</td>
<td>.39</td>
</tr>
<tr>
<td>11. Ignores children's complaints</td>
<td>9</td>
<td>.15</td>
</tr>
<tr>
<td>12. Decidedly clear in direction</td>
<td>30</td>
<td>.51</td>
</tr>
<tr>
<td>13. Enjoys fun with class (sense of humor)</td>
<td>43</td>
<td>.74</td>
</tr>
<tr>
<td>14. Comments on efforts</td>
<td>55</td>
<td>.91</td>
</tr>
<tr>
<td>15. Calls attention to mistakes kindly</td>
<td>47</td>
<td>.81</td>
</tr>
<tr>
<td>16. Resentful of interruptions</td>
<td>6</td>
<td>.10</td>
</tr>
<tr>
<td>17. Gratefully receives criticisms</td>
<td>46</td>
<td>.79</td>
</tr>
<tr>
<td>18. Resents criticisms</td>
<td>3</td>
<td>.05</td>
</tr>
<tr>
<td>19. Activities are teacher directed</td>
<td>15</td>
<td>.25</td>
</tr>
<tr>
<td>20. Children seem unrestrained</td>
<td>15</td>
<td>.25</td>
</tr>
<tr>
<td>21. All pupils in the same grade are doing the same thing</td>
<td>5</td>
<td>.08</td>
</tr>
<tr>
<td>22. Activities are varied according to groups and individual needs and interests</td>
<td>52</td>
<td>.89</td>
</tr>
</tbody>
</table>
### Table 34

DISTRIBUTION OF THE AREAS OF PREPARATION RELATED TO HEALTH EDUCATION WHICH WERE PURSUED BY THE TEACHERS IN THE FOUR NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Type of Training</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Health Education in Elementary Schools</td>
<td>38</td>
<td>.83</td>
</tr>
<tr>
<td>2. Community Hygiene</td>
<td>24</td>
<td>.52</td>
</tr>
<tr>
<td>3. Child Development</td>
<td>29</td>
<td>.63</td>
</tr>
<tr>
<td>4. Mental Hygiene</td>
<td>17</td>
<td>.36</td>
</tr>
<tr>
<td>5. Child Behavior</td>
<td>20</td>
<td>.43</td>
</tr>
<tr>
<td>6. Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. First-Aid</td>
<td>3</td>
<td>.06</td>
</tr>
<tr>
<td>b. Psychology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) Child</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TABLE 35

DISTRIBUTION OF THE PHILOSOPHIES AND/OR CRITERIA PERTAINING TO PUPIL-TEACHER RELATIONSHIP OPERATIVE IN THE FOUR NEGRO SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Philosophy / Criteria</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Teachers Philosophy of Discipline</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The child is viewed as an organism responding to the world according to his powers and capacities, hence the child is an individual to be developed.</td>
<td>34</td>
<td>.73</td>
</tr>
<tr>
<td>b. The teacher must put forth effort to correct what are regarded as inborn traits or inherent urges to misconduct, hence the child is an individual to be corrected.</td>
<td>10</td>
<td>.21</td>
</tr>
<tr>
<td><strong>2. Formulating Standards</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The child helps formulate standards</td>
<td>37</td>
<td>.80</td>
</tr>
<tr>
<td>b. The teacher formulates standards for the child.</td>
<td>5</td>
<td>.10</td>
</tr>
<tr>
<td><strong>3. Judging Standards</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The child is the judge of standards</td>
<td>37</td>
<td>.80</td>
</tr>
<tr>
<td>b. The teacher formulates standards for the child.</td>
<td>5</td>
<td>.10</td>
</tr>
</tbody>
</table>
TABLE 36

DISTRIBUTION OF THE PRINCIPLES PERTAINING TO DISCIPLINARY CONTROL AND PUNISHMENT AS FOUND OPERATIVE IN THE FOUR SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1967

<table>
<thead>
<tr>
<th>Controls / Punishment</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Disciplinary Controls</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The child is guided by social approval and disapproval</td>
<td>9</td>
<td>.19</td>
</tr>
<tr>
<td>b. The child is guided by an idea</td>
<td>1</td>
<td>.02</td>
</tr>
<tr>
<td>c. The child is guided by fear</td>
<td>3</td>
<td>.06</td>
</tr>
<tr>
<td>d. The child is guided by development of a willingness to accept responsibility for an act</td>
<td>30</td>
<td>.65</td>
</tr>
<tr>
<td>2. Punishment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Corporal Punishment</td>
<td>3</td>
<td>.06</td>
</tr>
<tr>
<td>b. Make the child stand for a long time</td>
<td>1</td>
<td>.02</td>
</tr>
<tr>
<td>c. Avoid using recreational or recess periods.</td>
<td>11</td>
<td>.43</td>
</tr>
<tr>
<td>d. Deprive the child of recreational or recess periods.</td>
<td>5</td>
<td>.10</td>
</tr>
<tr>
<td>e. Use none of these</td>
<td>23</td>
<td>.50</td>
</tr>
</tbody>
</table>
TABLE 37

DISTRIBUTION OF PRINCIPLES PERTAINING TO STRUCTURAL DIFFERENCES AND FATIGUE AS FOUND OPERATIVE IN THE FOUR SCHOOLS OF HOUSTON COUNTY, GEORGIA, 1956-1957

<table>
<thead>
<tr>
<th>Differences / Fatigue</th>
<th>Number</th>
<th>Per Cent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Per Cent</td>
<td>Yes</td>
</tr>
<tr>
<td>1. Individual Differences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Is the same lesson plan used for all pupils?</td>
<td>5</td>
<td>40</td>
</tr>
<tr>
<td>b. Are pupils given a chance to excel in some one thing at same time?</td>
<td>34</td>
<td>5</td>
</tr>
<tr>
<td>c. Are promotion granted on knowledge of subject-matter</td>
<td>11</td>
<td>23</td>
</tr>
<tr>
<td>d. Are reports cards and grades emphasized?</td>
<td>24</td>
<td>14</td>
</tr>
<tr>
<td>e. Are special provision made for handicapped children?</td>
<td>5</td>
<td>33</td>
</tr>
</tbody>
</table>
CHAPTER IV

SUMMARY AND CONCLUSIONS

Introductory Statement.— The problem in this study was to determine the nature and scope of the separate areas of (a) Healthful School Environment (b) Health Services, (c) Physical Education and Recreation, (d) Health Instruction and (e) Special Education, of the total Health Program in the Negro schools of Houston County, Georgia, 1956-1957.

Limitations of the Study.— This study was limited to the three elementary schools and the elementary department of Houston County Training School of Houston County, Georgia, 1956-1957. Another degree of knowledge about willingness to give and objectivity of the responses to the questionnaire items by the respondents.

Purpose of the Study.— The major purpose of this research was to ascertain the nature and scope of the physical facilities, the services rendered, the instructional activities, and the personnel involved in the overall program of Health Education found to be operative in the Houston County Schools, Georgia 1956-1957. More specifically, the purposes of this research were as follows:

1. To determine the nature and scope of the present and projected program of Health Education in the Houston County Schools, Georgia, 1956-1957.

2. To determine the extent to which the facilities are adequate for carrying on the Health Program in the school.

3. To determine the extent to which there are cooperative Health Services offered by the school and the community agencies.
4. To determine the extent to which there are cooperative Health Services and Health Instruction are integral parts of the total instructional program of the school and are provided specific time allotment for their performance.

5. To determine the extent to which medical examinations, immunization and follow-up services are carried out.

6. To determine to what extent a comprehensive system of records and reports has been set up and maintained by the schools.

7. To develop a comprehensive scheme of appraisal and evaluation of the operation of the Health Program in the schools.

8. To develop a suggestive program of Health Education for the Houston County Schools, Georgia.

9. To formulate whatever educational theory and practices as may be derived from the analysis and interpretations of the data.

Definition of Terms.—Authorities differ in regard to terminology used in the field of health, physical education, and recreation; therefore, it is necessary to define or characterize certain significant terms as they will be used throughout this study.

1. The term, "Health" as used in this study refers to that quality of life that renders the individual fit to live most and serve best. Health in this research is also used to mean that subject in the classroom which deals with instructing one how to care for his body to attain physical fitness.1

2. The term, "Healthful School Living," as used in this study refers to a term which designates the provision of a safe and healthful school day and the establishment of inter-personal relationships favorable to best emotional, social and physical health of pupils.2

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3. The term, "Health Services" as used in this study refers 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 remediable defects; (d) help prevent and control disease; (e) providing emergency care for the sick or injured.\(^1\)

4. The term, "Health Instruction" as used in this study refers to that organization of learning experiences directed toward the development of favorable health knowledge, attitudes and practices.\(^2\)

5. The term, "Recreation" as used in this study refers to leisure time activity which the individual engages in because he desired and chose to do so. It has been variously defined as amusement, refreshment, diversion. Recreation is broad enough to include play and its every expression and also many activities that are usually not thought of as play music, drama, the crafts, every free activity and especially creative activity which make for enrichment of life and abundant living.\(^3\)

6. The term, "Recreation" as used in this study refers to an attitude or spirit which finds expression in varied forms of activity to the children, youth and adults.\(^4\)

7. The term, "Mental Health" as used in this study refers to the ability of an individual to adjust satisfactory to various strains he meets in life.\(^5\)

8. The term, "Total Health Program" as used in this study refers to the school procedures that contribute to the maintenance and improvement of the health of pupils and school personnel, including health services, health education and healthful living.\(^6\)

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\(^1\) American Association of School Administrators, Health in Schools. Washington, D. C. National Education Association, p. 5.


Locale and Research-Design.-- Significant aspects of the Locale and
Research Design are characterized in the statements below.

Locale: Perry is the county seat of Houston County and is located in
the central part of Georgia, twenty-eight miles south of Macon,
Georgia. Two Federal highways run through Perry, Georgia. High-
way No. 341 runs north and south. Highway No. 41 runs north and
east, which makes the town an alert clean touring town. There is a
population of 35,000, of which sixty-five per cent are Negroes.

The town is located in a productive farming region. The leading
products in the county are peaches, pecans, peanuts, cotton and
watermelons. There is an Air Force Base in the county, Warner
Robins Air Force Base. A large number of Negroes from Perry,
Georgia are employed at the Base. Most of the Negroes employed in
industries are classified as unskilled workers, a few are classi-
fied as skilled workers, a large number employed are classified
as personnel and domestic workers and a very small number as semi-
professional and public workers.

Period of Study: This research was conducted during the school years
of 1956-1957 and 1957-1958, with the data being collected the first
year and the writing of the research - report being done the second
year.

Subjects: The subjects involved in this study were fifty-eight
elementary teachers employed in three consolidated elementary schools
and the elementary department of the Houston County Training School.

Instruments: The research instruments used to collect the necessary
data for this study were: (a) specifically designed questionnaires,
(b) documentary analysis of official school records and (c) in-
terviews with the school and community population wherever indicated.

Two types of questionnaires were used in this study. One was de-
signed for the health program in the schools and it consisted of
questions in the area of appraisal of (1) organization and admini-
stration of the School Health Program such as: Personal, Evaluation
Procedure, In-Service Training and the Health Program; (2) the
scope of the School Health Program such as: Healthful School -
Community Environment, Health Service, Physical Education and Recre-
ation, Health Instruction and Special Education.

The other questionnaire, designed for the teachers and was concerned
with the most important problems in the area of Healthful School
Living such as: (a) teacher qualifications and procedures; (b)
general information on lunchroom, personal, services, and certifi-
cation; (c) pupil-teacher relationship, discipline, individual
differences and "fatigue-climate."
Method of Research: The Descriptive-Survey Method of Research, employing the questionnaire, interview, official records, checklist and observation was used to gather the data required for this study.

Procedure: The data for this study were gathered, analyzed, and presented as follows: (1) The literature related to this study was reviewed, summarized and presented in the finished thesis-copy, (2) The questionnaire of Health Appraisal by the State Department of Health was executed by the principals of the cooperating schools, (3) The questionnaire on Teacher-Personnel and Healthful School Environment was executed by the elementary school teachers in the four schools; (4) Interviews were held with teachers and the data derived therefrom was evaluated and presented in the thesis, (5) the data obtained from the questionnaires were assembled in proper tables, analyzed, interpreted and presented in the thesis copy, (6) Findings, conclusions, implications and recommendations derived from the analysis and interpretations of the data were presented in the finished thesis-copy.

Criterion of Reliability: The "criterion" of reliability for appraising the data was the accuracy and authenticity of the responses of the subjects to the items on the questionnaires, together with their responses and reactions during the interviews; and the accuracy and authenticity of the official records which constituted the sources of the data.

Value of the Study: The findings of this study might well provide the basis for the following probable values:

1. To present a genuine picture of the present-day status of the instruction, activities, organizations, and services of the Health Program found to be operative in the Negro schools of Houston County, Georgia.

2. To provide the basis for a comprehensive appraisal and evaluation of the health facilities, instruction, and services of the Negro schools of Houston County, Georgia.

3. To point out more fruitful approaches to the problem of meeting the needs, the modification, and improvement of the Health Program in the Negro Schools of Houston County, Georgia.
Summary of Related Literature.-- The Survey of the Related Literature pertinent to the problems inherent in this research is presented under two captions: (a) Theories and criteria, and (b) Research Studies, in the condensed general statements presented under the appropriate captions that follow.

Theories and Criteria.-- Significant excerpts from the theoretical literature on Health Education are presented below.

1. Turner states that the significant emphasis of the modern school health program has been upon improving health practices of pupils. In another connection Turner states that health habits should be learned by practicing (doing) correct health habits.

2. Abernathy and Williams state that a sizeable majority of State Departments of Health employ Health Education Specialist who devote themselves entirely to school health education.

3. N. E. Cutts states that a child's behavior in the classroom is frequently a sign of some maladjustment of his life out of school. It can also be a warning to the teacher of approaching mental ill-health or delinquency.

4. Turner states that in a good health program pupils gain a sense of responsibility and respect for the care and use of property and the right of others involved.

5. Turner states the school health program should be designed to achieve optimal pupil health through correction of physical defects, the development and maintenance of desirable health habits, desirable mental attitudes to health, health practices, healthful living, and the interpretation of the school health to the home.

6. Irwin states that School Health Services embody all efforts of the school to conserve, protect and improve the health of the school population through activities of remedial and corrective measures.

7. Turner states that a healthful school environment provides a means of teaching health indirectly, which is a vital part of the child's health education.

8. Turner states that Physical Education is a means of developing socializing experiences and attitudes of teamwork as well as growth and development of the individual.
9. Cutts states that punishment is permissible in the classroom, but should be but a small part of discipline.

10. Turner gives a logical sequence by which the health of the pupils can be maintained and even promoted; and the importance of teachers being able to recognize signs of physical and mental health (or any departure therefrom).

Research Studies.— Pertinent literature which reports the Research Studies which have been conducted in the area of Health Education will be found in the selected abstractions therefrom in the summarizing statements to follow.

George Edwards, Jr. in a study of the development of a health program in four Georgia Counties (Cobb, Crisp, Spalding and Walton) found that the school living conditions were rather primitive; for the physical environment of the schools and communities were, in the main, far below the accepted standards.

Irma Pearl F. Ballard in a Study of the Status of Healthful School Living in the Negro Schools of Limestone County, Texas in 1952, found that the school sites and plant facilities were inadequate; and that an In-Service Program was needed in the areas of health education, mental hygiene and modern trends in Education.

Michael J. Brent and Paul Jensen in a Five Year Study in the Grade Schools of Tennessee, 1937, were able to improve the health practices in the schools, but were unable to change the health habits of cleanliness observed in the home.

Williams, Hubbard, and Bain in a Study of Community Health Services for Children in Eight States, found that 1.7 per 1,000 children under 15, and 20 per cent of every 1,000 children under 15 years are receiving care under community health programs and 80 per cent of every 1,000 are
receiving only examinations without treatment.

Rosalind E. Wyatt in a Study of the Recreational Facilities and Leisure Time Needs of Negro Youths in Salisbury, North Carolina, 1948, found that no facilities were provided for the Negro youths and that there was only one Negro Branch Library.

Mary Agnes English in a Study of the Recreational Needs and Interests of One Hundred Twenty-Five Students in Charlton-Pollard High School, Beaumont, Texas, 1948-1949, found that the recreational activities (hobby groups, tennis and swimming) were poorly supervised and inadequately provided for.

Katherine W. Gray in a Survey in Laurens County, Georgia, found that there was a great need for In-Service Training in the areas of: (1) First-Aid, (2) Health Instruction and (3) Health Education; and adequate bus transportation in order to meet the needs in a consolidated school program.

Summary of Basic Findings

Organization— The summary of the basic findings of this study which was conducted to appraise the role and status of the Program of Health provided through the Four Negro School Centers, Houston County, Georgia for the term 1956-1957, is presented below. The detailed data have been extracted from the original 37 tables presented in Chapter III.

Personnel Responsible for and Committee Used in the Health Program

<table>
<thead>
<tr>
<th>Table 1</th>
</tr>
</thead>
</table>

Each of the four schools reported that (1) it had a person directly responsible for the administration and promotion of the health program; (2) it had an active health committee (and that the personnel of the health committee was usually composed of school personnel properly), and (3) that the health committee met regularly and participated in
the task of planning, operating and evaluating the program.

Factors in the Evaluation of the Health Program

Table 2

The four schools reported that they were using the varied evaluative
technique in measuring the effectiveness of their health program.
Two of these schools reported that they did not use health knowledge
and health attitude tests and were not training pupils to evaluate
themselves by keeping anecdotal records, diaries, etc.

All of the schools reported that conferences with school and community
personnel were used in evaluating the health program; three of the
schools indicated that the evaluation was designed to improve the
health program carried on in the school.

Basic Training of the School Health Program

Table 3

The four schools indicated that four or 100 per cent of the school
health personnel have adequate training in the area of health
including mental and social health as well as physical education. The
four schools indicated that they did not have an In-Service Training
Program in health except a three weeks course in First-Aid for Health
Coordinators and other interested persons.

Pre- and Post planning meetings are held monthly throughout the school
year as an attempt to promote the health of the pupils.

Program Planning

Table 4

Three of the four schools reported that they have an operative program
in Health Education which coincide with the community Health Program.

Each of these three schools utilizes the services of the school health
personnel, public health personnel, student representatives, repre-
sentatives from the Parent Teacher Association and laymen from the
community.

The School-Community Environment

Table 5

The four schools are progressing in their efforts to landscape and
beautify their school grounds.

The Parent Teacher Associations donated the shrubbery and flowers. In
each center the playground area is suitable for the pupils attending
the school except one (school center). In this particular school
center, the playground is limited, unsafe even with proper supervision
and give rise to or for accidents. Each center reported that a 30
minute play period is given and that each is properly supervised.
Buildings

Three of the four school centers are newly constructed; one of the four schools was renovated. These schools reported excellent opportunities for healthful school living.

Custodial services are provided in each school and they (custodians) are properly equipped with adequate supplies for good housekeeping. This may be attributed to the fact that all janitors or custodians have had special training for their jobs and are directly responsible to the principals of each center.

Sanitation

Three of the four schools get or secure their water supply from the city; one of the four maintain its own deep well. The water supply of the four schools is adequate, safe, protected and approved by the local Health Department. Drinking facilities are suitable and are located inside the building. They are adjusted to the height and size of pupils (according to age and grades levels) using them.

Handwashing

Handwashing facilities are provided for in the four schools, but are not utilized to the greatest extent (from the Administrators point-of-view). Four schools reported toilet facilities are adequate. The first grade classrooms are self-contained; grades 2 and 3 and 6 and 7 utilize handwashing in their classrooms, but toilet facilities are utilized in the area designated for pupils in grades 4 - 7.

Heating and Ventilation

Each school center has a central heating system; three school centers use natural gas and one uses oil. Each classroom has a thermometer and is properly located. The classrooms are well ventilated and free from drafts. With the adequate heating system, sufficient thermometer and well ventilated classrooms, without drafts, indicate of the school healthful living.

Lighting

The classrooms in the four centers have electric lights. Three centers and half of the fourth are well lighted. Two-way roller shades are used at windows. The desks are arranged for minimum glare and maximum light. The desks and other furniture are of natural wood finish. The walls are a pale green dull finish (which do not produce a glare). The chalk boards are a medium green. Along with other conditions, the teachers are promoters of health (they stand away from windows while teaching so that pupils will not have to face windows (light) when looking at them (teachers).
Classroom Arrangement and Cleanliness

Some of the favorable factors in the classroom arrangements and cleanliness are that well-trained custodians are provided (or used) in each school center; the custodians realize their importance in the general scheme for school sanitation and child welfare and adequate equipment and supplies are provided.

Classrooms

Movable desks are provided for all classrooms in the four schools centers. The classrooms are cleaned and arranged each day after school, but they are rearranged by students during the day to meet the activity needs; the desks are adjusted according to size and groups using them. Three centers and a half of the fourth have sufficient cloakroom area. Growing plants are kept in all classrooms in each center. The floors are finished for "beauty and ease of cleaning."

The unfavorable aspects at each center are that the windows are not screened and no mirrors are used in each classroom (and placed at such a height that children may use them).

School Lunch Program

Each of the four school centers have a cafetorium (a room that is used both as a lunchroom and as an assembly room).

The lunchroom, though in their infancy at present, are fairly well equipped. The lunchroom are certified by the State Department of Health and is inspected regularly by personnel of this department. The rules of operation are complied with as have been designated by the Department of Health -- some are that lunchroom workers must have physical examinations, training in sanitation and proper methods of food handling etc. and that no package foods should be sold at the schools. Only pasteurized milk is served with meals (at school). Federal Aid is given to each school center's School Lunch Program.

To further promote the welfare of the pupils, all pupils are encouraged to participate in the school lunch program; however many do no participate. Free how lunches are provided for many each day. The school lunch program is bringing about positive learning experiences in that the pupils are taught proper handwashing techniques, how to use flat ware (silver) properly, to remain at the table until each in his group has finished eating and to not indulge in play immediately after eating along with common courtesy in lunchroom as well as other areas of the school-community environment.
Scheduling the School Day and Promotion Policies

In considering the welfare of the pupils, of the four school centers, the school programs were planned that the school day would be long enough to give time for classroom activities, outdoor supervised play-periods and indoor activities that will be relaxing to the pupils. Rest periods are taken when deemed necessary by the teachers.

Promotion Policies

It is not the policy of the Negro schools of Houston County to retain pupils unless under extreme situations such as excessive absenteeism and very poor effort on the part of the child. Report to parents should be improved. The teacher takes into consideration the total development of the child, yet she's only able to report on the child's scholastic achievement according to the present reporting system, which gives the parents and the future teacher only one side of the child's future growth and development. Two years earlier this situation was studied and recommendations were made; a year later this situation was restudied and recommendations were made, but to date no definite steps have been made to provide a reporting system to parents that will express the teacher's observations on findings of the pupils' growth and development.

Personal Relationship

In order to really meet the needs of pupils in our school, it's quite necessary that the teachers have a knowledge of the pupil's background. This knowledge can be secured by talking (constructively) with pupils and visiting their homes. Visitation of the homes is one of the policies of the Negro schools of Houston County, Georgia.

Evidence of its influence is indicated from the reports of the four school centers as the relationship between the community and school as being good. Also included this report are the relationships of other personal relationship factors. The reporting is as follows: three school centers report that the relationship between principals and teachers were good; the relationship between teachers was reported as being good in all centers.

This means that good citizenship and professional ethics are good examples demonstrated by the school personnel that are conducive to promoting good sportsmanship and citizenship among the pupils.

With a knowledge of the pupils background the teacher is better able to help the pupils make the necessary adjustment that will aid them in functioning in a democratic society.
Program of Counseling

This area is quite inadequate in the school program of the Negro schools of Houston County, Georgia. Teacher-pupil conferences and Parent Teacher conferences have been the means of making satisfactory adjustment of situation in the area of behavior problems.

We have a very congenial visiting teacher, who has been quite instrumental in the area of attendance, poor and "non." Though the area of counseling is quite inadequate, the old method of teacher-pupil, Parent Teacher in the more urgent cases, have been quite fruitful in making satisfactory adjustments in the area of behavior problems and the "visiting-teacher" has aided in improving poor attendance, along with the teacher's "home-visits."

Community Environment

The schools, along with the local Public Health Department, are sensitive to the protective measures in helping promote the health of the community. Realizing that a healthy community is a necessity in order to develop and maintain health habits that are desirable and liveable, the schools of Houston County have included in their health programs or activities those materials that will enlighten and stimulate the pupils to want and appreciate having and adequate and safe water supply, fluoridation of water, proper garbage disposal and insect and rodent control.

School-Community Safety

All buildings are one-story buildings which have no need for stairs except to enter the rostrum. There are provided with hand rails and lighted. Two or .50 of the schools reported having treads on stairs; one or .25 per cent reported "no treads" on stairs and one or .25 per cent gave no response. Four or 100 per cent stated that the floors are in good repair.

Housekeeping and Maintenance

Most of the schools reported quite favorably on the schools, such as: non-skid wax is used on the floors; the doors open out ward; all inflammable and combustible materials are stored in fire-proof containers; the heating units are checked regularly for overloading and other hazards. The fire protection equipment meets the community fire protection regularions and they are inspected regularly by the Fire Department.

Safety on Playground

Three of the schools reporting indicated that the playground construction meet the standards. Proper repairs are made on equipment and the play
grounds are kept free of hazardous materials such as nails, broken glass, and stones, etc. The pupils are also taught the proper use (and upkeep) of playground and playground equipment.

Each center has a person trained in First-Aid on duty at all supervised play periods to further aid in promoting safety on the playground.

Health Services

Houston County has a Public Health Department. The services of the following personnel are available to the Negro Schools of Houston County: the Health Officer, Nurse and a Sanitarian. There is not a Health Service Dental Program, or Dental Hygienist in the program.

Close working relationship exists between the schools' personnel and the local health department. Both local officials and voluntary agencies participate in the health program. The health nurse visits the schools on (regular) schedule. Case reports are made through the offices of each center. From these requests further observations or examinations are made by the nurse. Conferences with the teacher or parent are made after the examination by nurse.

The immunization standards "are in line with those recommended by the State Department of Public Health." Adequate and up to date records are not kept of the visits and observations of the children.

As the Public Health Nurse is scheduled for monthly visits, it's not necessary to receive notices of her visits. There is a program for school employees. Under this program a sick leave of five days are granted per school term. Earlier, a fee of $7.50 per day was paid for the period of five (5) days leave. If total days were not used a bonus was paid the employees for the unused days. This policy is changed. Twelve days are given and no compensation is given for unused days. Five of the days are cumulative.

Most pre-school children minor defects are corrected before entering school. (It depends on parents intelligence and interest in children).

First-Aid

The provision and equipment for First-Aid are quite adequate. There is a clinic room with a cabinet for First-Aid supplies. Sufficient supplies are always on hand. The cabinet is easily accessible in time of accidents. An adequate means of transporting pupils home or to the doctor is provided for by the Administrators (Principals).

During the school year an In-Service course in First-Aid was held in which twenty-five (25) teachers participated.
Civil Defense Program

Table 22

Of the four schools reporting, three or .75 per cent reported delinquency or a lack in the following areas: (1) Do not have a Civil Defense Program; (2) Children are required to wear identification tags; (3) Children are not instructed in safety measures should disaster strike.

Physical Education

Tables 23 and 24

The Negro Schools of Houston County, Georgia, have a Physical Education and Recreation Program in the elementary schools in compliance with the state-law; however, they are inadequate.

The inadequacy is due to: (1) no provision is made for instruction of Physical Education and Recreation; (2) Physical Education is referred to as "Supervised Play Periods" and (3) no teaching is done by classroom teachers due to the lack of professional preparation in Physical Education with professional training of elementary teachers.

One teacher trained in Health and Physical Education at the High School level is unable to work with elementary program due to regular classroom duties, duties of Health Coordinator and Coach of varsity and Intermural activities (for High School). The play periods are supervised thirty minutes each day.

Integration of Health Instruction

Table 25

Three of the schools stated Health is integrated with other subjects—subjects such as reading, science, the social studies, arts, music, physical education and arithmetic.

Schedule of Health Instruction

Table 26

Inspite of the fact that the grades were not extended beyond seventh grade, four or 100 per cent of the schools stated they had set aside definite periods for health instruction.

Supplementary Materials

Table 27

Three of the schools reported using the following aids as supplementary materials films, posters and magazines. Two of the schools used charts and models extensively; none reported using exhibits, reference books and pamphlets; two of the schools reported using extensively the materials available from the local Health Department. Only one school reported having sufficient and adequate materials in the Library. Three schools reported having adequate health reference materials for teachers. The same three reported their pupil reference materials happened to be adequate also.
Activities Carried on the School Health Program Table 23

Most of the schools reported that health teaching is not done through field trips to private and public buildings, school records and other teaching media that offer splendid opportunities and materials for health teaching.

Health Habits Table 29

Four or 100 per cent of the schools reported that the pupils practiced personal health habits, a very low percentage 25 to 50 per cent of the pupils being able to select adequate and balanced diets, eating regularly and properly and visiting dentist, which means more motivation should be done in these areas by the school personnel and Parent-Teacher Associations.

Healthful Practices Table 30

Four or 100 per cent of the schools reported progress in healthful practices that prevent the spread of communicable diseases, maintaining sanitary conditions at home and school, selecting clothing suitable for weather conditions, choosing scientific medical advice to self treatment of illness, but motivation is needed in the area of safety in the homes and thoroughfares, showing interest in growth and reasons for it and working together cooperatively, being kind and thoughtful.

Special Education Table 31

Four or 100 per cent of the schools reported that no provision is made for Special Education in the Health Program; two of the schools reported a need for Mentally Retarded Program and one reported a need for all areas. One or .25 per cent gave no response.

Lunch Room Table 32

Four or 100 per cent of the schools stated that school lunchroom personnel were holders of health certificates; three or .75 per cent of the schools reported that menus were made by persons trained in nutrition; yet 3 or .75 per cent of these schools reported selling soft drinks and 2 or .50 per cent sold ice cream.

Teacher Traits Tables 33 - 37

Most of the pupils should have been able to develop to their highest potentialities as most of the teachers possessed those qualities that, from health education standpoint, would provide teaching and learning experiences and activities for the purpose of favorably influencing knowledge, habits, attitudes, practices, appreciation and conduct pertaining to individual and group health; from the standpoint of healthful school living most of the pupils should have been able to plan
procedures and activities which provided conditions (within the school) that were most conducive to optimum physical, mental and emotional health and safety of the school population (such as wholesome and favorable classroom environment); such organization designed to maintain optimum health; satisfactory relationship among teachers, pupils and administration; ample periods of rest, relaxation and activity free from unnecessary safety hazards.

Conclusions—
1. Health education is a continuing and well-balanced educational program which has for its goal the improvement of human living.

2. It is an integral part of the day-by-day life in any community.

3. No health education program in any school can be successful unless it is developed in active cooperation with the home, and with interested community agencies.

4. When the young child enters school, he brings with him personality, physical status, intellectual background and potentialities for growth, development and efficiency.

5. Administrators and Jeans Teachers, classroom teachers, custodial, lunch-room and other personnel must re-educate themselves to the increased services which they must render pupils and the lay public.

6. Administrators and teachers should be increasingly aware of their necessity or obligation to educate children in congruence with the people’s expectations.

7. (Home, Health Education) Home education includes (1) a knowledge of and a determination to practice these procedures which help to keep the family well; (2) a knowledge of healthful environment factors (with provisions for them); and (3) procedures which help the mental, social, emotional and spiritual growth of the children.
8. (School Health Education) School health education means the use of all the natural situations occurring in the school day to give the children an understanding of the practices which help one to keep well and live more effectively.

9. (Community Health Education) Public Health is concerned with (1) sanitary problems; (2) keeping the masses of people well; (3) improving ways of living through information, education, legislation and the cooperation of all agencies in the area which work for community progress.

10. In the new Building Program, the school health programs must be seriously examined to meet the needs or implications of the "new environment," for changed (1) administration and supervising duties; (2) teaching methods; (3) behaviors as needed in terms of cleanliness and sanitation; (4) custodial services; and (5) for different student participation and activity.

Implications.-- The interpretation of the findings of this study appears to focus attention upon the following implications.

1. It would appear that the Negro schools of Houston County, Georgia are not fully aware of the importance of a comprehensive pupil-accounting system through which to gather, analyze and interpret the data on pupils which are necessary for an adequate Health Program.

2. It would appear that the Negro Schools of Houston County, Georgia are not fully aware of the importance of the mental health for school children and youth.
3. It would appear that the Negro schools of Houston County, Georgia have explored the "potentials" for educative experiences which in the varied instructional activities common to the classroom and school situation.

4. It would appear that the Negro schools of Houston County, Georgia are not utilizing the possibilities for teacher-growth and program improvement which stem from an "in-service program."

5. It would appear that the Negro schools of Houston County, Georgia are not alerted to the pressing needs for inaugurating a program of "Special Education" to serve the needs of these children and youth requiring special educative experiences.

Recommendations.— The analysis and interpretation of the data, with specific reference to conclusions thereof, would justify the following recommendations:

1. That a better system of record-keeping on Health Services and program be used; that records and procedures be planned for continuity (and the elimination of duplication).

2. That more emphasis be placed on follow-up cases, with concentration on educating parents to accept the responsibility for care of their children.

3. That a program of continuous evaluation be included in the planning of health.

4. That indoctrination of the teacher in screening techniques be made available.
5. That home visits (or some means) should be made to make parents cognizant of his responsibility toward family health.

6. That all first graders have a pre-school round-up before admission.

7. That an active Civil Defense Program be set up in every school.

8. That the use of health attitudes and health knowledge tests be a part of the health education program.
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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__.
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__

Interviews and conferences with pupils, parents, health personnel and other teachers? None__Poor__Fair__Good__Excellent__

Training and encouraging pupils to evaluate themselves by keeping anecdotal records, diaries, etc.? None__Poor__Fair__Good__Excellent__

When the above information is obtained is it used to improve the health program? None__Poor__Fair__Good__Excellent__

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__

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__

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

SCOPE OF THE SCHOOL HEALTH PROGRAM

A. HEALTHFUL SCHOOL - COMMUNITY ENVIRONMENT

1. Grounds
   a. Suitable in size to meet state standards? Poor__Fair__
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?
Poor__Fair__Good__Excellent__

b. Adequate number of suitable classrooms? (Minimum 20 sq.ft. per pupil)
Yes__No__

c. Adequate number of other necessary buildings?
None__Poor__Fair__Good__Excellent__

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 wheel chair? Yes__No__

3. Sanitation

a. Is drinking water available on school grounds? Yes__No__
(1) Is source of water approved by the Health Department? 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 heights 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?
(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 use and maintenance of toilets? Yes__No__

g. Is there a toilet that will accommodate a wheel-chair 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? Yes No

   (1) Is it properly located? Yes No

   h. Are there electric lights? Yes No

   (1) Properly shielded? Yes No
   (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 roller 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 marbleized 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? Yes No

   (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 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?
      All Yes No
      Few Yes No
      None Yes No
b. Do all children eat in lunch room? Yes No
   (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? Taught to pack a good lunch? 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? Yes No
   (1) Are all 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 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 home work and extraclass activities?  
Yes  No  
d. Are examinations, marks, reports to parents emphasized to point 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  .
(2) School and homes?  
Poor  Fair  Good  Excellent  .
(3) Principal and administration?  
Poor  Fair  Good  Excellent  .
(4) Principal and teachers?  
Poor  Fair  Good  Excellent  .
(5) Teachers?  
Poor  Fair  Good  Excellent  .

(1) Is there a program of counseling?  
Yes  No  
(1) Is there a trained counselor?  
Yes  No  
(2) Is he trained in mental health?  
Yes  No  

h. Are services of Visiting Teacher available?  
Yes  No  
(1) Has this person had special training for the job?  
Yes  No  
(2) Are these services used to remove the causes for:

(a) Non-attendance?  
Yes  No  
(b) Poor attendance?  
Yes  No  
(c) Behavior problems?  
Yes  No  

8. Community environment

a. Does the school promote and stimulate interest in:

(1) Adequate safe water supply?  
Yes  No  
(a) Fluoridation of water  
Yes  No  
(2) Proper sewage disposal?  
Yes  No  
(3) Proper garbage disposal?  
Yes  No  
(4) Insect and rodent control?  
Yes  No  
(5) Other needed public health protective measures?  
Yes  No  

9. Safety

a. Are all stairways safe?  
Yes  No  
(1) Hand rails on all stairs in good repair?  
Yes  No  
(2) Safety treads on all steps?  
Yes  No  
(3) Bottom and top steps painted in contrast?  
Yes  No  

Yes  No
(4) Stairs and landings well lighted? Yes No
b. Are corridors safe? Yes No
   (1) No projections? Yes No
   (2) No loose plaster? Yes No
   (3) Floor boards in good repair? Yes No
c. Is non-skid wax used on all floors? Yes No
d. Do all doors open outward? Yes No
e. Are all combustible and inflammable materials stored in fireproof containers? (grease rags, oily mops, paper) Yes No
f. Is the heating unit checked regularly for unvented gases and fire hazards? Yes No
g. Is the electrical circuit checked 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 playground, 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 have training in driver education? Yes No
o. Have bicycle safety program? Yes No
p. Fire escapes meet state 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
      (1) Record of sickness that causes absenteeism? 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
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?

8. Is there a program for health of school employees?
   a. Do employees earn sick leave?
   b. Is provision made for employee health insurance?

9. Are preschool children examined and remediable defects corrected before entering school, including dental defects?

10. First Aid
   a. Is there a health suite?
      (1) Does it contain a special room for the care of the sick?
      (2) Does this suite meet standards of Building Code?
   b. Is there a first aid cabinet?
      (1) Is this cabinet easily accessible in time of accident?
      (2) Do you check contents weekly and refill if needed?
      (3) Is someone trained in first aid designated to be called for all serious accidents?
   c. Are all teachers trained in first aid?
      (1) If not, what percent?

11. Plans for sick children
   a. Do you isolate sick children?
   b. Do you have plans for transporting them to:
      (1) home?
      (2) hospital?
      (3) doctor?

12. Civil Defense
   a. Does your school have an active civil defense program?
   b. Is the school program of civil defense in accord with the state program of civil defense?
   c. Does every child wear an identification tag?
   d. Has every child received instruction as to where to go when disaster hits?
   e. Has every child received instruction as to what to do and what precautions should be observed when disaster strikes?

C. Physical Education and Recreation

1. Is the State Law regarding physical education complied with?

2. In Elementary School
   (a) By providing a program of physical education and recreation for all children?
   (b) Teaching done by classroom teachers?
   (c) Have they had training in physical education.
   (d) Does the physical education teacher in high school help the elementary teachers?
   (e) Is physical education coordinated with the total school health program?
   (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.

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 Poor 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.

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? Yes No.

1. Women teachers for girls? Yes No.

e. 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.
10  
(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.  
(a) Are these programs in line with recommendations in New School Health Guide?  
(b) Is a physician present at each interscholastic contest? Yes No.  
(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?  
(b) Is a physician present at each interscholastic contest? Yes No.  
(10) Is the intramural and interscholastic athletic program for girls in line with that recommended in the New State School Health Guide? Yes No.  
(11) Rhythmic fundamentals? None Poor Fair Good Excellent.  
(12) Co-educational and co-reational 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, playground 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.  
Once each day? (desirable)  
Three times per week? Yes No.
Once per week?  

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 Math.  
      Yes ____ No ____

   b. High School?  
      (1) Check subjects: Biology General Science  
          Chemistry Physics Physical Education  
          Homemaking Agriculture English Math.  
          Social Studies Military Music Art  
          Commercial  
      Yes ____ No ____

2. Is instruction given in the facts concerning the effects of alcohol on:

   a. The Body?  
      Yes ____ No ____

   b. Behavior of the individual?  
      Yes ____ No ____

   c. Economic conditions?  
      Yes ____ No ____

   d. Family relations?  
      Yes ____ No ____

   e. Civic responsibilities?  
      Yes ____ No ____

   f. Are teachers trained in alcohol education?  
      Yes ____ No ____

3. Is driver education offered in high school?  
   a. Approved by State Department of Education?  
      Yes ____ No ____

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?  
      Yes ____ No ____

   b. Are fire drills held as part of safety instruction?  
      Yes ____ No ____

   c. Are buildings and grounds checked regularly for  
      safety hazards as part of instruction program?  
      Yes ____ No ____

5. Is a definite period set aside for health instruction in:

   a. Elementary School (7th - 8th grades)?  
      Yes ____ No ____

   b. In High School?  
      Yes ____ No ____

      (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?  
              Yes ____ No ____

          (b) At least one semester daily (more is  
              desirable) in the twelfth grade?  
              Yes ____ No ____

          (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? Yes No

(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) Films Charts Posters Exhibits Reference Books Pamphlets Magazines Models Materials available from local health department

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 market bakery water works 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 testing vision using the cumulative health records school lunchroom program morning inspections teaching high school pupils how to drive a car safety on school bus safety at school safety in community safety in homes fire drills use of fire extinguishers laboratory experiments making a study of what children are eating nutritional experiments with white rats having pupils assume responsibility for regulating heating and ventilation to maintain temperature 68 to 70 degrees having pupils adjust curtains and lights for best lighting effects play activities of children having children help keep grounds and buildings clean and attractive planting of vegetable gardens at home at school?

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

(1) After visits to 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
                                                                                     Yes No
                                                                                     Yes No
                                                                                     Yes No
                                                                                     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
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? 

If you need help with the program for exceptional children write: SUPERVISOR of Education of Exceptional Children State Department of Education, Atlanta 3, Ga.

If you need help in interpreting this APPRAISAL FORM and/or in improving your school health program write:
DIRECTOR of School Health Division, State Department of Public Health, Atlanta 3, Ga.

or
A Questionnaire-Checklist

This Questionnaire-Checklist on Healthful School Living used in conjunction with the "An Appraisal of the School Health Program" is in three parts:

Part I - The Lunchroom Program

Part II - Observational Procedures, that is Teacher Traits

Part III - Pupil-Teacher Relationship, Administrative Procedure, and "Psychologic Climate."

Part I

Aspects of the Lunchroom Program

Directions: Check the findings for each school.

1. Only persons holding health certificates handle the lunch room food - - - - - - - - - - - - ( )
2. Students or teachers without health certificates help - - ( )
3. Menus made by a trained person in nutrition - - - - - ( )
4. Menus made by a person who has no training in nutrition- ( )
5. Sell candy - - - - - - - - - - - - - - ( )
6. Sell soft drinks - - - - - - - - - - - - ( )
Part II

Check List for Direct Observational Procedures. A Study of Healthful School Living in Negro Elementary Schools of Houston County, Georgia.

Name of School: ____________________________________________________________

Number of Elementary Teachers ____________________________________________

Directions: Check the findings that seem applicable to each teacher observed.

1. Teacher as a neat, clean appearance - - - - - - - - ( )
2. Alert, cheerful, and enthusiastic - - - - - - - - ( )
3. Pleasing facial expression - - - - - - - - - - ( )
4. Well modulated voice - - - - - - - - - - ( )
5. Skell voice (Or Loud) - - - - - - - - - - ( )
6. Uses gestures and facial expressions to call attention to pupils' shortcomings - - - - - - - - - ( )
7. Helpful, calm, unruffled, patient and soothing - - - - ( )
8. Sarcastic, nervous, critical and curt - - - - - - - - ( )
9. Helps in a kind but business like way - - - - - - - - ( )
10. Gets order by promising punishment - - - - - - - - ( )
11. Ignores children's complaints - - - - - - - - ( )
12. Decidedly clear in directions - - - - - - - - - - ( )
13. Enjoys fun with class (sense of humor) - - - - - - - - ( )
14. Comments on efforts - - - - - - - - - - - - ( )
15. Calls attention to mistakes kindly - - - - - - - - - - ( )
16. Resentful of interruptions - - - - - - - - - - ( )
17. Gratefully receives criticisms - - - - - - - - - - ( )
18. Resents criticisms - - - - - - - - - - - - ( )
19. Activities are teacher directed - - - - - - - - - - ( )
20. Children seem unrestrained - - - - - - - - - - ( )
21. All pupils in the same grade doing the same thing - - ( )
22. Activities are varied according to groups and individuals needs and interests - - - - - - - - - - ( )
Part III

To be filled in by teachers in Negro Elementary Schools of Houston County, Georgia.

I. Pupil-Teacher Relationship
   A. Teacher Training
      1. Health Education
         a. Health Education in Elementary School ————
         b. Community Hygiene ————
         c. Child Development ————
         d. Mental Hygiene ————
         e. Child Behavior ————
         f. Others (List Titles)

      ________________________________
      ________________________________

   B. Discipline
      1. Teachers Philosophy of Discipline
         a. The child is viewed as an organism responding to the world according to his powers and capacities, hence the child is an individual to be developed- ———— ( )
         b. The teacher must put forth effort to correct what are regarded as inborn traits or inherent urges to misconduct, hence the child is an individual to be corrected ———— ( )

      2. Formulating Standards
         a. The child helps to formulate standards ———— ( )
         b. The teacher formulates standards for the child ——— ( )

      3. Judging Standards
         a. The child is the judge of standards ———— ( )
         b. The child is the judge, with others of the usefulness and merit of standards ———— ( )

      4. Disciplinary Controls
         a. The child is guided by social approval or disapproval ———— ( )
         b. The child is guided by an idea ———— ( )
         c. The child is guided by fear ———— ( )
         d. The child is guided by development of a willingness to accept responsibility for an act ———— ( )
Part III (continued)

5. Punishment

a. Corporal Punishment

b. Make the child stand for a long time

c. Avoid using recreational or recess period

d. Deprive the child of recreational or recess periods

e. Use none of these

C. Individual Differences

1. Is the same lesson plan used for all pupils who are in the same grade? Yes No

2. Are pupils given a chance to excel in some one thing at same time? Yes No

3. Are promotions granted on Knowledge of subject matter? Yes No

4. Are report cards and grades emphasized? Yes No

5. Are special provisions made for handicapped children? Yes No

D. Fatigue

1. Type of Schedule

a. Follow a subject matter schedule (Definite hour for each subject) Yes No

b. Follow a flexible daily schedule (Based on life related situations of the child) Yes No

c. Emphasizes basic drills Yes No

d. Allow time for projects and units in all subjects Yes No