

THE PROFILE OF THE HEALTHCARE TEACHERS, THEIR PROBLEMS AND THEIR OPINIONS ON HEALTHCARE COURSES IN SECONDARY EDUCATION

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ABSTRACT: This research is a descriptive study and aimed to determine the profile of secondary healthcare teachers; their problems; and their opinions on healthcare courses. For this purpose, firstly, the content of healthcare courses was analyzed, lastly, a questionnaire was developed to gather teachers opinions about the courses.

Sampling of the research includes 10 teachers who were chosen randomly from five secondary education schools in Ankara.

The questionnaire consisted of 2 parts; Personal information (such as age, educational background, marital status etc.) and teachers opinions about the courses.

KEY WORDS: *Healthcare Courses, Secondary Education, Science Education, Biology Education.*

ÖZET: Bu çalışma ortaokul sağlık bilgisi öğretmenlerinin profilini belirlemeyi, karşılaştıkları güçlükleri saptamayı ve sağlık bilgisi dersi ile ilgili görüşlerini almayı amaçlamaktadır.

ANAHTAR SÖZCÜKLER: *Sağlık Bilgisi Dersi, Orta Öğretim, Fen Bilimleri Eğitimi, Biyoloji Eğitimi*

INTRODUCTION

It has been known that education is a fundamental factor in scientific and technological developments for the solution of the basic problems, such as the insufficiency of the present food and energy sources and air pollution in parallel to the increase of the world population. Especially in the solution of the problems occurring in the environmental and human health area, it has been observed that education is of utmost importance for conscious, planned and permanent approach. It is necessary to study the educational system together with the target groups in education and make them work for the healthy

environment and generation. It has been given utmost importance to human and environmental health in Article 56 in our constitution(1). By this article, both the state and the people are responsible for protecting the environmental and human health. Our duty in this phenomenon is that we should improve the educational system and its target groups such as the teachers and the students to create a healthy environment and cause the necessary behavioral changes. In other words, as a result of the fact that the individuals are trained at a sufficient level in the subject of environmental and human healths, the aimed contemporary changes in individual behaviors can be achieved and healthy generations grown up.

To serve this purpose, health-care courses were placed in secondary education as a result of a well planned programme in 1984-1985 academic year by the Ministry of National Education (MNE). But, due to same difficulty in practice, it was determined that the course objectives could not be achieved at the desired level (2, 3).

METHOD

The research was conducted in 5 secondary education schools that were chosen through sampling on 100 students and 10 teachers. The questionnaire was two phased consisting of personel and ideas about the course.

EVALUATION OF THE DATA AND THE RESULTS

The statistical study of the teachers who have answered the questionnaire has shown that the course was conducted by one teacher in Atatürk,

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Ankara and Cumhuriyet High Schools, while two in Kanuni, and Etlik High Schools. 57% of the teachers are women and 43% of the are men. When we look at the personal information about the teachers (Table 1), it is observed that they have as many children as they can look after. Therefore, nearly half of the teachers have a supervisor to whom they can ask in case of any kind of problem that arises during the lesson. Cigarette and alcohol addiction, on the other hand, is a serious problem. 71% of the teachers who are giving this course are addicted to cigarette, which contradicts the aim of the health care course. Moreover, as the students could realize the side effects of the addiction, it reduces the motivation and the interest of the students. In other words, teachers are always highly respected by students. When the frequency of having a regular check-up was studied, it was seen that going to a doctor when necessary was more frequent than having a regular check-up. This can be an example for the poor health-care program of Türkiye. Also, the research showed that the health-care system involved long, tiring and boring procedures as well as high costs, indicating that there was a real problem in the health care system. These results were also confirmed by the answers given to the question about the local healthcare institution nearby their residence. The research which was done individually, points out the inadequacy of those local institutions both in personnel and equipment in this field. Another

important result of Table 1 indicates that those teachers who are responsible from the healthcare course stated that they themselves have not had such kind of tutoring, (71%) and even if they have had, it has lost all its validity in time. This fact is contrary to the idea of the healthcare course which stated that they themselves have not had such kind of tutoring, health-care courses and works as a reason for not having a good course program (29%); a chance of selection given to the students plays an important role for not being chosen.

Table 2 shows that in order to find out the ideas of the teachers about the health-care courses, it is generally stated that the course must be supported by empirical study, overhead and tables must be used in the class hours, contributions of experts are sometimes needed and the supportive materials about the course are easy to find.

Opinions of the teacher, about the health-care instructors are displayed in Table 3 Generally it was stated that the teachers could prepare the students for lab-work beforehand; however, as there were not enough labs, even the lack of opportunity of using existing labs hinders the sufficient instruction of the course. Additionally, the interest of the students changes according to the subjects, the interest in the lesson is too low, and nobody elects the course if the chance of choosing the course is given.

Table 1 : Teachers personal information

Parameters	Distribution %		
	1	2	3
Number of children they have	14	43	43
Addiction such as cigarette and alcohol (cigarette especially)	Only one 71	Only two 0.0	None 29
Regular check up of teachers	Once a six-month 0.0	Once a year 43	When necessary 57
Any health institution	Yes 43	No 14	Unknown 43
Teachers with health education experience during their education	Yes 29	No 71	-
Number of family members in charge of health	Yes 43	No 57	-

Table 2 : The distribution of teachers opinions on healthcare courses

Parameters	Distribution %	
	Course presentation	Traditional approach 0.0
Difficulty in consulting the literature	Easy 86	Difficult 14
Kinds of sources	Papers, journal etc 71	Only book 29
Supplementary Materials	Table, slight 71	Book, journal 29
Help by experts	Sometimes 86	Not necessary 14

Table 3 : The distribution of teachers opinions on experimental and theoretical studies

Parameters	Distribution %		
	Preparation of students for the experiment	Always 14	Sometimes 86
Difficulties in preparing for the experiment	Long period 0.0	Lack of opportunities 86	No lab 14
Frequency of using the lab	Each course 29	Sometimes 71	None 0.0
Students interest in the course	Those who are willing 29	Those who are willing according to the topic 71	Not willing 0.0
The situation of using biology lab	Always 29	Rarely 57	Permission by the school administration 14
Electing the course	Those who registered 44	Those who did not register 41	Not in the programme 15
Ability to learn and the content of the book	Those who find it perfect 29	Those who find it insufficient 71	
Lab conditions	Special lab for the course 0.0	Biology lab 100	

CONCLUSION AND DISCUSSION

When the study is taken into consideration as a whole, according to the importance it is observed that

1. The healthcare courses have been taught by science and biology teachers. And generally these teachers do not have any kind of pre or inservice teacher training on healthcare courses. This result effects the quality of the courses negatively.

2. Because of the lack of pre or inservice training, teachers sometimes do not have even basic concepts of the courses.

3. The content of the coursebook is not sufficient enough and usually most of the topics are the same as the biology or science courses. It has been effected the students motivation negatively because of the duplication of the subjects (in this resarch the students motivation on healthcare courses was also investigated as a first phase of the study and it has been published 3).

4. There is no cooperation between the teachers about the content of the biology and healthcare courses.

5. The experimental side of the courses are neglected. Usually, teachers cannot prepare lab work because of lack of labs or equipments.

SUGGESTIONS

Under the light of the information obtained from the research, the following suggestions are made.

1. For the teachers of healthcare, instructions must be chosen among biology teachers, if not possible from science teachers.

2. Teachers must participate to inservice training; taking the rapid changes in technology into consideration, this course must be repeated in certain times. For this, science and medicine departments of nearby universities must be coordinated.

3. Necessary laboratory conditions must be provided.

4. The books of the course must be revised. Instead of using a course-book by one author, a committee of experts must write the book, and should name the necessary resources. Also the curriculum of the course must be revised by the same commission, necessary alterations must be done if necessary.

5. Necessary documents, video films and booklets, must be provided by a net among MONE-T.R.T. and several universities as well as health organizations.

6. Health-care sessions must be a sandwich course. As well as having the oratical background, students should have an opportunity to practice or to see the applications. In order to provide this, there must be a coordination established among MONE-universities and healthcare organizations.

7. In the research it is also pointed out that in rural areas it would be profitable to have doctors in the area that would contribute to these courses. It is also stated that doctors are willing for such kind of application.

As a conclusion, for a qualitative instruction of healthcare instruction, the above suggestions must be applied functionally. The above suggestions include not only the healthcare courses, but also the other courses. Solely, revising the curriculum will absolutely increase the quality of the instruction in line with the quality of the education.

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