

**AMERICAN ACADEMY OF PEDIATRICS**  
**COMMITTEE ON SCHOOL HEALTH**  
**HEALTH EDUCATION\***

The American Academy of Pediatrics has long supported preventive health measures as part of comprehensive health care to all children and youth. Health education of children is an essential ingredient in the prevention of disease and the promotion of good health and optimal development.

Good health is a dynamic state of physical, mental, and social well-being which is influenced by many environmental and hereditary factors over which an individual exercises varying degrees of control. It is a constantly changing entity, and acquisition of good health should never be left to chance.

Many Americans do not understand, accept, or utilize current biologic, psychological, and social knowledge. They obviously are not profiting from medical and technological achievements. The dissemination of general health information and its utilization for healthful living both need to be improved.

Parents and parental attitudes are the most important and basic elements of any successful health education program. Health education begins during infancy in the home, and the school is a supplementary and complementary element to the home experiences. Further development, correction, and reinforcement of knowledge, attitudes, and habits of health begun in early life should be among the essential objectives of formal education.

The pediatrician is experienced in caring for the total child and is well aware of personal and social tragedies that might have been avoided by adequate health education, therefore, he is especially sensitive to the need for optimal health education programs in the schools. Health education is a core element in comprehensive health care delivery. Understanding of this

fact by schools and parents is essential if all children are to enjoy the good health and successful living potentially available to them.

The Committee endorses the following statements about health education and urges subsequent action at state and local levels:

1. Health education should be a part of every elementary and secondary teacher's training program.

2. Professional preparation programs in health education must be developed in the schools of education, which should set high standards with requirements as exacting as those in any other area of instruction.

3. The total health education program in the elementary and secondary schools should be directed by trained health educators functioning in consultation and cooperation with the school's medical personnel and the community's physicians and health agencies. The director of health education should also be certified as a teacher in health education and educated by studies in biological, social and behavioral sciences.

4. A unified, comprehensive, and highly developed program of health instruction for the teaching of healthful living should be given from kindergarten through grade 12. State governments should legislate this health instruction. The health curriculum should be planned to assure appropriateness of instruction for age and maturity of pupils at various grade levels.

5. The emphasis of the entire program should be on the utilization of facts, principles, and concepts pertaining to healthful living and the making of wise decisions for solving personal, family, and community health problems.

6. Health education programs are of such importance and pertain to such large numbers of activities in a society that their financial support must be assured. Proper

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\* This statement has been reviewed and approved by the Council on Child Health.

funding is critical in developing effective programs, particularly when communities are overburdened in their attempts to support other aspects of education.

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(See page 464 for a letter concerning this report.—The Editor)

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