RECOMMENDATION No. 63

TO THE MINISTRIES OF EDUCATION

concerning

HEALTH EDUCATION IN PRIMARY SCHOOLS

(1967)

The International Conference on Public Education,

Convened in Geneva by the United Nations Educational, Scientific and Cultural Organization and by the International Bureau of Education, meeting on the sixth of July, nineteen hundred and sixty-seven for its thirtieth session, adopts on the fourteenth of July, nineteen hundred and sixty-seven, the following recommendation:

The Conference,

Considering that the proposals and suggestions contained in Recommendation No. 20 adopted on the 8th July, 1946, by the 9th International Conference on Public Education organized by the International Bureau of Education, concerning the teaching of hygiene in primary and secondary schools, have still a topical character and interest,

Considering, however, that, as teaching methods have developed, on the one hand, and as progress has been made in preserving health, on the other, health education can and should take the place of the mere teaching of hygiene,

Considering that health education means the whole process which helps to inculcate good habits, sound knowledge and an enlightened attitude concerning the health of the individual and the community,

Considering that the scope of health education covers a person's physical, intellectual and emotional development, and that such education covers the health of individual, family and community,
with reference to home, school and place of work; the problem of nutrition, mental health, sex education, accident prevention, first aid, use of leisure, etc.,

Considering that health education given at school is an important aspect of the general education of a child and one of the essential ways of improving individual and public health,

Considering that such education must occupy a prominent place throughout the child's schooling and particularly during primary education,

Submits the following recommendation to the Ministries of Education of the various countries:

1) Health education suited to the age, needs and interests of pupils, first of a practical nature and subsequently of a practical and theoretical nature, should be given by the teachers in conjunction with the appropriate health departments - the form, content and methods of this education should be determined through consultation among the various authorities concerned.

2) This education should not only inculcate good habits in the pupils, likely to promote their physical and mental well-being, but also awaken in them a sense of their individual and social responsibilities, by teaching them to respect the health and well-being of other people, as well as their own.

3) Such education should find its natural roots in the life and working conditions within the school. These should include the wise planning of the school day, with a balanced proportion of work, play and rest, together with adequate accommodation and facilities and suitable sanitary installations.

4) The methods used in health education should involve not only the child's memory and his reasoning powers but also (and especially) his imagination, account should also be taken of his leisure activities and above all of his healthy living.

5) Health education should be related to local circumstances (urban or rural surroundings), to the climatic conditions of each country and to its economic and social development, in the light of these circumstances the teaching should emphasize the basic demands of various regions in regard to health and hygiene, teaching should also include some preparation for the probable conditions in which the child will be living and working.
6) The teachers should be prepared to give health education during their training courses by means of specialized instruction, which takes into account the aims, as well as the methods, of imparting such education.

7) Possibilities for further training should be offered to teachers in service to enable them to keep up to date with the latest developments, in the methods and means used in health education, as well as with the progress of preventive medicine.

8) Primary teachers should be provided with the materials necessary for their pupils' education (textbooks, apparatus and audio-visual aids) as well as books and periodicals and other documents from which to draw their own information, such materials based on the country's geographical, climatic, ethnic and cultural requirements, should be produced in collaboration by those responsible for the school syllabuses and the medical and health authorities.

9) At the same time, steps should be taken to inform and educate parents by means of co-operation between primary school teachers and the medical and health authorities (e.g. through regional and local information centres).

10) Specialists in health education (such as doctors and nurses) who are assigned to work which is linked with health education (e.g. medical inspection) should be prepared for these educational functions in the course of their professional study through appropriate health and educational training.

11) Any initiative should be encouraged, whether public or private, which, in school or out of school, is taken by young people or adults and is likely to promote health education or training in first aid; this may include groups of scouts or pioneers, Red Cross or Red Crescent Societies, members of youth first aid clubs, etc. and their various activities of manifestations (lectures, competitions, periodicals, exhibitions).

12) Assistance should be given to any research of a medico-pedagogical nature which, in the matter of health education, is intended to ascertain the needs, to assess the results of the measures taken and the experiments carried out and to improve the methods and media used.

13) In the context of each country's particular planning health education should have a place among its fundamental objectives as an essential factor in social, economic and cultural development.
14) A permanent scheme of co-operation (as, for example, bilateral or multilateral conventions) should be established among the various countries to facilitate the exchange of specialists and of research information.

15) Use should be made, where necessary, of technical assistance provided by specialized international organizations, which may help the various countries to create a basis for health education draw up syllabuses, design and produce teaching material and train staff, by means of advisory services, scholarships and material for demonstration purposes.

**Implementation of the Present Recommendation**

16) It is important that the text of this recommendation be given wide publicity by Ministries of Education, education authorities teacher training establishments, educational documentation centres, teachers' federations, both national and international, teachers' and parents' associations, etc. The press should be invited to play an important role in making the recommendation known among the services concerned, the administrative and teaching staffs and the general public.

17) Ministries of Education or other appropriate departments are invited to request competent bodies:

   a) to examine the present recommendation and to compare it with the de jure and de facto situation in their respective countries;

   b) to consider the advantages and disadvantages of implementing each of the clauses not yet in effect;

   c) to adapt each clause to the situation in the country concerned, should its implementation be considered desirable;

   d) finally, to suggest the practical steps which should be taken to ensure the implementation of its various clauses.

18) Unesco, the World Health Organization and other specialized international organizations are invited to facilitate, with the cooperation of the Ministries concerned, the study of this recommendation at the regional level with a view to its adaptation to the special characteristics of each region.