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A STUDY OF THE HEALTH AND PHYSICAL EDUCATION PROGRAM
AT BINFORD JUNIOR HIGH SCHOOL

A Thesis
Presented to
the Graduate Faculty of
The University of Richmond

In Partial Fulfillment
of the Requirements for the Degree
Master of Science in Education

by
Linwood Hugh Metzger
August 1959

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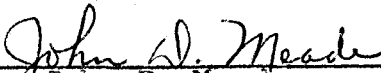
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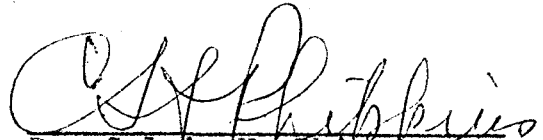
Candidate for the degree Master of Science in Education,
and hereby certify their approval of its acceptance.



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Date:

Aug. 6, 1959

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The Faculty of Binford Junior High School

Mrs. Margaret A. Metzger, Wife of the Writer

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CHAPTER I

INTRODUCTION

Since World War II there has been an intensified need for a physically fit nation. Health workers, recreational leaders, psychologists, and sociologists have all stressed the need for virility and endurance in our nation. Educational literature is replete with recommended procedures for developing health, worthy habits of leisure, and social ideals through physical activities. Statements of educational objectives of early and recent data have placed abundant health, worthy use of leisure, and ethical qualities of character high on their lists. An analysis of educational practices, however, reveals the vast distance between philosophy or principle and practice.¹ The schools of our country must assume the responsibility for the development of a sound health and physical education program to help meet this need.

I. THE PROBLEM

Statement of the problem. It is the purpose of this study (1) to determine the status of the health and physical education program at Binford Junior High School, (2) to find

¹ Ben Miller, Karl W. Bookwalter and George E. Schalker, Physical Fitness for Boys (New York: A. S. Barnes and Company, Inc., 1946), p. 1.

out from students the extent to which they feel that the health and physical education program is helping them develop good individual health habits, attitudes and physical skills and (3) to find out from parents the extent to which they feel that the health and physical education program meets the needs of the students.

Importance of the study. Absenteeism resulting from poor personal health habits and attitudes is one of the problems faced in Binford Junior High School. The extent of this absenteeism has pointed up one of the needs of this study. For example, on the day that the questionnaires were given to the students, seventy-two out of 551 students enrolled at Binford Junior High School were absent. In interviews with homeroom teachers and the Visiting Teacher it was revealed that the largest per cent of absenteeism usually occurred on Mondays.² The questionnaires were distributed on a Monday. These teachers felt that the main cause for this absenteeism was poor home environment. The majority of these absentees were from broken homes and received little or no supervision.

The results of physical fitness tests also pointed to the need for this study. They revealed a lack of proficiency in many physical skills, especially in the

² Interviews with Miss Helen Hill, Visiting Teacher, and several Homeroom Teachers, November, 1958.

development of arm and shoulder girdle muscles. Last year the Kraus Weber Test was given, and this year students took a test compiled by the Richmond Dairy Council and the Junior Chamber of Commerce. Both tests showed that similar problems still persist.

Good health and physical fitness is the responsibility of both the home and community; however, it is the school that must develop a sound health and physical education program.

The results of questionnaires from both parents and students were used to determine the status of the program.

II. DEFINITIONS OF TERMS USED

Junior High School. Some people think of it as a building which houses grades seven, eight and nine. Other people think of it as only grades seven and eight. Some people characterize the school for certain features such as departmentalization, homogenous grouping and promotion by subjects. In this study the writer uses the concept of Dr. W. T. Gruhn and Dr. H. R. Douglass.

The junior high school is an education program which is designed particularly to meet the needs, the interests and the abilities of boys and girls during early adolescence.³

³ William T. Gruhn and Harl R. Douglass, The Modern Junior High School (New York: The Ronald Press Company, 1956), p. 4.

Physical Education. This term is concerned with the development of health through the cultivation of leisure skills and the social orientation of people so necessary in preserving the techniques of living in a democratic way.⁴

At the junior high level the activities have been selected to give consideration to the interests, age levels and needs of the individual students. Physical education activities should aid in developing physical fitness through the use of large muscles which require strength, speed and agility. Leadership, emotional control and self-confidence should also be developed through a good program.

Health Education. Health education is the acquisition of knowledge about living healthfully and an immediate participation in healthful practices.⁵

A good health education program should help students develop and practice proper health habits and attitudes. They should become aware of the changes that take place during adolescence. Guidance should be provided for students in solving everyday problems in mental and physical health.

The 2-2-1 Program. This represents two days a week

⁴ Delbert Oberteuffer, School Health Education (New York: Harper and Brothers, 1949), p. 355.

⁵ ibid.

of physical education, two days of health education and one day of co-recreational activities.

III. SOURCES OF DATA AND METHODS OF PROCEDURE

This study includes interviews with the former Principal and the present Principal of Binford Junior High School, the Visiting Teacher of the school and the Supervisor of Health and Physical Education for the Richmond Public Schools. It also includes a survey of students and parents of the school.

The questionnaires were organized so as to permit the respondent to answer various questions simply by placing a check mark in the appropriate places. Additional space was provided for comments where necessary.

The questionnaire for students was answered by 278 boys and 241 girls -- 479 total. The students were not required to sign their names, but they were permitted to do so if they wished.

The questionnaire for parents was answered by 465 parents. Only ten of the questionnaires sent out were not returned. This represents a 97.9 per cent return of the questionnaires. The parents were not required to sign their names, but they were permitted to do so if they wished.

The results of the questionnaires were tabulated and are summarized in Chapter IV.

In chapters to follow, a brief history of the program at Binford Junior High School, the present program in action and an evaluation of the questionnaires will be discussed. Conclusions and recommendations for further development of the program will then be presented.

To develop a sound health and physical education program the developmental characteristics of junior high school adolescents should be considered. In their physical development there is a rapid gain in weight at the beginning of adolescence accompanied by an enormous appetite. Muscular growth is rapid and coordination is generally poor. Girls usually develop physically and emotionally two years ahead of boys. Growth at this period is uneven as different parts of the body grow at different rates. Awkwardness, restlessness and laziness are common as the result of rapid and uneven growth.

Some of the special needs of children of this age are a warm affection and a sense of humor on the part of adults without nagging or talking down to them. Adolescents want the assurance of security as they seek both dependence and independence. They need adult guidance which is kind and does not threaten their feeling of freedom.

With these developmental characteristics and special needs in mind, it is hoped from this study that a more enriched program can be developed at Binford Junior High School.

CHAPTER II

HISTORY OF THE PROGRAM AT BINFORD JUNIOR HIGH SCHOOL

In the early years of the schools in the City of Richmond the health and physical education program was left entirely up to the individual classroom teacher. There was no commonly accepted unit or method of teaching. Games were played whenever time could be found. The teaching of health practices was brought up in classes but had no definite place in the curriculum.

As time passed, physical education classes were developed with stress placed mostly on team games such as football, baseball and basketball. Health still had no prominent place in the curriculum. This seemed to be the pattern of health and physical education throughout the Richmond City Schools.

Health education at Binford Junior High School had its beginning when it was taught as a unit in the science program followed by the homemaking classes. As only girls were enrolled in the homemaking classes, health education was not brought to the majority of students. Here students were taught the importance of food and nutrition.

For a short period of time one teacher taught health classes. However, it was impossible for all the students' schedules to be arranged so that they could take advantage

of the course, and the class was discontinued.

This was the extent of the health and physical education program at Binford Junior High School until 1950. At this time the 2-2-1 program was started at the suggestion of the State Board of Education. It consisted of two days a week of physical education, two days of health education and one day of co-educational activities. At this time all students are required to take health and physical education except those students excused from participation on the advice of a physician.

This is the way the program is offered at present. In the next chapter a detailed picture of the present program in action will be discussed.

The philosophy of a school and its implementations are always important and should be given careful consideration in developing any program.

Binford Junior High School serves a student population of about 550 students. It draws from homes in which the cultural and socio-economic levels vary. In the school community there are different interests, understandings and customs.

The physical welfare of the pupils is cared for through the lessons in health, the exercise, the games and sports of the physical education classes. In these classes pupils learn the proper care of the body and its growing up

processes. Tests of muscular fitness are given periodically, and pupils become more safety-conscious through the study of First Aid.

Physical examinations are given by the Medical Department. In addition, the nurse works with teachers to help pupils realize the value of health. They meet to discuss the students' problems and to decide on the best solutions. Her day is extended after school hours so that she may visit the pupils' parents to gain this information and to advise them on health problems.

Further, the school promotes good health by serving well-balanced lunches in the cafeteria, and the importance of wholesome food is re-emphasized in the homemaking classes.

The primary concern of the school is the continuous well-balanced growth and development of all its pupils. Individuals of the same age differ physically, mentally and emotionally -- differences which may be due to inherited characteristics or to differences in home, community and cultural level. These differences should constantly be taken into account, and a broad program of education should be available in order to meet them adequately.¹

¹ The Philosophy of Binford Junior High School and Its Implementations, a Pamphlet by the Faculty and Parents, 1959, p. 8.

The school should help every pupil to the limit of his mental capacity and emotional stability to achieve in the basic academic subjects. Whatever his goal, social status and intellectual ability, each pupil needs at his command certain mental, physical and manual skills which are essential to confident participation in life.

The function of any American school is to foster growth along the lines generally approved by our society today. To this end, it is the faculty's duty to encourage pupils to discover their own interests, capabilities and talents. They should become increasingly self-directive through this guidance. The teachers may lead pupils by working with them as individuals, in line with each child's mental capabilities and cultural environment. As a result, most pupils, during the years in junior high school, realize their need for self-discipline and learn to live and abide by rules.

CHAPTER III

PRESENT HEALTH AND PHYSICAL EDUCATION PROGRAM

IN ACTION (2-2-1)

The present program of the Binford Junior High School includes a wide variety of activities consonant with the recognized objectives of such a program. The following phases will indicate the extent of the opportunities provided to develop health knowledge and understandings, to develop abilities and skills and to produce attitudes and appreciations essential to the development of a sound mind and a sound body.

I PHYSICAL EDUCATION PROGRAM

A. Orientation

1. Class organization
2. Locker room procedure
3. Care of equipment
4. Physical check-ups
5. Sportsmanship

B. Objectives of Physical Education

1. The Physical Education Program for junior high students includes wholesome physical and recreational activities which should contribute to the well-being and development of all students by:
 - a. Giving them opportunities to participate in activities which will aid in the development of physical fitness through the medium

of big muscle activity requiring strength, speed, agility and endurance.

- b. Helping them to adjust to different situations and to learn to cooperate, as a good citizen, in whatever situation they may find themselves.
- c. Teaching good sportsmanship and a love for play that will carry over into adult life.
- d. Developing their ability to make wise use of leisure time.
- e. Giving them opportunities to develop skills in a number of recreational activities.

PHYSICAL EDUCATION -- FALL

7th Grade	8th Grade	9th Grade
<p>Conditioning Exercises</p> <p>Touch Football</p> <p>Rules Fundamental Skills</p> <p>Kicking Passing Catching</p> <p>Volleyball</p> <p>Rules Fundamental Skills</p> <p>Serving Set-ups Rotating</p> <p>Lead-up Games</p> <p>Newcomb Mass Volley</p> <p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Relay Back to Back</p> <p>Volleyball</p> <p>Dancing</p>	<p>Conditioning Exercises</p> <p>Touch Football</p> <p>Rules Defense (Types) Offense (Types) Games</p> <p>Volleyball</p> <p>Rules Scoring Serving Set-ups Rotating Games</p> <p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Back to Back Over and Under Run Forward Dribble and Shoot</p> <p>Dancing</p>	<p>Conditioning Exercises</p> <p>Touch Football</p> <p>Defense Blocking Officiating Offense Games</p> <p>Volleyball</p> <p>Spiking Set-up Net Recovery Games</p> <p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Back to Back Dribble and Shoot Run Forward Run Backward Over and Under</p> <p>Dancing</p>

PHYSICAL EDUCATION -- WINTER

7th Grade	8th Grade	9th Grade
<p>Conditioning Exercises</p> <p>Basketball</p> <p>Rules Fundamental Skills</p> <p>Passing Types of Defense Lay-up</p> <p>Lead-up Games</p> <p>Dribbling Relays Horse Twenty-one</p> <p>Tumbling</p> <p>Forward Roll Backward Roll Head Stand Tip Up Indian Wrestle</p> <p>Parallel Bars (Beginning)</p> <p>Approach Bar and Jump to hold Position Front Vault Rear Vault Walking the Bar Forward and Backward Skinning the Cat</p>	<p>Conditioning Exercises</p> <p>Basketball</p> <p>Rules Shooting</p> <p>One Hand Set Two Hand Set Foul Shot Hook Shot</p> <p>Stress Defense Stress Offense Games</p> <p>Tumbling</p> <p>Diving Cartwheel Head Balance Elbow Balance Pyramids</p> <p>Parallel Bars</p> <p>Front Vault Rear Vault Traveling (Leg) Head Stand Shoulder Stand Tip Up</p>	<p>Conditioning Exercises</p> <p>Basketball</p> <p>Screening Man to Man Defense (stress) Offensive Drills Defensive Drills Rules Games</p> <p>Tumbling</p> <p>Log Roll Elephant Walk Cartwheel Diving (3 men) Pyramids</p> <p>Parallel Bars</p> <p>Front Vault Rear Vault Traveling (Leg) Head Stand Shoulder Stand Tip Up Forward Roll Backward Roll</p>

PHYSICAL EDUCATION -- WINTER (Con't.)

7th Grade	8th Grade	9th Grade
<p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Relay Dribble and Shoot Over and Under</p> <p>Dancing</p>	<p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Relay Dribble and Shoot Over and Under Back to Back</p> <p>Dancing</p>	<p>Co-educational Activities</p> <p>Relays</p> <p>Dribble Back to Back Dribble and Shoot Run Forward Run Backward Over and Under</p> <p>Dancing</p>

PHYSICAL EDUCATION -- SPRING (Con't.)

7th Grade	8th Grade	9th Grade
Co-educational Activities Softball Dancing	Co-educational Activities Softball Dancing	Co-educational Activities Softball Dancing

II HEALTH EDUCATION PROGRAM

A. Objectives of Health Education

1. The Health Education Program for junior high students should contribute to the well-being and development of all students by:
 - a. Providing for the development of proper habits and attitudes toward healthful living.
 - b. Preparing the student to make the best and intelligent use of available medical and dental services.
 - c. Providing guidance for students in solving everyday problems in mental and physical health.
 - d. Enabling the student to appreciate and desire a wholesome and healthful environment.
 - e. Helping the student develop a knowledge of the changes which take place during adolescence.
 - f. Guiding the student in developing good posture and an understanding of its importance.
 - g. Enabling the student to know of the dangers of narcotics and alcohol and to establish the proper attitudes toward using these drugs.

B. Program at Different Grade Levels

1. Seventh Grade

a. Personal Health Appraisal

(1) Good Grooming

(a) Cleanliness

(b) Personal Appearance

(2) Individual Differences

- (a) Mental Growth
- (b) Social Growth
- (c) Physical Growth
- (d) Emotional Growth

b. Body Functions and Care

- (1) Skeleton
- (2) Muscles
- (3) Teeth

- (a) Structure
- (b) Care
- (c) Types

(4) Eyes

- (a) Structure
- (b) Diseases
- (c) Care

(5) Ears

- (a) Structure
- (b) Diseases
- (c) Care

(6) Digestive System

- (a) Structure
- (b) Functions

(7) Respiratory System

- (a) Structure
- (b) Functions
- (c) Diseases

(8) Circulatory System

- (a) Heart
- (b) Vessels
- (c) Structure
- (d) Diseases

c. Nutrition

- (1) Vitamins, proteins, fats, minerals and carbohydrates

- (2) Basic Foods, importance of well-balanced diet

This subject matter taught by:

- (a) Questions
- (b) Visual Aids
- (c) Discussions
- (d) Tests

d. Safe Living

- (1) Bicycle Safety
- (2) Home Safety

2. Eighth Grade

a. Teenage Problems

- (1) Home
 - (a) Relationships
 - (b) Responsibilities
- (2) School
 - (a) Assuming Responsibility
 - (b) Adjustments

b. Junior First Aid Course as prescribed by
The American Red Cross

This subject matter taught by:

- (1) Visual Aids
- (2) Text Book
- (3) Practical Work

c. Safe Living

- (1) School Safety
- (2) Water Safety

d. Citizenship

- (1) Analyze Qualities of a Good Citizen
- (2) Practice Qualities

3. Ninth Grade

- a. Your Personality
 - (1) Behavior
 - (2) Appearance
 - (3) Accepting Yourself as You Are
- b. Alcohol
 - (1) Harmful Effects on Body
 - (2) Social Problem
- c. Tobacco
 - (1) Harmful Effects on Body
- d. Narcotics
 - (1) Uses and Control
- e. Safe Living
 - (1) Automobile Safety
 - (a) Driving Fundamentals
 - (b) Safety Features of Modern Cars
- f. Teenage Topics: Selected by students with research and outside reading
 - (1) Reports given in class with general discussions
 - (2) Youth Panel
 - (a) Teenage questions submitted by both boys and girls
 - (b) Discussed by the panel of both sexes at a joint meeting
 - (c) Evaluation

The Health and Physical Education curriculum strives to accomplish its objectives through a diversified program. This is a progressive program for grades seven through nine which takes into consideration the individual needs and interests of the students. It is the school's responsibility

to see that each student is given the opportunity to develop to his maximum ability. It is hoped that this program will provide a carry-over value for later life.

CHAPTER IV

A QUESTIONNAIRE STUDY OF THE PROGRAM

There were two types of questionnaires sent out, one for the students, the other for the parents.

The questionnaires were answered by 238 boys and 241 girls. This represents a total of 479 students who were present the day the questionnaires were given out. There were seventy-two students absent on this day.

There were 475 questionnaires sent out to the parents. Only ten were not returned. This represents a 97.9 per cent return.

The questionnaires answered by the students were tabulated by sex in order to find a comparison of opinions given by boys and girls. The health and physical education teachers distributed and collected all questionnaires.

The first question asked the students was "Do you think that physical education is important to you?" Two hundred thirty boys answered "Yes" while eight answered "No." This was a 96.8 per cent affirmative answer. Of the eight negative answers the one given most frequently was "I get exercise outside of school." Two hundred thirty-one of the girls answered "Yes" and ten "No." This showed that 95.7 per cent of the girls thought physical education was important.

The second question was "Do you enjoy participation in the following?" Tumbling, parallel bars, physical fitness tests, contact sports (football, baseball, etc.), group games and individual games were listed. Chart I shows the results of this question. The boys enjoyed tumbling much more than the girls while the rest of the events were about the same. Each year there seems to be an increase in the number of students enjoying participation in tumbling and parallel bar work. The reason for this may be that they are gaining self-confidence and are participating on a larger scale.

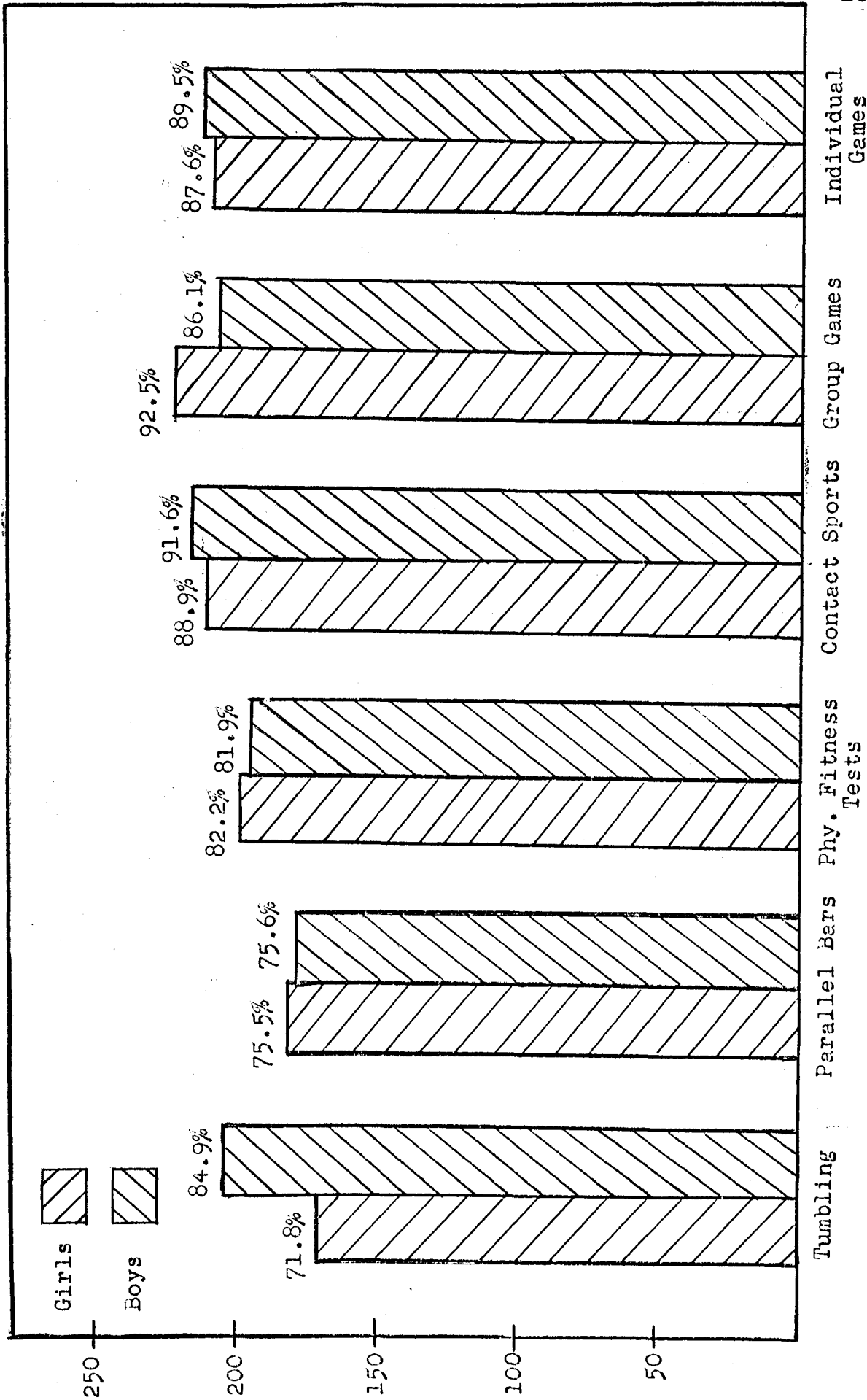
"Do you recognize a value from the First Aid Course? How?" was the third question on the questionnaire. Although the seventh grade students had not had First Aid, they had been briefed on it in the orientation period. Some students also had First Aid training in the Boy Scouts. The boys showed a 96.3 per cent affirmative answer (229 out of 232 boys). The girls' result was 91.7 per cent "Yes" (221 out of 241).

The reasons for recognizing a value were about the same for both boys and girls. They were "I know how to help others as well as myself", "I am more safety conscious" and "I know what to do in case of an emergency."

Question number four was "From the study of health education, do you think you (a) are more concerned with

CHART I

NUMBER AND PERCENT OF STUDENTS ENJOYING PARTICIPATION
IN PHYSICAL EDUCATION ACTIVITIES



sleep habits, (b) average more hours sleep per night, (c) are learning the importance of growing mentally, emotionally, physically and socially, (e) are improving your personality, (f) are better groomed and (g) keep physically fit?" The results of this question are shown in Chart II, and the evidence indicates that there is improvement in many of these phases.

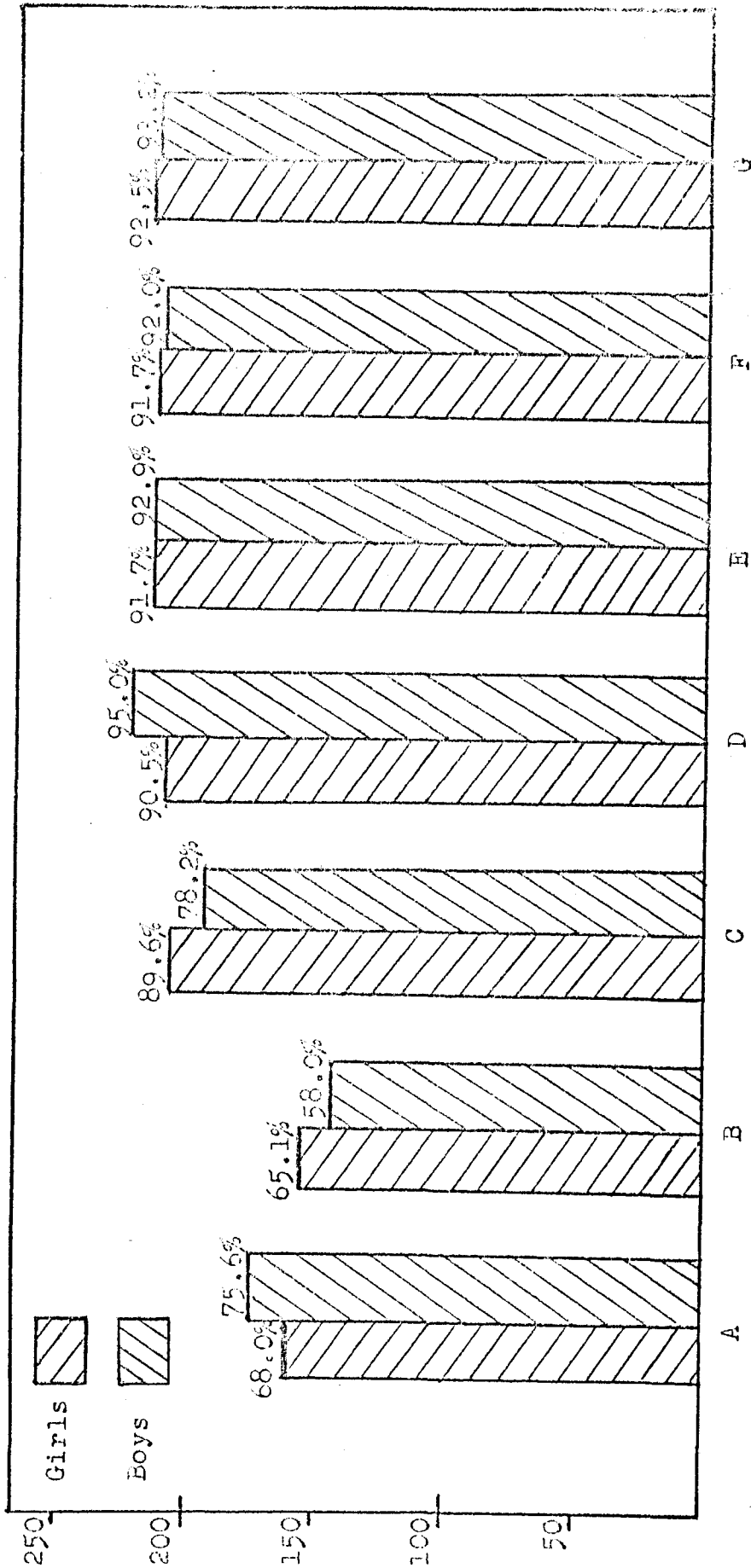
The fifth question asked was "Have visual aids (charts, slides and movies) helped you in your health classes?" The number of boys answering "Yes" was 232 which represented a 97.5 per cent affirmative answer. Two hundred thirty-one girls, 95.9 per cent, answered "Yes."

The few boys (six) and girls (ten) who answered "No" gave their main reasons as "The movies are not up to date" and "We don't see the movies at the same time that we are studying the subject." In interviews with the Supervisor of Health and Physical Education and the Supervisor of Audio-Visual Education, it was revealed that there are many health films available; however, they are not adequate in certain areas of study.¹

The sixth question asked was "Do you enjoy our dancing program? If not, why?" There were 199 boys,

¹ Interviews with Mr. Ludwell E. Sherman, Supervisor of Health and Physical Education, and Miss Constance Perrin, Supervisor of Audio-Visual Education, June, 1959.

CHART II
 NUMBER AND PERCENT OF STUDENTS WHO THINK SINCE STUDYING HEALTH EDUCATION
 THEY HAVE SHOWN IMPROVEMENT IN THESE PHASES



- A are more concerned with sleep habits
- B average more hours sleep per night
- C brush teeth more regularly
- D are learning importance of growing mentally, emotionally, physically and socially
- E are improving personality
- F are better groomed
- G keep physically fit

83.6 per cent, who answered "Yes." Thirty-nine answered "No" with the following reasons given, "I do not like to dance", "I am bashful and uneasy around girls", "There is too much difference in the age group" and "My religion does not approve of dancing." Two hundred nineteen girls answered "Yes" for a 90.9 per cent affirmative answer. There were twenty-two girls who answered "No" with the following comments, "I do not like to choose boys" (girls' choice), "I do not like to dance", "My religion does not approve of dancing" and "I do not like to dance with younger boys."

Question number seven dealt with good sportsmanship. It was "Do you think playing on teams has helped you to get along better with others?" Two hundred nineteen boys said "Yes" for a 92 per cent affirmative answer. There were 220 girls who answered "Yes" for a 91.3 per cent affirmative answer.

The last question on the questionnaire for the boys and girls asked them to list briefly suggestions for improvement of our health and physical education program. About 80 per cent of the boys and girls stated that they thought the program "was adequate as it was", "was good" etc.

The boys listed their suggestions in the following order:

1. larger locker room needed

2. locker room and gymnasium should be on the same floor
3. swimming should be included in the curriculum
4. more outdoor space needed for play area
5. more up to date movies needed.

The girls made the following suggestions:

1. place more emphasis on bowling
2. swimming should be included in curriculum
3. horseback riding included, if possible
4. more co-recreational games provided
5. larger play area needed

There were eight questions asked the parents.

Although there was a high percentage of returns (97.9 per cent) all parents did not answer every question on the questionnaire.

Question number one was "How many children do you have enrolled in Binford Junior High?" The questionnaires showed that the parents of 247 boys (44.9 per cent) and 303 girls (55.1 per cent) answered the questionnaires.

The second question asked "Are you generally very pleased, satisfied or dissatisfied with the health and physical education program?" Of the 451 who answered the question, 212 (47 per cent) said they were very pleased, 223 (49.5 per cent) said they were satisfied and sixteen (3.5 per cent) said they were dissatisfied. The sixteen parents who were dissatisfied listed their reasons in questions four and six. They are interpreted on pages 31 and 33.

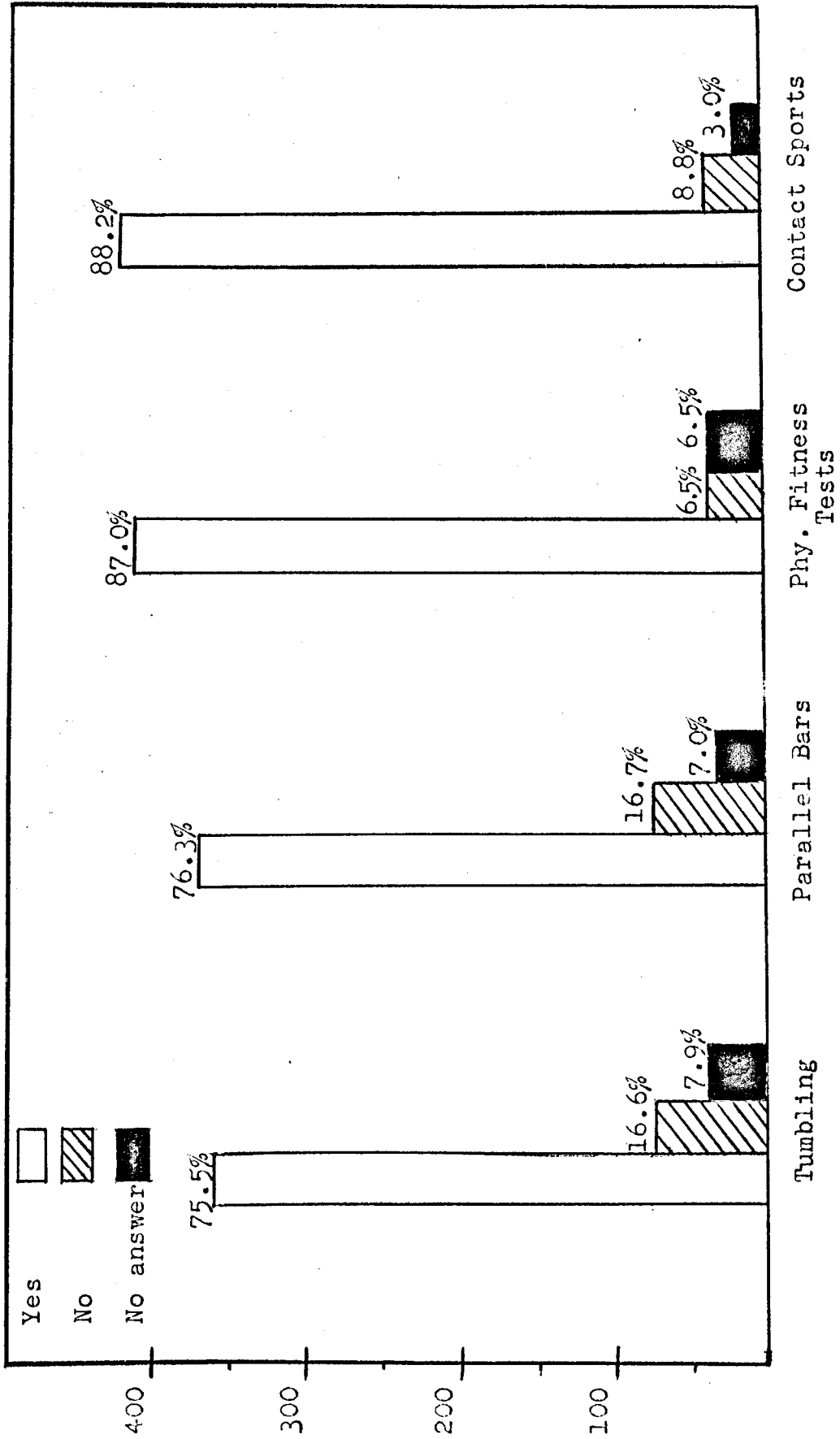
"Do you approve of your child's taking part in the

following activities: tumbling, parallel bars, physical fitness tests, contact sports (football, basketball, etc.)?" was the third question. Chart III shows the results of this question. Parents who answered "Yes" to these questions also added that they approved if these activities were properly supervised.

The fourth question was "Do you think the physical education program meets the needs of your child? Yes? No? If no, why?" Four hundred fifteen (95.2 per cent) answered "Yes." Twenty-one parents said "No" and stated the following reasons, "My child gets enough exercise outside of school", "It is a waste of time", "The program should have been started sooner, in the elementary school" and "More tennis is needed, especially for girls."

The fifth question asked was "As a result of the health program, do you think your child (a) is more concerned with sleep habits, (b) averages more hours sleep per night, (c) brushes teeth more regularly, (d) eats better balanced meals, (e) has a better appetite, (f) is more cheerful and good natured in disposition, (g) is more conscious of good grooming, (h) spends more time out of doors, (i) shows better posture in both standing and sitting and (j) is aware of the changes that take place during adolescence?" The following were listed under part (j): "(1) social, (2) physical, (3) emotional and (4) mental."

CHART III
 NUMBER AND PERCENT OF PARENTS SHOWING APPROVAL OF THEIR CHILDREN
 TAKING PART IN THESE ACTIVITIES



Under question five parts (a) through (e) were tabulated and the results are shown on Chart IV. The chart shows the number and percentage of parents who answered "Yes", those who answered "No" and those who left the question unanswered. Chart V shows the results of parts (f) through (i), and Chart VI shows the results of part (j).

"Do you think our dance program is of social benefit to your child?" was question number six. Three hundred eighty-seven parents answered "Yes" while sixty-eight said "No." This was an 85.1 per cent affirmative answer. The reasons given for no answers were as follows, "My child should not be required to dance", "It should be taught outside of school", "The age groups are not properly matched", "Dancing takes their minds off of their studies" and "My religion does not approve of dancing."

Question number seven was "Has our First Aid Course been beneficial to your child? Yes? No? How?" Three hundred forty-four parents (88.9 per cent) answered "Yes." Only the parents of seventh grade students answered "No" to this question. Their reasons were that the children had not had the course, since it is taught only in the eight grade.

Some of the beneficial reasons given were "My child has already made use of this by checking minor bleeding around the home", "My child has become more safety conscious" and "The First Aid Course has helped my son in his scout work."

CHART IV

NUMBER AND PERCENT OF PARENTS WHO THINK THEIR CHILDREN HAVE SHOWN IMPROVEMENT IN THESE HEALTH HABITS

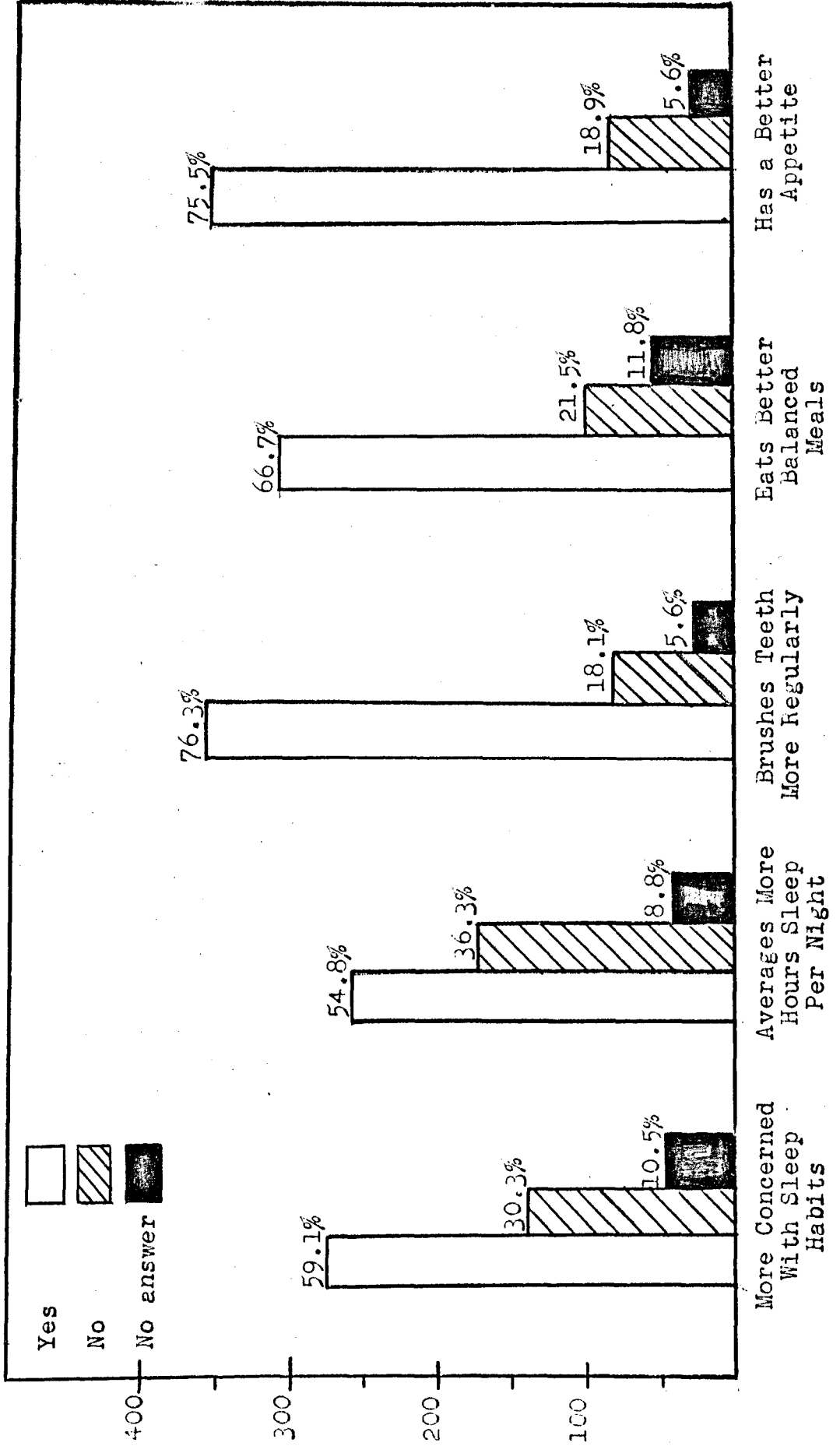


CHART V

NUMBER AND PERCENT OF PARENTS WHO THINK THEIR CHILDREN HAVE SHOWN IMPROVEMENT IN THESE PHASES OF HEALTH EDUCATION

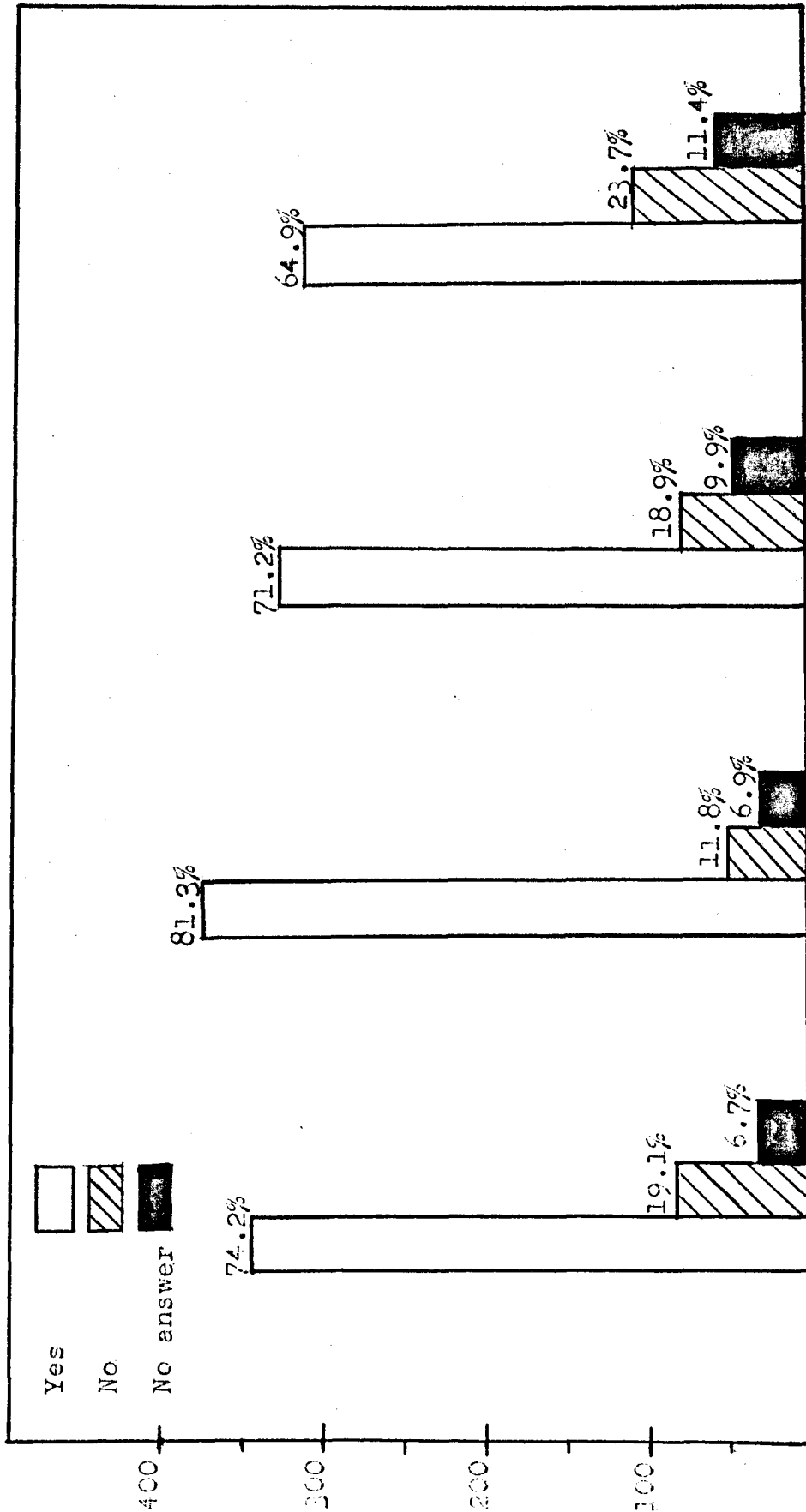
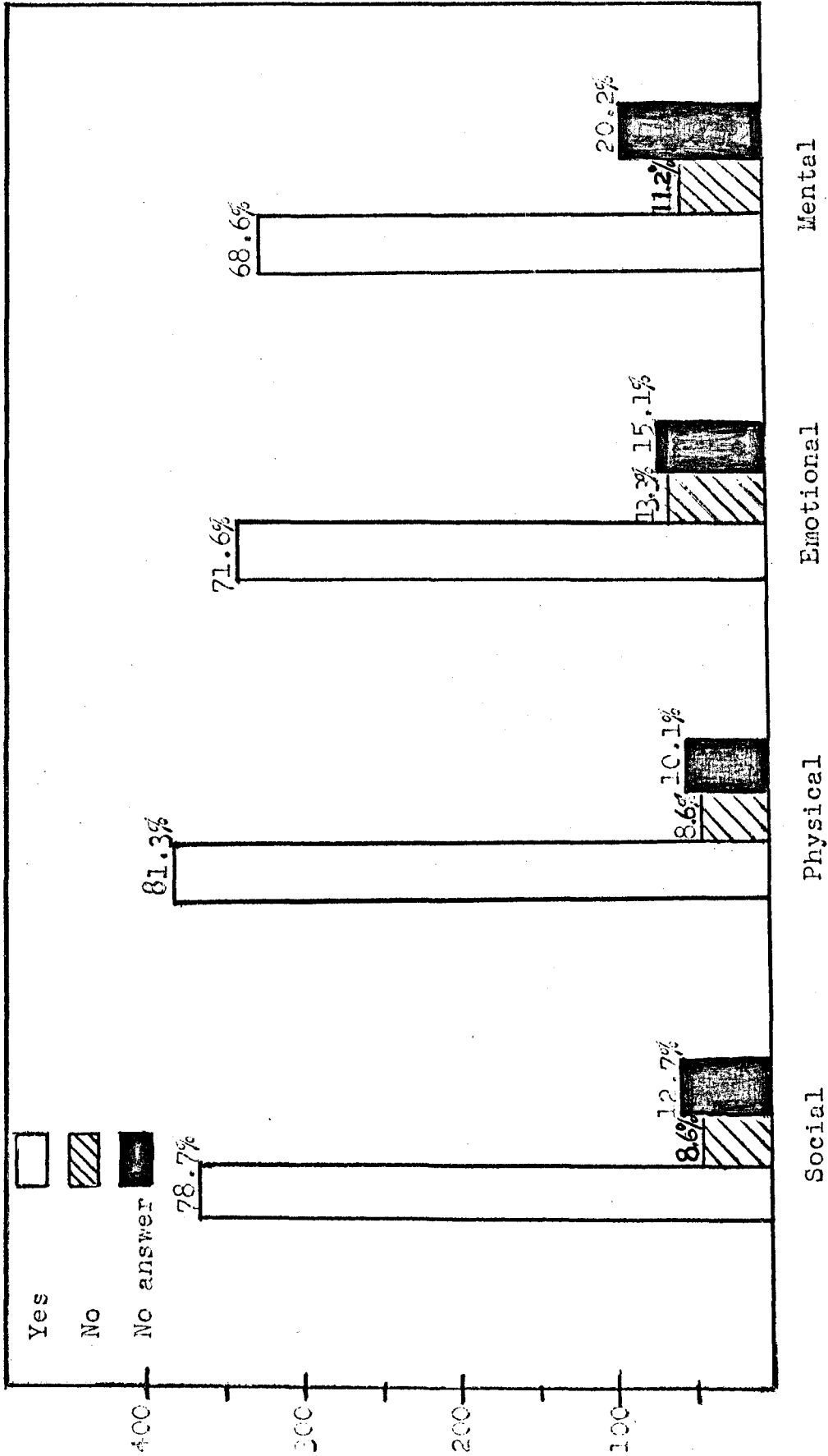


CHART VI

NUMBER AND PERCENT OF PARENTS WHO THINK THEIR CHILDREN HAVE BECOME AWARE OF THE CHANGES THAT TAKE PLACE DURING ADOLESCENCE



The last question asked parents to list briefly suggestions for improving the health and physical education program. The following suggestions were made, "I wish my child could be offered swimming", "I think girls especially should be taught more tennis", "The locker room facilities should be enlarged" and "I would like for the school to have more afternoon dances."

The results of these questionnaires have been turned over to the Principal and the Supervisor of Health and Physical Education with the hope that in the future planning of the health and physical education curriculum these suggestions will be given careful consideration.

CHAPTER V

SUMMARY AND CONCLUSIONS

One purpose of this study was to determine the status of the health and physical education program at Binford Junior High School. Other purposes were to find out from students the extent to which they feel that the health and physical education program is helping them develop good individual health habits, attitudes and physical skills and finally to find out from parents the extent to which they feel that the health and physical education program meets the needs of the students. These purposes were accomplished by two types of questionnaires, one for the parents and one for the students, and by interviews with parents, teachers and administrators. It is hoped that in the future planning of a health and physical education program the following suggestions, which are the results of the questionnaires and interviews, will be given careful consideration by the administration and curriculum committees.

1. The 2-2-1 program seems to be popular. Most of the parents and students think that breaking the program down into two days of health, two days of physical education and one day of co-recreational activities prevents it from

becoming boring. Because each week is divided in this manner, there can be a continuance of health education throughout the year and the opportunity for students to participate in seasonal sports.

2. There appears to be an increase in the number of students who enjoy participation in tumbling and parallel bar work. The reasons for this may be that they are gaining in self-confidence and ability. Interest in these activities seems to be increasing. For this reason the installation of more apparatus to meet this need seems justifiable and desirable.

3. Results of physical fitness tests reveal that most students lack proficiency in the activities which require the use of the arm and shoulder girdle muscles. More time should be spent on apparatus work, conditioning drills and other phases of gymnastics to remove this deficiency.

4. Poor health habits and attitudes seem to be a major cause of absenteeism at Binford Junior High School. Interviews with the Visiting Teacher and several homeroom teachers show that most of this absenteeism involves students from homes where they are not properly supervised. There is little concern as to whether or not they attend school. They do not get the proper sleep or a well-balanced

diet. This seems to be a problem which cannot be solved directly through the home. Therefore, the school must place more emphasis on these phases of health education so that the students will become more aware of how these practices will benefit them now and in the future.

5. Visual aids are important to a good health and physical education program. However, many of the films which are available for use are out-of-date, and it is often impossible to obtain the appropriate film when it is needed. Interviews with the Supervisor of Health and Physical Education and the Supervisor of Audio-Visual Education revealed that the selection of films is limited. By ordering films well in advance, teachers could overcome this difficulty to some extent. It also seems that teaching could be more effective if up-to-date films were available.

6. Swimming was mentioned by both boys and girls as something they wanted very much in the curriculum. In the planning of new schools this should be given careful consideration.

7. Most parents approved their children's taking part in tumbling, apparatus work and contact sports provided they are properly supervised. The students also are taking a greater interest in this phase of physical education.

The best ways to meet this need would be to reduce the size of the classes and to provide more physical education instructors.

8. The students who said that they did not enjoy the dance program gave as their main reason the fact that the age groups are not properly matched. This is a scheduling problem which has been overcome to a certain extent, and it is hoped that in the future more can be done to correct this situation.

9. The parents suggested more instruction in tennis as one of the means of improving the program. Only the fundamentals are now taught because of limited facilities. It is hoped that in the future students may be taken to Byrd Park for after-school participation.

10. Many girls would like to place more emphasis on bowling. In past years students have bowled but on a limited basis because of the expense and transportation problems. Recently a new bowling alley has been opened in the community. Next year it seems justifiable to say that a much better afternoon on Saturday morning program can be developed.

11. Most of the students and parents seemed very pleased with the First Aid program. The students qualify

as Junior First Aiders. There are only a few who have the opportunity to qualify in the Standard and Advanced Courses. If the senior high schools would gear their programs to meet this need, it would be very beneficial to the students now and in later life.

12. Many parents think the health and physical education program should be started in the elementary schools. The theory of physical education justifies this. At present this is left entirely up to the classroom teacher. If each school could obtain a person qualified in this field, it would solve the problem and leave more time for the classroom teachers to work in other areas.

The information acquired from this study shows that Binford Junior High School has an acceptable health and physical education program, but modifications and additions would strengthen it. The program should be flexible and geared to meet the needs of the community. It should offer activities and information which will be of benefit to the students. The suggestions by both parents and students have been given careful consideration, and some are already in the process of being carried out. Other suggestions have been presented to the Principal and Supervisor of Health and Physical Education for further consideration.

A subjective type of questionnaire such as this has its limitations; therefore, it would not be possible to ascertain that all of the conclusions are valid. More definite conclusions could be formed if more valid objective data could be obtained.

This type of study also has its advantages. It brings about a closer relationship between the home and the school. It is a two way method of communication which shows parents what is taking place in the school and presents an opportunity for them to express their own ideas. Student suggestions are also given consideration which leads them to feel they have a responsibility in the over-all planning of the program.

Similar studies of this type in other areas of school activities should lead to a more enriched program for the students, parents and community.

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APPENDICES

APPENDIX A
QUESTIONNAIRE (STUDENTS)

APPENDIX A
QUESTIONNAIRE (STUDENTS)

The purposes of this questionnaire are:

1. to give students the opportunity to express themselves about the health and physical education program.
2. to give students the opportunity to make suggestions for improvement of the program.

(Students need not sign their names unless they prefer to do so.)

1. Do you think that physical education is important to you? yes ____ no ____

2. Do you enjoy participation in the following:

- | | | | | |
|---|-----|------|----|------|
| a. tumbling? | yes | ____ | no | ____ |
| b. parallel bars? | yes | ____ | no | ____ |
| c. physical fitness tests? | yes | ____ | no | ____ |
| d. contact sports (football, basketball, etc.)? | yes | ____ | no | ____ |
| e. group games? | yes | ____ | no | ____ |
| f. individual games? | yes | ____ | no | ____ |

3. Do you recognize a value from the First Aid Course?

Yes ____ no ____ How? (briefly)

APPENDIX B
QUESTIONNAIRE (PARENTS)

APPENDIX B
QUESTIONNAIRE (PARENTS)

The purposes of this questionnaire are:

1. to give parents the opportunity to express themselves about the present health and physical education program.

2. to give parents the opportunity to make suggestions for improvement of the program.

(Parents need not sign their names unless they prefer to do so.)

1. How many children do you have enrolled in Binford Junior High? number boys _____ number girls _____

2. Are you generally very pleased _____, satisfied _____, dissatisfied _____ with the health and physical education program?

3. Do you approve of your child's taking part in the following?

- | | | |
|---|-----------|----------|
| a. tumbling? | yes _____ | no _____ |
| b. parallel bars? | yes _____ | no _____ |
| c. physical fitness tests? | yes _____ | no _____ |
| d. contact sports (football, basketball, etc.)? | yes _____ | no _____ |

APPENDIX B (CONTINUED)
QUESTIONNAIRE (PARENTS)

4. Do you think the physical education program meets the needs of your child? yes ____ no ____ If no, why?

5. As a result of the health program, do you think your child

- | | | | | | |
|----|---|-----|------|----|------|
| a. | is more concerned with sleep habits? | yes | ____ | no | ____ |
| b. | averages more hours sleep per night? | yes | ____ | no | ____ |
| c. | brushes teeth more regularly? | yes | ____ | no | ____ |
| d. | eats better balanced meals? | yes | ____ | no | ____ |
| e. | has a better appetite? | yes | ____ | no | ____ |
| f. | is more cheerful and good natured in disposition? | yes | ____ | no | ____ |
| g. | is more conscious of good grooming? | yes | ____ | no | ____ |
| h. | spends more time out of doors? | yes | ____ | no | ____ |
| i. | shows better posture in both standing and sitting? | yes | ____ | no | ____ |
| j. | is aware of the changes that take place during adolescence? | | | | |
| | (1) social | yes | ____ | no | ____ |
| | (2) physical | yes | ____ | no | ____ |
| | (3) emotional | yes | ____ | no | ____ |
| | (4) mental | yes | ____ | no | ____ |

APPENDIX B (CONTINUED)
QUESTIONNAIRE (PARENTS)

6. Do you think our dance program is of social benefit to your child? yes ____ no ____ If no, why? (briefly)

7. Has our First Aid Course been of benefit to your child? yes ____ no ____ How?

8. List briefly any suggestions you may have for improvement of our health and physical education program.

VITA

Linwood Hugh Metzger was born in Richmond, Virginia, July 22, 1921, son of Mr. and Mrs. Charles H. Metzger, Jr. He was educated in the Richmond City Schools.

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Since September, 1950, the writer has been teaching at Binford Junior High School where he is Chairman of the Department of Health and Physical Education and coaches the major sports.

In the summer of 1957 he began working toward his M.S. degree with the expectation of completing this work in the summer of 1959.