Public Health

Adult Group Teaching
(in five sections)

By

Achimma Thomas & L.M. Bischoff

Section—3

Principles and methods of teaching adult groups

A. The purpose of group teaching

The goals in health teaching is to bring about changes in habits that adversely affect health. Health teaching is designed to guide people away from prejudice and superstition, and toward an understanding and an acceptance of scientific truth concerning health practices.

The public health worker should work gradually towards this understanding and acceptance so that progress will be steady and adoption of good health practices will be certain.

B. The principles of adult group teaching

1. The learning group should participate in the choice of subject to be studied. Subjects for conferences and group learning must meet a need of the group.

2. The group should want to learn: Since people have a tendency to learn what they want to learn, the group should discuss and state the health improvements which they feel they need. Needs are expressed as biological, social, and emotional.

(a) This gives the health worker a vantage point from which to begin teaching.

(b) From "felt" needs, she can direct the group to progress towards personal and community health goals.

3. The learner should participate in, and accept, some responsibility for the learning process. To learn, a person must react to an experience.

The best way to learn is by doing. One of the first lessons may be to learn what constitutes a safe environment. The group may first study the classroom environment and take action to improve it, then progress to the whole school, then finally to the community.

4. The group should assemble in a friendly informal atmosphere where each person's point of view should be freely expressed and respected.

5. The adult group should assemble in favourable physical surroundings.

(a) The school, or classroom should be a living example of good sanitation and healthful living. One objective of the course may be for the adult group to make it so.

(b) The group should see and experience the use of a proper latrine, with hand washing facilities nearby; they should use boiled water or water that is known to be absolutely safe, and that is cooled in a sanitary jug; the room should have adequate light and air. These health facilities may be introduced as a result of group decision and group action after the group is convinced that such practices are good for their health.

6. The group should progress from
old experiences to new experiences.

(a) Adults learn by relating new ideas to their own ideas and experiences.

(b) The wise teacher will find something good in customs of the families, and build her teaching upon good practices.

(i) Example: Isolation of a mother for ten days after childbirth is a law of the Vedas. This is a good practice, because it keeps people with colds and other infections away from the mother and the child.

(ii) Other practices during and following childbirth are not good and should be corrected as the individual learns safe ways, and understands why changes should be made. Example: Use of a dark corner for delivery of the child; interference during delivery; leaving the baby without breast or water for six hours; giving castor oil to the new born child are all customs and practices that may be detrimental to the health of the child.

(iii) The health worker should compliment the good practices and lead up, with care and understanding, to those that must be corrected.

7. The group will respect the teacher who knows her subject.

(a) Public Health Nurses and Health Visitors are respected among other things for their knowledge of health.

(b) The health worker should have a scientific and an applied knowledge and understanding through personal practice in the subject:

Example: In the study of nutrition, milk may be the subject. In teaching the value and use of powdered milk the teacher must know what the milk contains, how it is made, how to mix it properly, and how milk is utilized in the body. When the teacher drinks powdered milk herself and likes it herself, she can more readily and sincerely teach and motivate the group to use it. If the group dislikes the taste of the powdered milk then demonstrate how to make curds and puddings with the milk. Be sure to use fresh products and enough powder to make a delectable drink. If necessary to sweeten, use honey or jaggery, honey adds Vitamin B, and boiled jaggery adds iron to the food values of the milk.

Note: It is always desirable to offer to the class, a taste of food prepared during the demonstration.

(c) The public health worker should be free of prejudice and superstition, so she should search the mind for personal prejudices; she should analyze these and substitute scientific truth for prejudices.

8. Most groups are intelligent and enthusiastic about learning if the teacher is enthusiastic.

(a) Sincere enthusiasm is contagious.

(b) The teacher's own convictions are reflected in the group's attention and in their willingness to accept change.

9. The learners must learn at their own pace.

(a) In adult education, the learner does not compete with others for marks or grades.

(b) Each learner's goal is to improve his own and/or his family's health.

(c) Be generous with commendations when an individual makes any habit change.

Example: Call attention of the group to the individuals who are seen or report that they boil drinking water; add carrots, beans or new foods to the diet; or when an improved well has been added for the home or school.

10. The learner group is more interested and alert if instructional methods vary.

Health studies, observation trips and visual aids offer opportunities to vary instruction.

Example: Schedule field trips to demonstrate safe water supply; design a "form" for the group to appraise the health situation in their homes; help the

THE NURSING JOURNAL OF INDIA
group learn to inspect themselves for nutritional status; demonstrate skills; illustrate with flannelgraph; use slides, movies and other visual aids to supplement discussion and actual demonstrations.

11. The group should have a sense of satisfaction.

Select a problem to be solved; analyze ways of dealing with the problem; come to some definite conclusion; and try it out.

Example: Problem: How can dysentery be prevented.

Analysis: Dysentery is caused by a germ.
- Dysentery germs live in water and food.
- Dysentery germs get into the body by drinking unboiled water, by eating unsafe food, dirty hands; flies carry the germs.
- Dysentery will spread to others.

Discussion: The group will discuss their experience with dysentery, how they make their water safe, how they control flies etc.

Solution: From the group—group action
(i) Boil drinking water—until safe well is constructed.
(ii) Destroy flies—plan how and stress why.
(iii) Remove fly breeding places.
(iv) Eat freshly cooked hot foods.
(v) Wash hands etc.

12. The student group gains if the teacher feels a sense of growth herself:
(a) Group teaching in the developing stage is new and exciting; it is experimental and natural; any group experience is a challenge.
(b) The teacher should carefully record what she learns and experiences, mainly in terms of attitudes of the group when the class started and observed changes during house visits.

Data thus collected will aid in developing skills and techniques in the important process of adult learning.

13. The adult group will benefit most if the plan of the course is flexible.
(a) Both the students and the teacher should have goals and targets that should be reached in a specified time if possible.
(b) Plan of the programme of study should be formulated in such a way that :
(i) It will lead from the known (local custom) to the unknown.
(ii) It should be practical.
(iii) It should be adapted to the group.
(iv) It should be presented in the language of the group and in terms that can be understood.

C. Selecting and organizing subject matter
1. Selection of the subject to be taught will depend on :
(a) The interests and needs of the group.
(b) What that group already knows.
(c) The health problems in the community.

2. On the basis of health problems the following should be taught.
(a) Nutrition and the value of a balanced diet—of eating a variety of food each day—beans, eggs, fish, groundnuts, gram (proteins), milk, ragi (calcium), oranges, tomatoes, limes, amla, sprouted gram (Vitamins) and parboiled or hand pounded rice (Vitamin B and Carbohydrate), fresh yellow and green vegetables.
(b) Environmental sanitation, such as boiling water, burying feces and sputum—until a safe well and proper latrine is constructed, eradication of flies, mosquitoes, other insects and rodents.
(c) Maternal and Child care—early and continuous care during the antenatal period, safe delivery and care of the child—particularly child feeding and nutrition.

(Contd. on page 298)
Pediatrics — (Contd. from page 294)

White, by giving it to older children or adults.

The discussions end with any final questions, and, after thanking the mothers for coming, the ward sister and students are left alone to evaluate the teaching: to analyse what the students have learned, what we think the mothers have learned, in what ways we can improve the next discussion, how the students feel about it themselves, and so on.

On the whole we have found the discussions successful. In the give and take, the mothers have had an opportunity to hear new information, and we have learned more about some of the beliefs which have been obstacles to change. We have learned a lot about how mothers can be helped; this is one of the basic needs in pediatric nursing. We have learned to appreciate their suggestions and accept their problems. We have come to understand the individual's feelings from the way she expresses the spoken word. With this kind of understanding, we are able to help the mothers themselves to think creatively to solve their own problems.

The mothers have given evidence, through subsequent changes in behaviour, that they, too, have learned at least some aspects of what has been discussed. Group discussions offer an economical way of meeting the needs of a number of mothers at one time. We can achieve a good deal through individual teaching when common problems are discussed. This saves our time on our busy wards. It is our hope that our experience will be stimulating and helpful to some of you and that the practice of group discussions with the mothers of hospitalized children will spread.

---

Public Health — (Contd. from page 297)

3. The group will gain more if the subject matter is arranged in a logical sequence. Example:

Subject: A balanced diet brings health.

Lesson 1. What to eat to be healthy?

Lesson 2. How a variety of foods builds the body and maintains health?

Lesson 3. How to cook and serve food to get the greatest value for health?

Lesson 4. Presentation of the subject by students possibly at a time when others can attend.

In these sequences of topics the teacher should write out each lesson in detail, because:

(a) The teacher is at ease when she knows her subject—by writing her lesson, she refreshes her memory and reviews the scientific truths.

(b) She can lead a discussion freely with interest and enthusiasm.

(c) She can depart from pure lecture and stimulate the group to think and discuss the subject with each other.

(The Conference Programme — (Contd. from page 292)

section will bring more members into the association and increase the income of TNAI.

Do you want a Section?

You are requested to come to Conference and help decide whether you want a section and if you do, you must be willing to work for it. The section meetings scheduled for Thursday 6—8 p.m. is planned for discussion. If you want a section, come prepared to:

1. Discuss the goals of the section.
2. Draft and/or discuss and adopt bye-laws for the section.
3. Elect officers for the section, if bye-laws have been approved by Council.

Every effort is being made to develop an interesting, beneficial programme for the section meetings to be held on Thursday. If you have any suggestions with you please send them to Kumari Lakshmi Devi, General Secretary.

Lillian Bischoff
Chairman, Programme Committee

The Nursing Journal of India