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Humbled in an individual's role to the environment. Simply, learning is a relative permanent change in behavior that results from experience to learning experiences. It is an activity that is essential for the proper development of the individual as an independent person and as a social being. Learning depends on a variety of factors, which can be within the individual learner or in the environment. This includes the nature of the individual's physical, mental and emotional state as well as past and present experiences and the location and facilities available within the teaching-learning environment.

Considering these great variety of individual differences among human beings and the multiplicity of factors in the environment to which they are exposed, it becomes apparent that learning is never exactly the same for any two persons or, indeed, for any one person on different occasions. Therefore, learning process should be recognized and effectively explained during learning-teaching situations.

Learning process
This is usually described in three ways:
1. Cognitive, which deals with knowledge and understanding.
2. Psychomotor, which deals with motor skills/attitudes.
3. Affective, which deals with attitude.

Formal learning is chiefly learnt through words either seen (by reading) or heard (by listening to someone else and sometimes listening to ourselves). Motor skills are learnt chiefly through activity (by doing or practicing), while attitude is learnt sometimes, by words, but chiefly through imitation of people around, consciously or unconsciously. However, there is a learning characteristic that must be kept in mind in the overall planning for the teaching-learning process, that is, it is not always possible to tell immediately if learning has taken place. It could have been very consistent if a light would flash up to tell the teacher that the "Listener" is not learning so that adjustments could be made to ensure that learning is taking place. But, this is not so, because in real situations, the teacher will not know if learning is taking place or has taken place until there is an occasion for the learner to show a change in behavior.

Illustration: The teaching of a group of women in a rural community (where guinea worm is endemic) explaining
The importance and process of filtering their drinking water for guinea worm control. By using demonstration and discussion teaching method, these women can be taught the simple process of using a piece of white cloth provided to filter the water from their pond into a mud pot. There are two basic ways through which the teacher, that is the health educator, will determine whether learning has taken place.

1. By question and answers as well as by demonstration during teaching and learning session (theory).
2. By demonstration of change in behaviour through putting into practice what is being taught in the actual environment (practice). For example, if the health educator visits the rural community a week later and found that all the women who were taught have bought the mud pot and are using the supplied white cloth to filter their drinking water, then it is clear that learning has taken place. The question that comes to mind next is, how do human beings learn?

According to UNICEF human beings learning process takes place as follows: 1% through taste, 2% through touch, 3% through smell, 11% through hearing and 83% through sight; and that they remember 10% of what they read, 20% of what they hear, 30% of what they see, 50% of what they see and hear, 80% of what they say, and 90% of what they say and do. Obviously, from the above findings people learn from what they see, say and do, that is, they learn better when they participate actively in what is being taught by seeing, saying and doing.

Summary of the principles that guide learning:
- Perception is necessary for learning.
- Conditioning is a process of learning.
- Learning may occur through imitation.
- The process of trial and error is a way of learning.
- Development of concept is part of the learning process.
- Problem solving is a method of learning.
- Motivation aids learning.
- Physical and mental readiness is necessary for learning.
- Effective learning requires active participation (Learning is self active).
- New learning must be based on previous knowledge and experiences.
- Emotional climate affects learning.
- Repetition aids learning.
- Reinforcement influences learning.
- Teaching is the art of helping people to learn. The teacher facilitates learning by understanding the learning process based on teaching-learning principles, also by developing specific skills and abilities in teaching. Teaching could have been very easy, if it were possible to set up a list of rules for teaching, that could be followed step-by-step in order to guarantee effective teaching. However, the numerous human and environmental variables that may influence teaching-learning make it impossible to set up formulae for teaching. Each learner is unique and each learning situation is different. Effective teaching is therefore, facilitated by knowledge of the principles of teaching and learning and the ability to apply them effectively in specific relevant learning situations.

Some principles of teaching include the following:
- Teaching requires effective communication.
- Objectives serve as guide in planning and evaluating teaching-learning process.
- Planning time for teaching and learning requires special attention.
- Control of the environment is an aspect of teaching.
- Learning principles must be applied appropriately.
- Evaluation is an integral part of teaching.

Method of teaching health education may be informal or formal (structured). Informal teaching refers to something that is unstructured teaching that may take place in almost every situation the health educator has with clients or co-workers. This kind of teaching may be "on the spot" (incidental) teaching, as when the learner asks a question that shows a need for teaching or it may be initiated by the health educator from mere observation of a situation. With this method, teaching may occur without the awareness of either the health educator or the learner such as when a learner adopts an attitude or habit by just observing the health educator’s behaviour. Informal method of teaching is very important in health education, even though, the words casual and unstructured are used to describe it. This is because effect of health education takes place to manifest and usually health attitude is developed over a period of time through the persuasive ability and exemplary life of the health educator. Behavioural objectives are determined and teaching plans develops just as in formal method of teaching. However, the main difference between them is in the way these objectives are met and how teaching plans are used. The informal teaching method includes talking and listening: questions and answers, and setting examples (modeling). The type of learning that takes place through talking and listening, questions and answers concern mainly the cog-
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ative aspect of learning process while a large part of learning that results directly from setting examples in health, concern attitude formation about health and illness, personal and environmental hygiene, food habit and the like. People form some of their opinions about health and health education from the health educators they see, and their judgments are based on the health educators' behavior. Thus, teaching by setting favorable example can have far-reaching effect both on those people for whom the health educator has direct responsibility and on the general public. So, it is an effective practical method of teaching health education.

Formal (structured) teaching refers to instruction that is planned in advance according to a definite teaching guide or outline and scheduled for a specific time and place for one or more learners. Techniques for informal method of teaching can be utilized also (talking, questioning and setting examples) but the core difference is that formal teaching is deliberately planned before hand. Main techniques used in formal teaching include, discussion, lecture and demonstration. Teaching materials (aids) such as real objects, models, photographs, posters, slides and filmstrip; motion picture and pamphlets, among others may be used appropriately to enhance teaching-learning process.

Visualization in participatory programmes (VIPP) is another effective practical method for teaching health education especially for some topics that look abstract. VIPP is people/learner centered approach to teaching, planning, training and other group events. It is based on a philosophy of trusting in the capacities and creativity of human beings and it combines techniques of visualization with methods of interactive learning. It's central characteristic is the role of the teacher as a facilitator or moderator who helps various groups to give birth to collective ideas which are visualized on cards and papers of different sizes, shapes and colors and placed on pin boards throughout the group process. VIPP methodology democratizes interaction between group members. It generates knowledge from group members, and facilitates interaction between all actors involved, leading to creativity in joint reflection. It is believed that each individual learner possesses experiences and knowledge, which can be released in group process. This methodology originated from two scholars Freire, an American and Lewin, a German immigrant to the United States.

Since VIPP methodology encourages interactive learning and active participation of learners, it is an effective method of teaching health education. However, just like most life phenomena, VIPP methodology has its merits and demerits. Merits include the following: it encourages participation of all learners both vocal and quiet ones. It concretizes learning, which makes it more permanent since it involves the use of many senses at the same time.

Demerits include the following: It is expensive. It is time consuming and it requires a lot of space. However, the demerit of high cost can be appropriately managed by telling each student to provide one or two cardboard papers of different colors as well as a marker.

Guide for practical demonstration using VIPP methodology (e.g. Urine formation concept)

1. Organize the cardboard under the sub-headings of the topic to be discussed (e.g. three sub-headings under urine formation concept).
   1. Organs involved in formation of urine
   2. Composition of urine
   3. Process of urine formation
   4. Organize the students into groups (12 - 20)
   5. Allow each student to pick three cut cardboard papers
   6. Each student should write 2 organs involved in urine formation, 2 content of urine and 2 processes of urine formation.
   7. Each student should drop his/her card face downwards on the floor.
   8. Ask for three volunteers to collate the ideas expressed on the cardboard papers under the three headings on a pin board.
   9. Any idea written by a student that has no bearing to urine formation should be discarded and coded as invalid.
   10. Discuss the ideas expressed by the learners on the cardboard papers which are placed on the pin board.
   11. Then the teacher who is now a facilitator turns the pin board where the ideas have been systematically organized.
   12. Discuss and compare with the ideas generated by the students.

VIPP Card writing rules

1. Think before you start to write.
2. Write one idea per card.
3. Use key words instead of full statements.

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Conclusion
Effective methods and materials for teaching health education include informal and formal methods as well as using appropriate teaching aids to enhance learning. Emphasis should be laid on setting good examples and the application of the concept of persuasion. The VIPP teaching methodology is another effective method, which should be used because it is democratic and involves every student both vocal and quiet ones. It helps students to participate fully in the teaching-learning process, enabling them to see, hear, touch, and do, thereby making learning processes more concrete and permanent.

References

I ASKED FOR ALL THINGS THAT MIGHT ENJOY LIFE
I WAS GIVEN LIFE THAT I MIGHT ENJOY ALL THINGS

I asked for health that I might do great things;
I was given infirmity that I might do better things.
I asked for strength that I might achieve;
I was made weak that I might learn to obey.
I asked for riches that I might be happy;
I was given poverty that I might be wise.
I asked for power and the praise of men;
I was given weakness that I might sense my need of God.
I asked for all things that I might enjoy life;
I got nothing I asked for but everything I hoped for.
In spite of myself my prayers were answered.
I am among all men most richly blessed.