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### **The Impact of Teacher Training on Utilization of Problem-Based Learning in Classroom Health Education**

Katherine H. Hendrix, Gregory E. Gilbert, Lisa Kozlowski, Elizabeth Bradley, Linda Austin, and Robert F. Valois

The purpose of the Healthy Challenges Project (HCP) was to increase health instruction in grades 3-12 via teacher training in problem-based learning (PBL), resources, and incentives to instruct student on tobacco prevention. The HCP provided teacher training, incentives to encourage participation, and funding to purchase classroom health education materials. Teachers were trained to use the PBL teaching technique to increase critical thinking skills and depth of inquiry among students. This study utilized a repeated measure quasi-experimental design. Subjects included 53 participating teachers and 42 nonparticipating (comparison) teachers. Analysis of variance results determined six variables that were significantly different for participating versus nonparticipating teachers. These were ratings of passive student participation; perceptions of other teacher support; positive feelings about teaching health; feeling that “my teaching method was effective”; preparation time for class, and time student spent working in small groups. Results suggest that PBL teacher training combined with incentives can increase and improve health education classroom instruction.

### **A Strategic Plan for Winning the War in Public Health**

David R. Black

A strategic military plan applied to public health is prudent and should be developed because the budget for public health has been cut, the workforce substantially reduced, life expectancy ranking has declined, and the number of life-threatening pandemics worldwide has increased. The United States is experiencing more public health casualties annually from smoking alone than deaths from the last four major wars. Until Americans have the same passion, zeal, nationalism, and patriotism for public health as other threats to homeland security, the “war” will not be won. Winning the war will depend on focusing on the enemy’s center of gravity (CG), prioritizing ends, and applying instruments of power that are efficacious. The enemy’s CG is morbidity and our nation’s CG is the abundance of means. Prioritizing ends is limiting the number of goals/objectives, and addressing simpler and easier objectives first that show the greatest potential for impact on morbidity and mortality. Three instruments of power are presented for heuristic purposes and include knowledge/facts and beliefs, sine qua non constructs of change, and “best processes.” The theater of war must be the enemy’s environment and established ends of victory/success must be established a priori.

### **Substance Use and Risky Sexual Behavior: Attitudes and Practices Among Adolescents and Young Adults**

The Henry Kaiser Family Foundation

The Kaiser Family Foundation’s National Survey of Youth Knowledge and Attitudes on Sexual Health Issues is a random sample survey of 1,200 adolescents and young adults, 13-24 years old. The findings reported here reflect the behaviors and attitudes of the 15-

24 year olds (n=998). This survey provides insight into youths' attitudes toward and experiences with substance use and sexual activity.

### **Sex Education in the United States: Policy and Politics**

The Henry Kaiser Family Foundation

This article examines the federal, state, and local policies that guide approaches to sex education today. It also examines recent research into community-level experiences and practices, as well as emerging evidence about the effectiveness of different types of sex education curricula.

### **A Cautionary Tale About Conducting Research on Abstinence Education: How Do State Abstinence Coordinators Define "Sexual Activity?"**

William Bailey, Michael Young, Cliff Knickerbocker, and Tam Doan

The purpose of the study was to determine how the state coordinators of abstinence education programs defined the term "sexual activity." A questionnaire was mailed to Title V abstinence education coordinators in each of the 50 states, Washington DC, and the three territories receiving these federal funds (n=54). In addition to demographic data, the questionnaire asked the respondent to indicate whether or not the state/territory had established definitions of the term "sexual activity" and, if so, to identify what those definitions were. In addition we asked respondents to indicate whether selected behaviors constituted sexual activity. Seventeen coordinators (31.5%) provided at least partial responses to the survey. Of the states that responded, none indicated that his or her state had a definition of sexual activity. The participation rate in the study by abstinence coordinators was not high, but the questionnaire did elicit much reaction. This included efforts by individuals and organizations to interfere with the conduct of the study and efforts by university officials to have the Institutional Review Board's approval of the study withdrawn. The response to the study should serve as a cautionary tale to potential abstinence education researchers.

### **Application of the SMART Model in Two Successful Social Marketing Projects**

Brad L. Neiger and Rosemary Thackeray

Social marketing is best viewed as a systematic, consumer-based planning approach. The Social Marketing and Response Tool (SMART), one such approach, was recently used in two successful social marketing projects. This article describes how the SMART model was used in these projects and presents a planning protocol for health educators interested in social marketing.