Abstract

The system of teachers’ training for the health-oriented activities implementation in educational institutions is experiencing a period of crisis. This affects the quality of how teachers implement the health creating function and, eventually, the health condition and formation of a healthy and safe lifestyle culture for students and pupils. Given that the health-oriented activities of educational institutions are one of the state’s priorities, we should pay particular attention to the modernization of the teachers’ training system and improvement of their skills in the field of conservation, enhancement and development of the students’ and pupils’ health. The main modernization can be based on the new guidelines reflected in the educational practice: a research on how to increase the teachers’ motivation for the implementation of the health-oriented activities, the revision of the corresponding training programs, the increasing importance of distance learning technologies and methods and the interactive, action-oriented nature of the face-to-face training.

Keywords: teacher training; health-oriented activity; health creating function; building a culture of healthy and safe lifestyle; tutor of a healthy lifestyle; individualization of education; distance education technologies; health-oriented personal position.
NEW GUIDELINES AS A BASIS FOR CRISIS SETTLEMENT
IN THE HEALTH-ORIENTED TEACHER TRAINING ACTIVITIES

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The development of teachers’ professional competence in the organization of health-oriented activities has been an unsolved problem. Despite a large number of training programs aimed at developing the aforementioned competence for the teachers working in the secondary, higher vocational and additional vocational education systems, many researchers point out the “inability of teachers to organize their lifestyle, make it healthy … the non-acquaintance with the psychological-pedagogical technologies that allow to carry out the educational process without compromising the health of its subjects” [2, p. 122], the significant differences in teachers’ perceptions of the nature and forms of work to create a healthy lifestyle for the students and inadequate teacher training for activities oriented on health [6, p.10], the abundance of cases when teachers express verbal aggression or even physical coercion, their inability to create an environment of success for students with different abilities and, in general, the didactogeny increasing risk factors for the health of students [4, p. 12], the non-compliance with hygienic requirements for the learning process, a poor awareness of the ways to prevent students’ fatigue in the classroom [4, p. 23] or of the methods of mental self-adjustment, the inability to switch depending on the situation [11, p. 21].

The criticism of the current system of professional teachers’ training when it comes to implementation of the health oriented activities shows the need for a radical revision of the system.

Let us identify the problems that should, in our view, be solved in the process of updating the strategy and tactics of teacher education and professional development of employees of educational institutions to reach a high-quality implementation of health creative function in the system of professional functions, which we regard as a unity of three components: health preservation (creating a safe and healthy environment in the educational process), health creating (including health education issues in the educational activities and building a culture of healthy and safe lifestyle) and defined by us as “self-development in the field of health” (continuous improvement of teachers’ competence in the organization of health-oriented activities - both professionally, and for a harmonious life in other areas of self-fulfilment) [10].

1. Updating the objectives and content of the teacher training

We do agree with V.V. Kolbanov, who argues that a unified research foundation is needed to create an effective system of health education in the country - and it has not yet been established [5, p. 191], and we believe that one of the reasons of why there is no efficiency in the process to increase the teachers’ competence in the organization of activities oriented on health is that the methodological basis for many programs of vocational education and training is either outdated (e.g., based on guarding and training strategies concerning health and does not include the transformative strategy recognized at the present moment as equally important), or the basis ignores comprehensive and interdisciplinary solutions to strengthen and develop the students’ health and does not indicate a clear pedagogical mechanisms to solve the problem.

The data obtained by us in the course of The health and physical fitness monitoring of educational institutions students (hereinafter - the Monitoring), commissioned by the Ministry of Education and Science of the Russian Federation and realized by the Institute of Medic-Biological Problems of the Peoples’ Friendship University of Russia (IMBP PFUR) in December 2014 (the developers of the Monitoring - E.S. Osokina, researcher at IMBP PFUR and T.N. Le-van, Ph.D. (Pedagogy), associate professor, researcher at IMBP PFUR), shows that 68.1% of teachers in 2011-2014 received professional development training for the health creative programs and / or modules (i.e. more than 2/3 of the teaching staff in 1060 rural and urban educational institutions that participated in the study). At the same time numerous scientific studies on the organization of educational process show that for the last three years there have not been significant improvements in the area of the security of the educational process and the effectiveness of the educational institutions to promote the culture of a healthy and safe lifestyle for the students.

2. Ensuring continuity and succession of programs for various levels of vocational training

Our research in the field of teachers’ training for the implementation of health creative function proves unsystematic nature and one-sided view at this aspect: a future Bachelor in Educational science and pedagogy is equipped with a rather meager arsenal of knowledge and skills in the field of development anatomy, physiology and children’s hygiene. There are no disciplines that fully acquaint students on how to help their pupils to form a healthy and safe lifestyle, and not enough focus is put on the motivation of the students to develop...
op this kind of activity. The teachers who are just at the start of their career do not develop this professional competence in the course of pedagogical practices and that impedes the successful implementation of the mentioned function. The vocational education programs, despite their diversity, are rarely of integrated nature and are not usually based on the prioritizing the educational component, teaching tools and ways to build a culture of health (with the exception of programs for physical education teachers and in some cases, biology).

Only some regions of Russia (Belgorod region, Kemerovo region, St. Petersburg and some others) have the system of continuity of programs and modules oriented on health that resulted from a consistent and comprehensive acquaintance of educators with the organization of such activity.

3. Development of teacher’s readiness to solve professional problems creatively by rethinking the practical experience, knowing the relevant scientific and theoretical developments as well as using his or her own research activities

According to V.I. Zagvyazinsky “instructions and directives increasingly drew [the practice] away of creativity towards the implementation of directives, which contributes to the administrative hierarchy and initiatives’ pressure “, as a result “the educational practice ... is forced to overcome the consequences of erroneous and not always reasonable directives and decisions” [3, p. 18]. At the same time, according to E.A. Yamburg, the absence of a ready-made instruction confuses, alerts and scares teachers and administrators. The researcher points out that Russian educators are accustomed to a top-down approach in which any reform of the education system required immediate transition to a new track for which a complete package of documents was provided. Such “administrative grip” seems convenient as it exonerates the doers from personal responsibility and requires no creative effort [12, p. 4]. A clear crisis of the management strategy in the modern education system pointed out by V.I. Zagvyazinsky, E.D. Dneprov N.V. Pernai and other researchers of the philosophy and politics in education, will in the end, we believe, weaken the administrative pressure, “democratize” the education system focusing on the right of any teacher to freely choose methods and technologies of instruction. (N.7, Art.3 of the Federal Law “On education in the Russian Federation”), will allow to rethink the essence of educational activities in accordance with the possibilities hidden in the professional standard “Educator”, the federal state educational standards and other framework documents declaring the priority of personal development as the main goal of education, importance of the direction towards the individualization of education, possibility to provide various forms of education, educational content, methods and technologies to implement them.

4. Development of teacher’s readiness to individualize education, take a tutor approach with regard to creating a culture of healthy and safe lifestyle of students and pupils

We can say that the teaching corps in Russia is not adjusted to meet the educational needs of every child: the one with disabilities (according to the World Health Organization, the rate of childhood disability in developed countries is 250 cases per ten thousand and there is a clear increasing tendency [1, p. 13]), disadapted (according to various sources, they make from 10 to 40 %), gifted (also with specific educational needs), etc. The teachers’ training system is aimed to prepare a teacher, an educator to work with a common kid (an average one, although the statistics shows a significant increase of children requiring differentiated student-centred instruction). An individual approach should be implemented not only when their learning trajectory is built, but also when the resources for health preservation conditions (anyway scarce) are provided. The approach also should be implemented along children’s educational path, particularly in the area of creating a culture of healthy and safe lifestyle. In relation to this teacher activity we described the phenomenon of “tutor position of a teacher”, that sees each student as an individual and makes its pedagogical mission to develop the individual and fully assist the child to maximize his/her potential taking into account social, cultural and other conditions of his/her life [8, p. 103]. Naturally, the way we talk about health should be adapted for normally developed children and children with disabilities. There are radically different methods, forms and content to prevent the addictive behaviour for children who do not have addictions and disadvantaged or dysfunctional students. Although that seems obvious, in reality the opposite is true - and largely because of the teachers’ unwillingness to take individual approach in this area of educational practice and the differentiation in the methods and content of educational interaction with students.
5. Development of health-oriented personal position within educators’ community

As studies of V.V. Kolbanov, N.V. Kiseleva and N.N. Nezhkina, N.N. Malarchuk et al., show, the students’ health is closely related to the health of the educators’ working with them. At the same time we must note that educators estimate their health condition as poor and do not seem to understand how impactful is their lifestyle [6, p. 11].

6. Updating the methods and the organizational forms to develop teachers’ professional competence (both in the secondary and higher education, and in the organizations of additional education)

The data from the surveys and questionnaires collected over a 10-year period from the educators - participants in the training courses we organized shows that the system of additional vocational training lacks content flexibility, convenient logistics, is not client-oriented nor benefits participants’ health and as a rule, requires considerable physical and emotional efforts after a busy work day [7, pp. 43-44]. However, the provision of professional development documents is one of the accreditation requirements and also the requirement to get professional teacher certification. This forces the education professionals, despite the limited time and energy resources, to use existing training opportunities (mainly financed from the budget of employer or municipal education authorities) to get a document in a timely manner as a matter of formality, but not for the real professional development. It is possible to solve the identified problems due to the new guidelines in the system of vocational education in the field of health-oriented activities. They can be described as follows.

Firstly, the problem of motivating teachers to deliver health-oriented activities is actively researched (see the publications of E.A. Bogacheva, V.I. Zagvyazinskii, V.I. Irkhin, P.A. Kislyakov, M.G. Kolesnikov, V.V. Kolbanov, L.M. Mitina, N.N. Malarchuk, T.F. Orekhova, N. V. Tretyakova, Z.I. Tyumaseva etc.). The authors argue that if the educator sees the value in the students’ health, he/ she is aware of the connection between students’ health and their academic success and s/he strives to make the student’s stay in the educational organization as comfortable as possible, smoothing out the existing risk factors, such attitude stimulates the teacher or the educator to seek solutions to preserve and promote the health of students and pupils, contribute to the fact that the principle of the health-centrism (Irkhin, 1996) becomes one of the fundamental in the professional activity.

Secondly, the content of the training is revised and supplemented in accordance with the transformational strategy developed out of practice in educational institutions. The strategy is aimed at developing students’ personal resources trying to transform the teacher’s practice of taking care of students’ health to the students’ practice of taking care of their health independently.

Thirdly, the distance learning technologies in vocational education and training have been implemented at the state level (see “Guidelines for the implementation of additional professional programs using distance learning technologies, e-learning and a network form”, the letter from the Ministry of Education of Russia 04.21.2015 №VK-1013/06), which will certainly make it more convenient for the teaching staff to develop professionally, saving time and effort to select training programs not out of logistic convenience but based on the real demand for certain knowledge. In addition, the technologies of face-to-face courses in the vocational training system are also being revised to reflect the priorities of the action-oriented approach: the health-oriented training programs give more significance to the various forms of active training (workshops, role-playing, discussions, projects, etc.), educational workshops, supervision, problem seminars, etc. [9, p. 208].

These positive changes, in our opinion, contribute to the modernization of health-oriented vocational training and lead to the emergence of good practices in this area, one of which is, according to the participants of training, the organization of the National training courses to prepare the healthy lifestyle tutors (a project of the Ministry of Education and Science of the Russian Federation, the executor of the project - the Russian Peoples’ Friendship University) in the framework of the federal target program for education development in 2011-2015. The emergence of other similar practices is predictable based on the synergy law where a large amount of a certain type of information transforms in a different quality of activity organization. The development of the described processes can solve the challenges outlined in this article.
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REFERENCES:


