Investigation on The Current Situation of Health
Education Policy Implementation and Research on
Development Countermeasures

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Abstract: According to my country's "Health Education and Health Promotion Work Plan Outline", health education is a planned, organized and systematic social education activity, so that people can consciously adopt behaviors and lifestyles that are beneficial to health, and eliminate or reduce the impact of health risk factors, disease prevention, health promotion, quality of life, and evaluation of educational outcomes. The core of health education is to educate people to establish health awareness, to urge people to change unhealthy behaviors and lifestyles, and to develop good behaviors and lifestyles to reduce or eliminate risk factors that affect health. Health education should start from primary school, and different depths of health education and education courses should be offered in different school stages, so that students can form a complete social person with physical health, sound personality and mental health, and they are all-round development workers. This paper analyzes the implementation of health education in universities, middle and primary schools through the method of literature, finds out its existing problems, and puts forward countermeasures and suggestions to provide a theoretical basis for improving school health education.

Keywords: Health education, Health concept, Implementation status, Large, Middle and primary schools.

1. Introduction

Schools are places for cultivating talents for society and the country. To achieve the goal of a healthy development strategy, it is necessary to ensure that school physical education courses and health education are integrated and developed. Health contributes to the all-round development of individuals and the economic development of society. Therefore, it is necessary to add health education to the important content of quality education in the education stage, and it should also be incorporated into the national education system. Health education in primary and secondary schools is a purposeful and planned systematic education activity targeting students' characteristics and health needs. The purpose is to cultivate students' health awareness and concepts, master health knowledge and skills, and form healthy behaviors and lifestyles. Behavioral students transition to healthy behaviors and healthy lifestyles [1]. On the surface, although the "Guiding Outline of Health Education for Primary and Secondary Schools" proposes the importance of school physical education courses to school health education, from a deep perspective, the public still has a one-sided understanding of the integration of health and physical education, which leads to the confusion between health and physical education. Combined with various problems at the practical level, this paper mainly discusses how to promote the integration of health and sports, so as to improve students' health concept, and finally achieve the purpose of enhancing students' physique and health.

2. Current Status of Domestic School Health Education Research

Zhang Yiyi found through research that although most primary and secondary schools in my country currently offer health education courses, since 2002, the Ministry of Education has stipulated that health education can no longer be regarded as an independent course, but the traditional "sports" course has been renamed For "sports and health", since then the reform direction of school sports in our country has become sports and health, but the actual situation is not satisfactory. Under the guiding ideology of "health first" and the combination of sports and health, most The school believes that the health education class is the physical education class, and tries to combine the physical education class and the health education class into a comprehensive course, and the health education is classified into the physical education teaching, and the role of physical education in the health education is exaggerated [2].

2.1. Investigation on the Implementation of Health Education in Primary Schools

Liu Ruilan believes that we should focus on cultivating students' health awareness. Teachers need to organize primary school students to carry out health education activities suitable for their physical and mental development, which will make it more effective. In the activities, pay attention to correct the incompatible behaviors and habits of students such as hygiene and disease prevention. The fundamental measure to solve school health education is to have professional personnel, training measures, activity venues, etc., which are important guarantees for improving people's health. Sun Liu, Xiao Qian and others conducted a survey on the development of health education in primary schools in Fengtai District, Beijing, and the results showed that 71.0% of primary school students wanted to offer health education classes, while only 29.0% felt that it was irrelevant; 53.3% of the primary school students were satisfied with the teaching effect of the health education courses offered by the school [4].

2.2. Investigation on the Implementation of Health Education in Middle Schools

In 1992, the "Basic Requirements for Health Education in
Primary and Secondary Schools” was released, which clearly stipulated the content that primary school health education should include. There are eight contents: first, knowledge related to human anatomy, second, health habits, third, mental health, and fourth. It is the health of the sports environment, the fifth is to have reasonable nutrition, the sixth is to pay attention to physical exercise, the seventh is to prevent common diseases, and the eighth is to prevent accidents and protect your own safety [5]. The current health education situation in primary and secondary schools in my country is not ideal, especially the lack of a large number of professional physical education teachers, which cannot meet the needs of students. Therefore, she believes that in order to improve the quality of students in an all-round way, it is necessary to increase the training of teachers on the basis of popularizing school health education, and improve the teaching ability of teachers.

2.3. Investigation on the Implementation of University Health Education
Yang Tiefan, Dong Guilan, etc. conducted a questionnaire survey on 500 college students in a university and pointed out that 88.4% of them believed that the establishment of health education was very necessary, 9% of the students believed that the establishment of this course was not important, and only 2.6% People felt that there was no need for a health education course. In addition, the survey team found that satisfied and very satisfied account for a large proportion, about 80%, and the number of dissatisfied and very dissatisfied people is relatively small, about 20% [6]. Most students think that courses related to health education should be carried out in schools, but many college students have taken health education courses, which shows that the "supply" and "demand" of health education in colleges and universities have not been balanced. difference.

3. Problems Existing in The Implementation of Domestic Health Education

3.1. Problems Existing in The Implementation of Primary School Health Education
Kong Chong and Pingjie pointed out through research that in the implementation of health education in primary schools, teachers lacked practical and targeted guidance and help for students. This defect can easily lead to a deviation in the cognition of primary school students in health education, which leads to the fact that primary school students have nothing to do with health education activities. Improving primary school students' health awareness and living habits needs to be strengthened [7]. The resources of school physical education teachers are in short supply, which leads to the serious problem of exceeding the standard of physical education teachers' workload. The content of the health education curriculum in primary schools is not novel enough, and it is difficult to stimulate students' interest in the curriculum. Students' high academic pressure leads to reluctance to spend more time in physical education and health courses.

3.2. Problems Existing in The Implementation of Middle School Health Education
Through research, Ma Cuizhen pointed out that the problems of middle school health education mainly include two aspects. First, teachers have problems with their teaching attitudes. Most of them are passive teaching methods, which are not conducive to exerting students' subjective initiative. Second, schools On the one hand, the development of the curriculum system for health education is not perfect, there is no organized lesson plan, and the lesson plan is unreasonable [8]. The current health education in middle schools is not satisfactory. Although on the surface, both school leaders, teachers, students and parents are in favor of carrying out health education in middle schools, but from a deeper level, their thinking needs to be further improved. There are many problems in the school curriculum. One is that the curriculum is not standardized.

3.3. Problems Existing in The Implementation of University Health Education
Xu Xiaozong and Xu Xu pointed out through surveys of local colleges and universities that many colleges and universities have not fully integrated health education into their school teaching plans. Although some online courses have been opened, the number of students taking electives is too small; The problem. The health education publicity is not perfect, the functional departments in the school lack overall cooperation, the participation of students is low, and the publicity effect is not ideal. School health education teachers are weak, and the scientific research level of teacher health education is low, and there has not been a true development model of teaching and scientific research, and scientific research to promote teaching. Health education protection measures are not in place. There is a big gap from a sound and perfect health education model in terms of awareness level, funding investment, and teacher construction [9]. As far as the educational practice of college students in my country is concerned, although the relevant policies and systems have also put forward other goals, the characteristics of the model limited to the goal of health knowledge transfer are still prominent. At present, most colleges and universities in our country have a single mode of action for the main body of education and lack of linkage; the form of health knowledge information transmission is single, and the interaction and participation are insufficient; the standardization of education is insufficient, and the teaching arrangement is arbitrary.

4. Recommendations for the Implementation of Domestic Health Education

4.1. Recommendations for the Implementation of Health Education in Primary Schools
Li Guohua pointed out through research that it is necessary to correctly understand the importance of health education and actively promote the development of health education. School leaders should pay attention to students' health education, so that students can grow up healthily in primary school and set healthy teaching goals. Teachers should strive to explore new teaching modes to stimulate students' interest. To combine theoretical knowledge with practice, it is convenient for students to experience [10]. Health education in primary schools should focus on exerting students' subjective initiative, be student-centered, and create a free and active classroom atmosphere for students. Li Minggeng believes that to attach importance to the development of
school health education, it is necessary to strengthen the team of physical education teachers, formulate a scientific evaluation system, and the coordination between schools and families is also very important.

4.2. Recommendations for the Implementation of Health Education in Secondary Schools

Peng Liping believed that in order to further strengthen the health education of Huaihua Senior High School, the education administration and relevant departments should establish and improve various management systems, and scientifically select teaching content according to students' physical and mental development and actual health needs. Teaching methods should be flexible, for teachers, it is necessary to increase the training of teachers, strengthen the construction of teaching staff, and establish and improve the evaluation system of school health education [11]. The author believes that teachers should fully develop the various functions of health education, implement quality education, focus on the all-round development of students, and make simple revisions on this basis; To establish a good health awareness. For the school level, intensify efforts to conduct in-depth investigations on teaching content, forms, methods, means, evaluation feedback, etc.

4.3. Recommendations for the Implementation of University Health Education

Fan Jiayin and Xiaochen believe that school leaders should pay more attention to health education. Contemporary college students have strong personalities and strong sense of autonomy. They not only have high requirements for health knowledge acquisition methods and education forms, but also demand for health education knowledge with the development of the times. Constantly changing, health education should be in line with students' personalities. Create a strong atmosphere of healthy life and healthy behavior on campus, so that college students can consciously and autonomously change bad habits to improve their own health. Online education is the best form of university health education. Universities should make full use of network technology to spread healthy knowledge, means and methods to college students through the Internet as an effective way [12]. Intrinsic motivation stimulates equal emphasis on the concept of integrated development; and builds an efficient and sound health management system, explores individualized health promotion intervention plans, focuses on the implementation of interventions for students' self-initiated participation awareness and ability training, strengthens the professional ability development of health education teachers, and improves school health education environment and other optimization strategies.

References