

A Performance Task Application for the Development of Elementary School Students' Perception of Hygiene and Being Healthy

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ABSTRACT In the present study, the purpose is to determine the effects of performance tasks for the topic of "hygiene and being healthy" on elementary school 4th graders' opinions about and attitudes towards the value of "hygiene and being healthy". The study employed a mixed method using both quantitative and qualitative research models. The experimental group consists of 24 and the control group consists of 23 students. The data was collected through hygiene attitude scale and being healthy attitude scale and a feelings and opinions form. In the analysis of the quantitative data, Mann-Whitney U test and in the analysis of the qualitative data descriptive analysis method were used. As a result of the quantitative analysis, it was found that there is a significant difference in hygiene value ($U=66.500$, $p<.05$), and being healthy value ($U=42.000$, $p<.05$) favoring the experimental group. As a result of the qualitative analysis, one can argue that the experimental group students displayed positive attitudes and behaviors throughout the hygiene and being healthy performance task and they will continue their hygiene and being healthy efforts after the completion of the performance task.

INTRODUCTION

As a result of decreasing natural resources and increasing environmental destruction, people are faced with problems in having access to clean water resources and living in a healthy environment. Without considering their effects on human health, wastes from factories are dumped into environment and technological advancements and scientific knowledge generated for the benefit of humans can be used in such a way as to harm people by people lacking ethical values. However, hygiene is one of the most prominent factors to be considered for human health. When the elements posing threats to human health are investigated, it is sometimes observed that unhealthy conditions and dirty foods may have adverse effects. However, when the necessary care is taken to be clean, the germs coming into the body may not be harmful. Moreover, it is well known that some contagious diseases spread more quickly in unclean and unhygienic environments. Every country aims to have a healthy generation, and hence, the first step to be taken should be to inform individuals about healthy issues and to help them adopt proper behaviors and attitudes to protect their health (Bulut 2003; COM 2003; Doganay 2007: 257; Kolukisa et al. 2005: 187).

Today's conception of health requires the protection, maintenance and improvement of the health of family and society, preventive measures and emphasis on prevention rather than treatment. Moreover, an individual's perception of his/her health, current health status and health problems is of great importance for him/her to adopt correct behaviors and make correct decisions related to his/her health. Therefore, it seems to be necessary to improve people's knowledge, opinions and value judgments for them to protect and boost their health. The most important means of doing this is health education. Health education is a long process initiated in the family by parents and continued at school by teachers and reinforced by the encounters with doctors and nurses and enhanced by books and publications. At the same time, health education together with issues such as student health, school environment and health of school staff make up the basic components of school health services. Behaviors gained through health education have positive influences on families and society and accordingly, through the education of students, positive influences can be created on the health of society (Aktürk 2005; Önal et al. 2008; Saltık 2004; Simsek 2010).

The most important and critical period of education is elementary education, and hence, great efforts should be made to provide the most effective health education for elementary school students and in this regard, the most important role should be assumed by elementary school classroom teachers (Eraslan 2011:19). If the value of hygiene and being healthy is understood by elementary school children, then the problem may be minimized. Rowe (2004) argues that the qualities and values of the teacher are directly connected with the quality of the education given in a teaching environment. Values can be regarded to be motives directing behaviors. They can also be defined as criteria resorted to evaluate different people, their characteristics, desires, intentions and behaviors (Çubukçu et al. 2012: 27; Güzel Candan and Ergen 2014: 136). "Recognizing the values related to hygiene and health, improving living styles and skills such as conducting self-evaluations are of great importance" (Güler Öztürk and Hazır Bikmaz 2007: 220). In this regard, health education should aim to find the behaviors affecting the individual and society negatively and educational reasons lying on their ground and then change them into positive behaviors (Yilmaz 2007). There are different definitions of values in the literature. Values are behavioral patterns directing people's actions and providing guidance. They are the unity of directly consistent and related principles. Therefore, the values directly influence value judgments and personal characteristics of people. Values teach respect and are directly related to human rights (McGettrick 1995; Nesbitt and Henderson 2003; Schwartz 1994; Yildiz and Dılmaç 2012: 124).

People teach the values and beliefs they learn to people around. They demonstrate these values and beliefs through their behaviors. In teaching of values and ethics, primary responsibility should be assumed by parents and then by the school (Coombs-Richardson and Tolson 2005). Teachers, parents and other stakeholders invest efforts for value education to be given properly in the school environment and oversee the efficiency of the education given (Australian Government Department of Education, Science and Training 2005: 7). Teachers should address up to date, national and international issues in their courses and raise their students' awareness of these issues. In this way, students can learn their rights and responsibilities in their

society (Lintner 2006: 101). Though the family plays the most important role in adaptation of values, the responsibility of teaching values cannot be left on the shoulder of the family. While some families may not be sensitive and responsible enough, some others may impart bad behaviors to their children (Yazici and Aslan 2011). In this respect, as long time is spent at elementary and secondary school during childhood and adolescence, great care should be taken by education sector and particularly by schools for the protection and development of children and adolescents' health and wellbeing (Bulut et al. 2002).

Schools are value-based organizations and effectiveness of values at these organizations is closely linked with the reliability of values. As a result of effective sharing of these values with the society, schools can get the support of the society. In this regard, schools should be able to affect the values, habits and social behaviors of new generations (Smith 2001). Value training programs should be developed to be implemented in all schools and in this way, students should be introduced to basic values having important place in children's lives. The people explaining the content of such value training programs, implementing them and assuming the main responsibility are teachers. Hence, teachers are the most important role models around the child and they must present their positive values to children for the value training to be effective (Arweck and Eleanor 2003: 245; Haydon 2004: 116).

In recent years, values have been losing their importance in the society, hence parents and educators should strive hard to impart values to children. Teaching values is as important as teaching school subjects such as mathematics and science. Formation of the character and values starts to occur in early childhood period. In this connection, schools should take as much responsibility as families. The value training given at school is of special importance to build a healthy society (Bridge 2003: xii). Hossain and Marinova (2004) argue that the important point in value education is maintenance of values and consistency in application so that students can internalize them. For the values of hygiene and being healthy to be internalized by students, they should be imparted to students starting from early ages. To do so, schools should conduct functional values education. Besides teachers, great care should be taken by parents for

students to internalize the values of hygiene and being healthy, and hence, both teachers and parents need to be good role models in relation to demonstration of these values.

In the present study, students were assigned with performance tasks and then evaluated so that they could gain positive attitudes and behaviors towards the values of hygiene and being healthy and feel their importance for human health. The aim of a performance task, according to MEB (2007) and Özçelik (1998) is to encourage students to improve their cognitive, affective and psychomotor skills such as critical thinking, problem solving, creativity, reading comprehension, inquiry and communication. The emphasis should be on what students have gained rather than what they have not gained and more importance should be attached to process than result. On the other hand, according to Zmbicki (2007) or Aldakhlallah and Parante (2002), performance evaluation prepares students for life outside the class and provides students with opportunities to use their problem solving skills and at the end of a specific time, reveals positive and negative sides of skills and encourages students to think more about real life applications. Therefore, in the present study, it was believed that the performance tasks assigned would help students develop positive attitudes and behaviors towards the values of hygiene and being healthy. In this regard, the purpose of the present study is to determine the effect of performance tasks on students' opinions about and attitudes towards the values of hygiene and being healthy.

Purpose of the Study

The purpose of the study is to determine the effects of performance tasks for the topic of "hygiene and being healthy" taught in social studies class on elementary school 4th graders' opinions about and attitudes towards the value of "hygiene and being healthy". For this purpose, the answers to the following questions have been sought:

1. Is there a significant difference between the attitudes of the experimental group students who were assigned performance task in elementary school social studies class and the attitudes of the control group students who were not assigned the task towards the values of hygiene and being

healthy in favor of the experimental group students?

2. What are the opinions of the experimental group students who completed the performance task assigned in relation to the values of hygiene and being healthy in elementary school social studies class?

MATERIAL AND METHODS

Research Model

As in the present study, qualitative and quantitative data collection methods were used together, and it was designed in compliance with mixed method techniques. In the present study, the performance task related to "hygiene and being healthy" was only assigned to the experimental group and no performance task related to "hygiene and being healthy" was assigned to the control group. In the qualitative part of the study, the data consists of the students' responses to the questions in "Our Feeling and Opinions" form filled after the completion of the performance task given in the social studies course in relation to the topic of hygiene and being healthy. In the quantitative part of the study, the data was collected through pretest-posttest control experimental application to reveal the difference between the attitudes of the experimental group students completing the performance task and the control group students not completing any performance task on the topic of hygiene and being healthy. In this model, two groups were formed as experimental and control groups. Both, the experimental group and the control group were administered pre-test before the application and post-test after the application.

Study Group

The present study was conducted with the participation of 23 students from 4/a class and 24 students from 4/b class, totally 47 elementary school 4th grade students attending a state elementary school in Kirsehir in the 2012-2013 school year. In the study, 4/a class (12 girls and 11 boys) was assigned as the control group and 4/b class (13 girls and 11 boys) was assigned as the experimental group. While determining the experimental and control groups, great care was taken for them to be equal. For this purpose, the

pre-test results of hygiene and being healthy attitude scale were evaluated, the classes' achievement levels of the former year were compared and economic status and educational status of the families were investigated. As a result, it is possible to say that the groups are almost at the same level and have similar characteristics.

Throughout the application, first hygiene and being healthy attitude scale was administered to both the experimental and the control groups as pretest. Then, the performance task related to hygiene and being healthy was assigned to the experimental group. The performance task lasted for four weeks. After the completion of the performance task, the students were asked to fill in the form of "our feelings and opinions". The details of the performance tasks are given in Appendix 1 and the form of "our feelings and opinions" is given in Appendix 2. The application was conducted for 6 weeks. The first four weeks were spared for the students to complete the performance task, and the remaining two-week time was spent on reporting of the works performed and filling in the form of "our feelings and opinions" (Appendix 2). No performance task was assigned to the control group and normal content was taught by their classroom teacher. Hygiene and being healthy post-test scale was administered to the groups at the same time.

Data Collection Instruments

In the present study, qualitative and quantitative data collection tools have been used. The quantitative data collection tool is the hygiene and being healthy scale developed by Tahiroglu (2011). The qualitative data collection tools are the form of "our feelings and opinions" (Appendix 2) and student reports written to reveal the works done by the experimental students after the completion of the performance task. While developing Appendix 1 and Appendix 2, the format designed by Tahiroglu (2013) was used but the content was developed by the researcher.

Hygiene Attitude Scale and Being Healthy Attitude Scale

In the present study, the "Hygiene Attitude Scale" and "Being Healthy Attitude Scale" were developed for elementary school fourth grade students to elicit their attitudes towards the value of "hygiene and being healthy". This scale

was originally developed by Tahiroglu (2011). The researcher reports that the explained variance of the hygiene scale having seven factors was measured as 53.3 percent from the data collected from 187 respondents replied the 24-item-form of the initial instrument draft. The reliability co-efficient was found to be .75. The final version of the scale includes 17 items reflecting 4 factors. On the other hand, the researcher points out that the explained variance of the being healthy scale having fifteen factors was measured as 62.3 percent from the data collected from 223 respondents replied the 40-item-form of the initial instrument draft. The reliability co-efficient was found out as .72. The final version of the scale includes 25 items reflecting 7 factors. The items of the scales were scored as follows: "Strongly Agree (5), Agree (4), Moderately Agree (3), Disagree (2), Strongly Disagree (1)".

Our Feelings and Opinions Form

The "Our Feelings and Opinions" form was developed for students to perform some activities to better understand the values of hygiene and being healthy. The purpose for the administration of this form is to elicit the students' responses to questions such as, how did they acquire their hygiene-related habits, if they have any, what is the importance of being clean, what are the physical activities to be done to be healthy and issues to be considered to be healthy? The students completing the performance task were asked to fill the "Our feelings and opinions" form on a voluntary basis without writing their names. These reports were collected to reveal what kind of works was done during the completion of the performance task by the experimental group students. The students were told that they would be able to submit their reports to their teacher at their convenience. This was told to make students feel relaxed. At the end, all the students returned their forms fully completed.

Data Analysis

Analysis of Qualitative Data

In the analysis of the collected qualitative data, descriptive analysis method was employed. The analysis was conducted in compliance with the principles and rules of descriptive analysis

method. In light of the data collected through the “Our feelings and opinions” form filled to reflect the works done by the experimental group students after the completion of the performance task, the analysis of the qualitative data was performed. By analyzing the data collected from the experimental group students during the application process, a framework was established and it was determined under which themes the data would be organized. Then, responses to each question in the form of “our feelings and opinions” were analyzed and they were collected under the related items. As a result of this process, a framework was established and the data was coded and then ordered. This was finally followed by the process of definition, arrangement and enumeration of the data. The data was analyzed after it was simplified and made more comprehensible. When necessary, the participants’ responses are given directly as quotations without changing anything. In the presentation of these quotations, coding method was used and codes such as Participant 1 (P1), Participant 2 (P2) and so on, were created.

Analysis of the Quantitative Data

In the present study, Mann-Whitney U test was used to compare the pretest and posttest scores of the experimental and control groups. The significance level was set to be .05. At this point of the study, since both of the instruments were designed to measure the students’ attitudes toward the values regarding being healthy and clean, the scales were undergone to the statistical analysis as having a single dimension. The data was analyzed through SPSS program package.

FINDINGS

Findings Concerning the Control and Experimental Group Students’ Attitudes towards the Value of Hygiene and Being Healthy

In order to find an answer to the question, “*Is there a significant difference between the attitudes of the experimental group students who were assigned performance task in elementary school social studies class and the attitudes of the control group students who were not assigned the task towards the values of hygiene and being healthy in favor of the experimental group students?*” the “hygiene attitude scale” and “being healthy attitude scale” were administered to the experimental group and the control group students as a pretest and posttest at the same time. The pretest scores of the experimental and control groups taken from the hygiene attitude scale are presented in Table 1 and their posttest scores are presented in Table 2.

When Table 1 is examined, it is seen that when the pretest scores of the control group and experimental group students taken from “Hygiene Attitude Scale” were tested with Mann-Whitney U test, there is no significant difference ($U=66.500$, $p>.05$). This shows that there is no significant difference between the groups. Hence, it can be claimed that before the experimental application, the attitudes of both groups towards the value of hygiene are similar. In the next step of the study, the hygiene and being healthy performance task was assigned to the experimental group students and the control group was taught according to the normal

Table 1: Findings concerning the pretest attitude scores taken from the hygiene attitude scale by the experimental and control group students

<i>Group</i>	<i>N</i>	<i>Mean ranks</i>	<i>Sum of ranks</i>	<i>U</i>	<i>p</i>
Experimental	24	12.70	272.50	66.500	.430
Control	23	13.20	305.00		

Table 2: Findings related to the posttest scores of the experimental and control groups’ students taken from hygiene attitude scale

<i>Group</i>	<i>N</i>	<i>Mean ranks</i>	<i>Sum of ranks</i>	<i>U</i>	<i>p</i>
Experimental	24	20.00	493.00	66.500	.024*
Control	23	13.50	330.00		

$p<0.05^*$

curriculum. Then, the effects of these two different instructions on the experimental and control group students' attitudes towards hygiene and being healthy were tested simultaneously and whether there was a significant difference between the posttest scores of the two groups was investigated. The findings related to the posttest scores of the two groups taken from hygiene attitude scale are presented in Table 2.

When Table 2 is examined, it is seen that the experimental group students as a result of Mann-Whitney U test conducted on the posttest scores taken from the hygiene attitude scale, the Mann-Whitney U test value was found to be $U=66.500$, $p<0.05$. This shows that there is a significant difference between the attitudes of the experimental group assigned the performance task and the attitudes of the control group not assigned the performance task towards the value of hygiene in favor of the experimental group. At the same time, this finding indicates that the performance task had positive effects on students' attitudes towards hygiene. The pretest scores taken by the experimental group and control group from the scale of attitudes towards being healthy are presented in Table 3 and posttest scores are presented in Table 4.

As can be seen in Table 3, when the pretest scores of the experimental group and control group students taken from the "Being Healthy Attitude Scale" were tested through Mann-Whitney U test, the value was found to be $U=42.000$, $p>0.05$. This shows that there is no significant difference between the groups. Before the application, the groups' attitudes towards the value of being healthy seem to be similar.

In the following stage of the study, hygiene and being healthy performance task was assigned to the experimental group and the control group was taught in line with the normal curriculum. Then, the effects of these two different applications on the experimental group and control group students' attitudes towards the value of hygiene and being healthy were simultaneously tested and whether there is a significant difference between the posttest scores of the groups was investigated. The findings concerning the posttest scores of the experimental and control groups taken from the being healthy attitude scale are presented in Table 4.

As can be seen in Table 4, when the posttest scores of the experimental group and control group students taken from the "Being Healthy Attitude Scale" were tested through Mann-Whitney U test, the value was found to be $U=42.000$, $p<0.05$. This shows that there is a significant difference between the attitudes of the experimental group assigned the performance task and the attitudes of the control group not assigned the performance task towards the value of being healthy in favor of the experimental group. At the same time, this finding indicates that the performance task had positive effects on students' attitudes towards being healthy.

Findings Concerning the Students' Opinions about the Values of Hygiene and Being Healthy after the Completion of the Performance Task

In order to find an answer to the question, "What are the opinions of the experimental group students who completed the performance

Table 3: Findings related to pretest attitude scores taken by the experimental and control group students from the scale of being healthy

Group	N	Mean ranks	Sum of ranks	U	p
Experimental	24	12.10	450.00	42.000	.589
Control	23	11.80	371.00		

Table 4: Findings concerning the posttest attitude scores of the experimental and control groups taken from the being healthy attitude scale

Group	N	Mean ranks	Sum of ranks	U	p
Experimental	24	22.50	884.00	42.000	.017*
Control	23	12.50	476.00		

$p<0.05^*$

task assigned in relation to the values of hygiene and being healthy in elementary school social studies class?" data was collected through the form of "our feelings and opinions" by administering it to the experimental group students. The collected data was descriptively analyzed and the results of the analysis are presented below.

Findings Related to Students' Acquisition of Hygiene-related Habits

Frequencies and percentages of the experimental group students' responses given to the question, "How did you acquire your hygiene-related habits? What did you do for this? Please, write." in the form of "our feelings and opinions" are presented in Table 5.

Table 5: Distribution of the students' statements related to hygiene-related habits

<i>Students' statements related to hygiene-related habits</i>	<i>f</i>
Total number of students	24
Before and after meals, I wash my hands with soap	24
I brush my teeth twice every day	22
I have a bath at least twice of three times every week	21
I wash my hands and face when I get up	24
I cut and clean my nails every week	17
I keep my clothes clean	20
I keep my room clean	22
I keep away from dirty and filthy places	17

As can be seen in Table 5, all the students wash their hands before and after meals with soap, and wash their hands and face when they get up. Nearly ninety-two percent of the students brush their teeth twice a day, keep their rooms clean, about eighty-eight percent of them have a bath at least twice or three times in a week, nearly eighty-three percent keep their clothes clean and nearly seventy-one cut and clean their nails every week, and keep away from dirty and filthy places. Some of the students' statements are given below:

K4: "1. When I get up, I wash my hands and face. 2. Before and after meals, I wash my hands. 3. I have a bath three times in a week, 4. I clean my room, 5. I cut and clean my nails 6. I brush my teeth in the mornings and in the evenings. 7. I keep my clothes clean."

K20: "After reading the instructions, I paid greater attention to my hygiene, I have a bath two or three times, I wash my hands before and after every meal, I cut regularly cut my nails, I wash my hands and face in the morning, I wear clean clothes and try to keep them clean."

As it is clear from these findings, most of the experimental group students who were assigned the performance task try to acquire personal and environmental hygiene behaviors. Based on their statements, it can be argued that the students have positive opinions about the value of hygiene.

Findings Related to What Students Do for Healthy Nutrition

Frequencies and percentages of the responses given to the question, "What do you do for healthy nutrition?" in the form of "our feelings and opinions" are presented in Table 6.

Table 6: Distribution of the students' statements about what they do for healthy nutrition

<i>Students' statements about what they do for healthy nutrition</i>	<i>f</i>
Total number of students	24
I pay attention for fruit and vegetables I eat to be fresh	17
I pay attention for the food I eat not be too hot or too cold	9
I eat all the foods without discriminating any of them and I take care to eat enough for my diet to be balanced	14
I pay attention to not to eat foods with too much or too little salt	2
I eat fruit everyday for my diet to be healthy	17

As can be seen in Table 6, nearly seventy-one percent of the students stated that they pay attention for fruit and vegetables to be fresh and eat fruit every day. About fifty-eight percent of the students try to eat all types of foods without discriminating and they try to eat all types of foods in a balanced way and nearly thirty-eight percent pay attention not to eat too hot or cold foods. Some statements of students about healthy eating are given below:

K10: "Before completing the performance task, I used to discriminate among foods but now I try to eat every type of food and I try to eat every meal cooked by my mother. I have just realized the importance of fruit for health; hence, I try to eat every day."

K21: “When stale foods are eaten, they may make people ill; thus, great attention should be paid for foods to be fresh.”

As can be understood from the above-given findings, as a result of the completion of the performance task, majority of the experimental group students developed positive opinions about healthy eating such as paying attention for foods to be fresh, eating fruit every day and trying to consume every type of food without discriminating and trying to eat in a balanced manner by consuming every type of food. In this regard, it can be argued that the performance task results in developing positive opinions about healthy eating.

Findings Related to What the Students Consider While Purchasing Goods

Frequencies and percentages of the responses given to the question, “What do you consider while purchasing goods?” in the form of “our feelings and opinions” are presented in Table 7.

Table 7: Distribution of the students’ statements about what they consider while purchasing goods

<i>Students’ statements about what they consider while purchasing goods</i>	<i>f</i>
Total number of students	24
I never buy medicine from the chemist’s without a prescription from the doctor	5
Before purchasing any good, I look at its guarantee certificate, whether there is the TSE sign on it	19
I check the expiry date of the goods I buy	22
I take care not to buy goods with opened package but with closed package	17

As can be seen in Table 7, nearly ninety-two percent of the students check the expiry date of the goods they buy, about seventy-nine percent check whether there is guarantee certificate of the product on it or not, and nearly seventy-one percent of the students find it important not to buy goods with opened packaging. Some of the students’ statements about what they consider while purchasing goods to protect their health are given below:

K5: “I check whether there is a guarantee certificate of the product (that is, TSE label on it), its expiry date, and also whether it is sold in a closed package.”

K14: “When I was ill, I went to the doctor, and he wrote a prescription and bought the medicine from the chemist’s. While I am buying chocolate or fruit juice, I check their guarantee certificate and its expiry data.”

As can be understood from these findings, most of the experimental group students given the performance task consider some factors while purchasing goods to protect their health.

Findings Related to What the Students Pay Attention for Healthy and Clean Dressing

Frequencies and percentages of the responses given to the question, “What do you pay attention for healthy and clean dressing?” in the form of “our feelings and opinions” are presented in Table 8.

Table 8: Distribution of the students’ statements about what they pay attention for healthy and clean dressing

<i>Students’ statements about what they pay attention for healthy and clean dressing</i>	<i>f</i>
Total number of students	24
I try to keep my clothes neat and clean	21
I try to wear clothes suitable for the season	20
I try to purchase clothes according to my size	17
I pay great attention not to wear torn clothes	5
I try to wear thin clothes in summer and thick clothes in winter	11
I try to avoid wearing too tight or too loose clothes	4

As can be seen in Table 8, nearly eighty-eight percent of the students stated that they try to keep their clothes neat and clean, about eighty-three percent of the students try to wear clothes suitable for the season, nearly seventy-one percent of them take care that the clothes are suitable for their size, and nearly forty-six percent try to wear thin clothes in summer and thick clothes in winter. Some of the students’ statements about what they pay attention for healthy and clean dressing are given below:

K2: “I try to keep my clothes clean. I wear clothes suitable for the season. In summer, I try to wear thin clothes and in winter I try to wear thick clothes.”

K9: “In the past, I used to make my clothes dirty, but now I pay greater attention to keep them clean, I wear my winter clothes in winter and summer clothes in summer. The clothes I

wear should be suitable for my size, they should not be either too tight or too narrow.”

From the findings reported above, most of the students having completed their performance task take great care to wear clean clothes to be healthy.

Findings Related to What the Students Do for Their Eye Health

Frequencies and percentages of the responses given to the question, “*What do you do to protect your eye health?*” in the form of “our feelings and opinions” are presented in Table 9.

Table 9: Distribution of the students’ statements about what they do for their eye health

<i>Students’ statements about what the students do for their eye health</i>	<i>f</i>
Total number of students	24
I avoid being in dusty places	22
I take great care for the hygiene of my eyes	16
I eat carrots	14
I do not watch too much television	17
I go to the optician	18
I wear my glasses	4
I do not sit too long in front of the computer screen	15
I do not watch TV too close	21
I pay great attention not to throw something at my friends’ eyes	6

As can be seen in Table 9, nearly ninety-two percent of the students avoid being in dusty places, about eighty-eight percent of them do not watch TV too closely, seventy-five percent of them go to the optician, nearly seventy-percent of them do not watch too much television, sixty-seven percent of them pay attention to the hygiene of their eyes, nearly sixty-three percent of them do not sit too long in front of the computer screen and nearly fifty-eight percent of them eat carrots. Some of the students’ statements about what they do to protect their eyes are given below:

K6: “*I used to watch TV too close but after reading this instruction, I take care not to watch TV too close. I went to an optician, I changed my glasses. I eat a lot of carrots. I avoid being in dusty and dirty places.*”

K15: “*If it is not necessary, I do not look at the computer screen and TV screen too close. I avoid being in smoky places for the health of*

my eyes and if there is something wrong with my eyes, I go to an optician.”

As can be understood from the findings reported above, the majority of the students having completed the performance task went to an optician to get their eyes examined and they take preventive measures.

Findings Related to What the Students Do for the Health of Their Ear, Nose and Throat

Frequencies and percentages of the responses given to the question, “*What do you do to protect you’re the health of your ear, nose and throat?*” in the form of “our feelings and opinions” are presented in Table 10.

Table 10: Distribution of the students’ statements about what they do for the health of their ear, nose and throat

<i>Students’ statements about what they do for the health of their ear, nose and throat</i>	<i>f</i>
Total number of students	24
I visit ear-nose and throat doctor	17
I do not insert pointed objects into my ear	13
I take great care for the hygiene of my ears	22
I clean my ears with cotton buds	15
I avoid drinking cold drinks to protect my throat	13
I pay attention to the cleaning of my nose	7
I do not stay in places with polluted air	12

As can be seen in Table 10, nearly ninety-two percent of the students stated that they pay attention to the cleaning of their ears, nearly seventy-one percent of them visit ear-nose and throat doctors, about sixty-three percent clean their ears with cotton buds, nearly fifty-four percent of them do not drink cold drinks to protect their throats and insert pointed objects into their ears, and nearly fifty percent of them do not stay in places with polluted air. In this regard, it can be argued that the students primarily take preventive measures to protect their ears, noses and throats and then go to the doctor regularly.

Findings Related to the Students’ Habits of Doing Regular Exercise

Frequencies and percentages of the responses given to the question, “*Do you have the habit of doing regular exercise for a healthy life? If yes, what do you do?*” in the form of “our feelings and opinions” are presented in Table 11.

Table 11: Distribution of the students' statements about the habits of doing regular exercise

<i>Students' statements about their habits of doing regular exercise</i>	<i>f</i>
Total number of students	24
I have the habit of doing regular exercise	24
I do some exercise at home	8
I take regular walks	16
I run	11
I ride a bicycle	12
I play football	16
I play volleyball	7
I play basketball	6
I do taekwondo	1
I play table tennis	1

As can be understood from Table 11, all of the students stated that they have the habit of doing regular exercise. Nearly sixty-seven percent of the students stated that they play football and walk, fifty percent of them ride a bicycle and forty-six percent of them run. In this regard, some of the students' statements about their habits of doing regular exercise are given below:

K17: "After completing the performance task, I better understood the importance of doing exercise for health. Both at school and after the school, I play football, I like playing football very much and I also ride bicycle. It is good for me to do daily exercise."

K24: "Every day, after the school, I run, play volleyball, take a walk with friends. I regularly do exercise."

As can be understood from the statements of the students, the students have positive opinions about regularly exercising. Doing regular exercise is quite useful for students to have a healthy life.

Findings Related to What the Students Do to Protect themselves From Traffic Accidents

Frequencies and percentages of the responses given to the question, "What do you do protect yourselves from traffic accidents?" in the form of "our feelings and opinions" are presented in Table 12.

As can be seen in Table 12, all of the students stated that they obey the traffic rules, they stop when the traffic light is red and go across when the light turns green, nearly eighty-three percent of them walk on the pavement, about seventy-one percent fasten their seatbelts while

Table 12: Distribution of the students' statements about what they do to protect from traffic accidents

<i>Students' statements about what they do to protect from traffic accidents</i>	<i>f</i>
Total number of students	24
I obey traffic rules	24
I walk on the pavement	20
I use the zebra-crossing while walking across the road	15
I fasten my seat-belt while traveling in a car	17
I stop when the traffic light is red, and go across the road when the light is green	24
While going across the road, I look at left and right and then again left	17

travelling in a car and look left and right and then again left while crossing the road, and sixty-three percent of them use the zebra-crossing while crossing the road. Some of the students' statements about what they do to protect from traffic accidents are given below:

K3: "1) I am careful about traffic rules and signs to protect my health. 2) I fasten my seat-belt, if I do not obey these rules, I may be badly injured or die in case of an accident, seatbelt may save my life. 3) I stop when the light is red and go across when it turns to green."

K11: "I always walk on pavements while I am walking on the street because these places are for pedestrians, I witnessed an accident in which a man was walking close to the road and he was hit by a car and taken to hospital. I obey traffic rules, I stop when the light is red and go across the road when it is green. While crossing the road, I look left and right and then again left. I always fasten my seatbelt when traveling in a car and I warn my father if he does not."

From the statements of the students, it is clear that they are aware of the fact that when traffic rules are obeyed, the risk of injury or death can be reduced or eliminated and a healthy life can be led.

Findings Related to the Students' Use of Electronic Tools such as Television, Computer and Mobile Phone

Frequencies and percentages of the responses given to the question, "Do you use electronic tools such as television, computer and mobile phone?" in the form of "our feelings and opinions" are presented in Table 13.

Table 13: Distribution of the students' statements about their use of electronic tools such as television, computer and mobile phone

<i>Students' statements about their use of electronic tools such as television, computer and mobile phone</i>	<i>f</i>
Total number of students	24
I do not watch much TV	16
I do not use my computer more than necessary	14
I talk on my mobile keeping it not too close to my ear	13

As can be understood from Table 13, after completing the performance task, sixty-seven percent of the students stated that they do not watch much TV, nearly fifty-eight percent of them do not use the computer more than necessary and nearly fifty-four percent talk on their mobiles keeping them not too close to their ears. Some of the students' related statements are given below.

K8: "I do not sit in front of television or computer screen for a long time."

K13: "I try to use electronic tools such as mobile phones less."

K22: "I used to play games on the computer for three hours, but now I only play for an hour. While talking on my mobile, I keep it not too close to my ear."

From the statements of the students, it is understood that they are aware of the fact that when electronic tools such as television, computer and mobile phone are used too much, they may have negative effects on human health.

Findings Related to whether the Students Think of Conducting Works about Hygiene and Being Healthy after Completing the Performance Task

Frequencies and percentages of the responses given to the question, "From now on, do you think of conducting works about hygiene and being healthy?" in the form of "our feelings and opinions" are presented in Table 14.

Table 14: Distribution of the students' statements about conducting works on hygiene and being healthy after the completion of the performance task

<i>Students' statements about conducting works on hygiene and being healthy after the completion of the performance task</i>	<i>f</i>
Total number of students	24
Yes	22
Undecided	2

As can be seen in Table 14, nearly ninety-two percent of the students stated that they think of conducting works about the values of hygiene and being healthy after the completion of the performance task. In this respect, it can be argued that the students have positive attitudes towards conducting works on hygiene and being healthy.

Findings Related to the Results of the Students' Preference for Conducting Works on Hygiene and Being Healthy

Frequencies and percentages of the responses given to the questions, "Think about the results of this preference and is this result suitable for you?" in the form of "our feelings and opinions" are presented in Table 15.

Table 15: Distribution of the students' statements about the results of their preference for conducting works on hygiene and being healthy

<i>Students' statements about the results of their preference for conducting works on hygiene and being healthy</i>	<i>f</i>
Total number of students	24
Suitable	22
Though I am undecided, I took some advantages of this preference and got good results	1
I am undecided, but I think the results of this preference will be very good	1

As can be understood from Table 15, nearly ninety-two percent of the students stated that they could conduct works on hygiene and being healthy. In this connection, some of the students' related statements are given below:

K6: "Yes, it is suitable for me"

K17: "I am undecided; yet, I think the results of my preference will be very good."

K20: "Though I am undecided, I took some advantages of this preference and got good results."

As it is clear from the statements of the students, they have positive opinions about the results of their preference for conducting works on hygiene and being healthy. The students' having the value of attaching importance to hygiene and being healthy and wanting to conduct works on it shows that they are aware of the fact that hygiene is of vital importance to the protection of human health.

Findings Related to the Benefits of Students' Taking Actions in Line with Their Preference for Themselves and their Environment

Frequencies and percentages of the responses given to the question, "*What kind of benefits can occur for yourself and your environment if you take actions in line with your preference?*" in the form of "*our feelings and opinions*" are presented in Table 16.

Table 16: Distribution of the students' statements about the benefits of their taking actions in line with their preference for themselves and their environment

<i>Students' statements about the benefits of their taking actions in line with their preference for themselves and their environment</i>	<i>f</i>
Total number of students	24
We become unhealthy 54	13
We do not become ill 46	11
We make cleaning a habit 50	12
Our environment becomes more beautiful 38	9
It is useful for me 79	19
It is useful for my environment 83	20
I become a role model for the people around me 33	7

As can be understood from Table 16, all of the students think that they will be healthy and will not be ill, nearly eighty-three percent of them think that they will be useful for their environment, seventy-nine percent of them think that they will be useful individuals, fifty percent of them think that being clean will be their habit, thirty-eight percent think that their environment will be more beautiful, and thirty-three percent of them think that they will be a model for people around. Some of the students' statements about the results of their taking action in line with their preferences are given below:

K2: "*If becoming clean becomes a habit, we will be healthy.*"

K9: "*Younger children will take me as a model. It will be useful for me and my environment.*"

K15: "*If I become clean, I won't be ill and I will be clean, being clean becomes my habit and I can make contributions to my environment.*"

As can be seen from the findings above, students believe that taking actions in line with their preferences will be useful for themselves and their environment. In this respect, it can be argued that the students are aware of the fact that

the sensitivity they show towards hygiene and being healthy and the works they will do in this line will help people and other living things live in clean and healthy environments.

Findings Related to the Possible Results of the Students' Not Taking Actions in Line with Their Preferences

Frequencies and percentages of the responses given to the question, "*What may happen if you do not take action in line with your preference?*" in the form of "*our feelings and opinions*" are presented in Table 17.

Table 17: Distribution of the students' statements about the possible results of their not taking actions in line with their preferences

<i>Students' statements about the possible results of their not taking actions in line with their preferences</i>	<i>f</i>
Total number of students	24
I become unhealthy and ill 83	20
I become dirty	12
I create a bad example 33	8
I become a person not knowing anything	1
The people around me become disturbed by me 63	15
My environment becomes dirty 58	14
The people around me and I cannot become conscious of hygiene 29	7
I cannot grow up	1

As can be seen in Table 17, nearly eighty-three percent of the students think that they will be unhealthy and ill, sixty-three percent think that the people around will be disturbed, fifty-eight percent think that the environment will be dirty, fifty percent think that they will be dirty, thirty-three percent think that they will be bad models and twenty-nine percent think that the people around them will not be conscious of the environment. Some of the students' statements are given below:

K3: "*When the environment gets polluted, we can become unhealthy and ill.*"

K12: "*If I become dirty, I make a bad example for everyone, everybody around me gets disturbed from me and they become ill.*"

K19: "*The people around me and I should be more conscious of hygiene.*"

From the statements of the students, it is seen that the students are aware of the fact that if they do not take actions in line with their preferences, they may face negative outcomes.

Findings Related to How Long the Students will Continue Their Works to be Clean and Healthy

Frequencies and percentages of the responses given to the question, “*How long do you think you will continue your works to be clean and healthy?*” in the form of “our feelings and opinions” are presented in Table 18.

Table 18: Distribution of the students’ statements about how long they will continue their works to be clean and healthy

<i>Students’ statements about how long they will continue their works to be clean and healthy</i>	<i>f</i>
Total number of students	24
Always	10
For a long time	1
Continuously	3
For my whole life	8
Till I become dependent	1
For a year	2
Undecided	1
Till I become 15	2
For a while	1

As can be understood from Table 18, most of the students used statements such as always, for a long time, continuously, for my whole life and till I become dependent and few students used statements such as for a year, till I become 15, undecided and for a while. Some of the students’ statements are as follows:

K10: “*I think it will continue for a year.*”

K11: “*I will always continue.*”

K24: “*I will continue for my whole life.*”

From the statements of the students, it is understood that most of the students will continue their works to be clean and healthy for a long time and only few of them think of continuing them for a short time. In this regard, the researchers can claim that the students will be able to become good role models in the future so that they can raise the consciousness of people around them.

Findings Related to Possibility of Giving up Doing Their Cleaning Works When They are Interrupted by Anything

Frequencies and percentages of the responses given to the question, “*If because of any reason you put off doing cleaning works, will you completely give up doing them? Why?*” in the form of “our feelings and opinions” are presented in Table 19.

Table 19: Distribution of the students’ statements about the possibility of giving up doing cleaning works when they are interrupted by anything

<i>Students’ statements about the possibility of giving up doing their cleaning works when they are interrupted by anything</i>	<i>f</i>
Total number of students	24
I do not give up	22
I give up because it takes much time	1
Undecided	1
If I give up, I will be unhealthy	1
Be healthy and live happily	1
As hygiene and being healthy are more important than many other things	8
I like hygiene	2
Hygiene means being healthy	2
I do it to be clean	1
If I give up, I lose my self-confidence	1
Giving up means giving up living	1

As can be seen in Table 19, nearly ninety-two percent of the students stated that they would not give up performing works to be clean and healthy. Some of the students’ statements are given below:

K5: “*No, I won’t give up because it is more important than many things to be healthy and live happily.*”

K8: “*I do not give up because being clean is important for me.*”

K9: “*Yes, because it takes time.*”

K16: “*I am undecided.*”

K21: “*No, I do not give up because it is more important than many other things. Giving up means giving up living.*”

It is seen that high majority of the students will continue their works to be clean and healthy. In this regard, the students think that in order to avoid problems related to hygiene and being healthy, related works should be conducted so that they can improve their own health and the health of environment.

DISCUSSION

The performance task is activity performed by the students and there are many studies showing that activities conducted for value training resulted in students’ changing their attitudes and behaviors (Durusu 1996; Prencipe 2001; Kropp 2006; Perry and Wilkenfeld 2006; Dilmaç Kulaksizoglu and Eksi 2007; Aktepe 2010; Katilmi° 2010; Tahiroglu 2011, 2013). Yet, there are some other studies claiming that activities done for value training are not effective enough to

achieve the goals (Germaine 2001; Robinson-Lee 2008; Yardimci and Kiliç 2010). When the research reported in the literature is analyzed, it is seen that in general, activities developed for value training have positive influences on changing students' attitudes and behaviors towards values.

When the research on value education is examined, it is seen that there are some studies supporting the findings of the present study. For instance, Kropp (2006) reported that as a result of the administration of the ethical development program designed to make students assume more responsibilities, the program was found to be effective. Dilmaç et al. (2007) found that the participants of the humanitarian values training group counseling gained positive values. Katilmis (2010) reported that character enhancement program and related activities were influential in students' acquiring the value of being scientific. Aktepe (2010) argues that activities designed to make students acquire the value of benevolence resulted in increases in the attitude scores of the experimental group students. Tahiroglu (2013) found that the performance task assigned to the students to improve their value of benevolence led to the development of positive attitudes by the students. When the research reporting findings not supporting the results of the present study is examined, few studies can be found. Yardimci and Kiliç (2010) worked with 8th graders and found that activities designed to make students love the environment more were not effective enough for the participants to integrate with nature. Robinson-Lee (2008) also found that the character training performed on its own was not effective to achieve the goals and argued that the support of families, educators and society should be taken to be successful.

In the present study, a performance task was assigned to develop the values of hygiene and being healthy. The students behaved in line with the rules of hygiene and being healthy and learned by doing. The students recognized the importance and place of the values of hygiene and being healthy in their lives. As a result, in today's world, hygiene is one of the pre-requisites of being healthy and the students are aware of this fact. In this regard, the students completing the performance task have internalized the values of hygiene and being healthy and applied them in their lives.

CONCLUSION

Between the scores taken from the administration of "Hygiene Attitude Scale" and "Being Healthy Attitude Scale" by the experimental group students and the control group students, there are significant differences favoring the experimental group ($U=66.500$, $p>.05$) for hygiene value and ($U=42.000$, $p>.05$) for being healthy value. This shows that the attitudes of the experimental group students assigned the performance task towards hygiene and being healthy were affected more positively than the attitudes of the control group students. This indicates that the performance task had effects on the students' developing positive attitudes towards hygiene and being healthy.

When the students' opinions about the values of hygiene and being healthy are examined after the completion of the performance task, it is seen that they have a tendency to continue their works to be clean and healthy, they develop positive opinions about healthy and balanced diet, they pay attention to goods to protect their health, they wear clean clothes to be healthy, they take preventive measures to protect the health of their eyes, ears, noses and throats and get them examined by doctors, they have positive opinions about doing exercise, they obey the traffic rules to protect themselves from traffic accidents, they are aware of the fact that use of electronic tools such as television, computer and mobile phone too much can be harmful to health, they think of conducting works related to the values of hygiene and being healthy and in this way, they will be helpful to themselves and their environment otherwise they will be confronted with negative results

RECOMMENDATIONS

Following suggestions can be made based on the findings of the present study. Performance tasks suitable for their grade level can be assigned to students to improve other values. Such tasks can also be used to improve the perception of the general public. Moreover, through activities designed by the concerned teams, the awareness of students can be raised.

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