HEALTH EDUCATION IN THE ARMY
A FACTUAL SUMMARY

BY
Royal Army Medical Corps

INTRODUCTION

Military medicine has shown an increasing bias towards the preventive, as opposed to the curative side. The origins of this bias are rooted deep in military history, the study of which reveals many sharp lessons of manpower loss inflicted upon armies by preventable disease.

In comparatively recent times the diseases which scourged the armies of the past with great epidemics have, one by one, been brought under control; these advances have enabled military hygienists to pay more attention to enhancing the quality of health itself, and to superimpose upon the desire to eradicate disease the quest for positive health.

The development of this more positive attitude towards health has increased the importance of health education. It is possible to achieve a considerable amount of disease prevention by applying measures over which the individual soldier has no control; in fact, these are the only measures which can be assured of complete success. Examples of such measures include the eradication of insect vectors of disease and the provision of safe drinking water; although, admittedly, it is seldom possible to exclude the human element completely, so that personal hygiene remains a vital factor in the prevention of disease.

But for the attainment of positive health, personal hygiene is a sine qua non, since no master-stroke of medical administration can confer it upon the community. Positive health can only be attained by those individuals who both desire it and believe in it, hence it is bound up more with a healthy mental attitude to life than anything else. It is a primary object of health education in the Army to inculcate this healthy mental attitude to life.

The Army is, potentially at any rate, a selected fit community and must be maintained as such. To succeed in this the importance of health must be instilled into every man in the military community, irrespective of rank, trade or grade. The individual soldier must be taught to maintain himself in good health in any part of the world—hazards of climate, geography and occupation notwithstanding; he must also be taught how his own actions, such as food handling, may affect the health of his comrades.

Leaders and administrators must be taught the communal aspects—management in relation to health, particularly mental health.

An aspect concerning health education in the Army which must not be overlooked relates to conscription. The fact that the majority of the nation’s
young men serve in the Army provides excellent opportunities of raising the standard of health knowledge of the nation as a whole.

**Organization for Health Education in the Army**

*The Role of the War Office*

The arrangements for health education in the Army are controlled by the War Office, principally through the Director of Army Health. Some degree of central control is essential to ensure co-ordination of effort and a common policy. In addition, publications, films and propaganda leaflets relating to health are dealt with by the Directorate of Army Health.

*The Role of the Royal Army Medical College*

This College has a Department of Army Health which is concerned with instructing those who conduct health education and take other action to promote health in the military community. The courses which study Army Health subjects include those for Senior Medical Officers, Specialists in Army Health, National Service Medical Officers and officers of the Queen Alexandra's Royal Army Nursing Corps.

In addition, special lectures on health matters are given as required to special groups, such as officers of the Royal Army Service Corps. Also the Department maintains liaison with other bodies interested in health education, such as the Central Council for Health Education, London School of Hygiene and Tropical Medicine, Royal Institute of Public Health and Hygiene, and the Royal Sanitary Institute.

*The Role of the Army School of Health*

The Army School of Health has a wide variety of tasks in the sphere of health education. Medical and Dental officers and other ranks are given courses designed to enable them to play a part in the health education of others and to maintain the health of those troops for whom they may have responsibilities. Surgeon-Lieutenants of the Royal Navy attended similar courses, and officers of the Queen Alexandra's Royal Army Nursing Corps attend a certain number of the lectures and demonstrations.

Combatant officers, both senior and junior, regimental and staff, attend courses dealing with the health aspects of man-management. These courses enable them to make an important contribution to the prevention of disease in the Army, to conduct health propaganda and to teach health discipline to the troops for whom they are responsible.

The courses to this group of personnel are probably the most important of all, since health measures cannot be successful unless the officers of combatant units and formations appreciate their value and are enthusiastic; also, much depends upon the junior officers who are in close contact with the men, and who are ultimately responsible for ensuring that health measures are carried out.

Similar instruction is arranged for combatant W.Os. and N.C.Os., also for officer cadets. In addition, it is hoped to introduce special courses in Army Health for corporals on promotion to sergeant, and for captains on promotion to
major; questions on the subject are included in the relevant promotion examinations.

Some soldiers, by virtue of the work they have to do, can directly affect the health of their comrades, and so require special attention in schemes of health education. For this reason special instruction is given to personnel of the Army Catering Corps, men who are trained to operate water purification equipment, and men who are employed on unit sanitary duties, anti-malaria work, etc.

In the Army it is the Commanding Officer, and not the Medical Officer, who is primarily responsible for the health of troops. In support of this policy, and for other reasons, a great deal of basic health teaching in the Army is carried out by regimental (as opposed to R.A.M.C.) officers. To achieve this, selected regimental officers are specially trained at the Army School of Health to become "health educators." Their training enables them to give lectures and to lead discussions on both the personal and the communal aspects of elementary health discipline. To assist them in this work various visual aids are provided, including films and film-strips, and at the end of their training period they are given notes for use as aides-mémoire in preparing lectures.

Special Arrangements for the Health Education of Troops Overseas

The overseas establishments of Army Health officers, Field Hygiene Sections and Hygiene Wings, makes provision for the formation of "ad hoc" schools of health as required. Such arrangements are of special value with regard to the health education of African and Asian troops serving with our forces.

In addition, the School of Hygiene, Far East Land Forces, is specially established and equipped to deal with problems of health education peculiar to that theatre.

Health Education at Training Establishments for Officers and Officer Cadets

At the Staff College, health problems are introduced into exercises and other forms of training, and officers attending the courses there attend demonstrations at the Army School of Health.

Lectures and films on health matters are included in the training programme of the Royal Military Academy and Officer Cadet Schools. Officer Cadets also visit the Army School of Health for lectures, demonstrations and films.

The Role of the Army School of Physical Training

This School makes an important contribution to the health of the Army. The main purpose of the School is to train physical training instructors for units, in which they exert a good influence both on and off parade.

Physical training instructors are able to organize and take physical training classes; to coach, organize and officiate with regard to athletics; to coach, organize and judge boxing; and to play, coach and officiate with regard to swimming and team games. All these activities promote and maintain health, both physical and mental.

In addition, physical training instructors are key men in the Army's arrangements for convalescence, rehabilitation and reconditioning. They carry out a
great deal of work at convalescent depots, and are mainly responsible for the routine work of conditioning courses. They are advised and supervised by specialists in physical medicine and other medical officers.

Health Education of Recruits

Recruits attend lectures, demonstrations and films on health matters at Infantry, Brigade and Regimental Depots. In all other units, health education is continued and is co-ordinated with training in other subjects.

An important role in the health education of recruits is filled by regimental officers specially trained at the Army School of Health.

Recruits are first taught elementary anatomy and physiology on which are based lessons in elementary personal hygiene. Later they are taught about the causation and spread of disease, on which are based lessons in both personal and communal health discipline.

Health Education of Military Families

Military families are given talks on health matters, particularly those pertaining to maternity and child welfare, at Welfare Centres. In the United Kingdom these centres are operated by the Public Health Services in co-operation with the Army Medical and Welfare Services; in overseas stations these centres are operated entirely by the Army. An important contribution to the health education of families is also made by health visitors during their visits to the homes of married personnel, both in the United Kingdom and overseas.

Military families travelling overseas receive talks on health matters during the voyage, and are issued with literature specially written for them as an aid to health maintenance in overseas stations.

The Role of Medical Personnel with Regard to Health Education in the Army

Administrative Medical Officers

Their responsibilities include the organization and control of health education and the implementation of War Office policies on the subject. In addition, they play an important part in the health education of formation commanders and staff officers; this they achieve by personal contact, by personal example and by stressing the health point of view at conferences, etc.

Specialists in Army Health

Specialists in Army Health are responsible for all technical matters pertaining to health education in the Army. In addition, they initiate and supervise health education schemes, deliver lectures and give training to unit personnel. Also, when making visits and inspections they make an important contribution to health education by correcting wrong ideas on the spot.

Regimental Medical Officers

The success of health education in the Army depends to a great extent upon the attitude of Commanding Officers, who should derive inspiration and guidance in health matters from their medical officers.
Much also depends upon junior regimental officers, who must be guided and advised by the medical officer, who does all he can to enhance and continue the health training of other ranks which was commenced at training units.

**Medical Officers of Hospitals and Field Medical Units**

They are responsible for the health education of the personnel of their units, which must reach an exemplary standard.

In addition, hospitals and field medical units should, by maintenance of a high standard of health discipline and general hygiene, constitute a good example for other units to emulate.

**Non-Medical Officers, R.A.M.C.**

Non-medical hygiene officers teach practical sanitation and elementary health discipline. Also, they take part in health education schemes as organizers and instructors.

All other non-medical R.A.M.C. officers should, by propaganda and example, co-operate in the general scheme of health education according to the various opportunities afforded by the nature of their employment.

**Hygiene Assistants, R.A.M.C.**

These men assist Specialists in Army Health and non-medical hygiene officers in the teaching of practical sanitation and general hygiene.

In addition, during their inspectorial work they are able to correct sanitary defects on the spot.

**Other Ranks, R.A.M.C. (excluding Hygiene Assistants)**

They should assist in health education by being exemplary in their practice of personal hygiene. The importance of health measures will often be judged by the personal attitude and behaviour of medical personnel towards them.

**The Role of Formation Commanders and Staff Officers**

Formation Commanders should provide the necessary impetus for health education schemes; without their stimulation and backing no such scheme can be wholly successful.

“G” staff officers control the training policy of the Army, and are thus responsible for seeing that health education and training is given its proper place in training syllabuses.

“A” staff officers are responsible for the disciplinary aspects, and for ensuring that health instructions and orders are obeyed. Also, as they deal with such personal matters as pay, postings, promotions and leave, their actions can have an important effect on mental health.

“Q” staff officers are associated with health matters in many ways, especially with regard to the day-to-day workings of such Corps and Services as the R.A.S.C., R.A.O.C., R.E.M.E., and A.C.C. Thus, within their sphere of activity come such matters as industrial health in workshops and the hygiene of food handling and storage. They are also responsible for policy concerning the
planning and provision of accommodation, furnishings and equipment scales and schedules; these matters have their health aspects also.

**ROLE OF REGIMENTAL OFFICERS AND N.C.Os.**

Since junior regimental officers are in close contact with the men they are instrumental in maintaining health discipline. They should themselves be trained by their senior officers in all the health aspects of man-management. Regimental officers give talks and demonstrations to their men on practical health measures, including problems of health maintenance in training exercises, and supervise the health discipline of all under their command. Regimental N.C.Os. assist the officers in these matters, particularly the maintenance of health discipline by supervision and example.

**METHODS OF HEALTH EDUCATION USED IN THE ARMY**

*Formal Lectures*

The formal lecture is of value mainly for the health education of officers and senior N.C.Os., particularly those who are being trained to teach Army health. Visual aids to such lectures are very helpful; among those used in the Army are wall-charts, epidiascope illustrations, slides and film-strips.

*Lecture Demonstrations*

These are used for all audiences, especially for junior other ranks for whom training is required to be as practical as possible.

*Informal Talks*

Impromptu and informal talks on health are useful for stressing matters of topical importance, and for drawing attention to lessons learned during exercises, etc.

*Group Discussions*

These are used mainly when a certain amount of basic education in health matters has been completed. Whether such discussions are of any value or not depends a great deal upon the contribution of the "audience" as opposed to the teaching staff.

*Playlets*

This is a popular method of instruction in the Army and can be usefully adapted for health education purposes. Playlets afford convenient relief from the more stereotyped lectures and demonstrations.

*Cinema Films*

A large number of films, suitable for a wide variety of audiences, are now circulating in the Army. Their chief value is for propaganda rather than systematic instruction.

*Posters and Propaganda Leaflets*

These have a place among the material laid out in unit information rooms,
study centres, libraries, etc. Also suitable posters are prepared for specific situations—e.g., kitchens, workshops, lavatories, medical centres, etc.

**Training Manuals and Pamphlets**

Manuals and pamphlets are issued to a wide range of personnel. They include the "Manual of Army Health," which is a technical publication intended mainly for medical officers; the "Handbook of Army Health for Regimental Officers and N.C.Os."; a pamphlet entitled "Your Health and You" for individual soldiers; and "Notes for the Guidance of Married Families Proceeding Overseas."

**Mobile Teams**

These constitute a useful method of health education, particularly for temporary situations, such as Territorial Army camps. A team usually consists of a specially selected and trained Warrant Officer, assisted by N.C.Os.; their equipment includes "set piece" demonstration panels illustrating various aspects of the subject, film-strips, cinematograph apparatus, models and specimens of hygiene equipment.

**Road-signs**

Special road-signs are used in specific situations, usually to warn troops that they are in an area where particular hazards to health exist—e.g., malaria, typhus, plague, etc.

**The Press and Wireless**

Increasing use is being made of the Press and Wireless as media for disseminating health propaganda, especially with regard to our forces overseas.

**Conclusion**

Health education is a major factor in the promotion and maintenance of health in the Army. Its success depends largely upon the efforts and enthusiasm of non-medical personnel, particularly Commanding Officers and junior leaders.

The present organization for health education in the Army is based upon team-work in which every individual, irrespective of rank or mode of employment, has a part to play.

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