

Report One: "I Am Me"-- the AAHE Membership Survey

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Article:

During the 1977 AAHPER convention in Seattle, Washington, each member of the AAHE Board of Directors was charged with the responsibility to initiate and complete a service project for the benefit of AAHE and its members. The overall mission was named PROJECTS TEN. Kenneth S. Clarke, then chairman of the health education program at Pennsylvania State University, selected for his project a comprehensive survey of the AAHE membership. Robert Shute and James Eddy, also of Penn State, agreed to assist with the data collection and analysis.

Following the development of the instrument by Clarke, AAHE circulated a copy of the "I Am Me!" instrument to the entire membership. Approximately 6,000 questionnaires were mailed during the summer and fall months of 1977-932 (15.5%) were returned. Of those returned, 916 (15.2%) were suitable for keypunching and further analysis. Although the rate of returns was disappointing, a sufficiently large data base was obtained so that the status, activities, and opinions of the respondents could be characterized and shared through a series of reports published in *Health Education* over the coming year. This report is the first in that series.

Rationale/Capabilities

AAHE is a relatively new, semiautonomous division (since 1976) within the American Alliance for Health, Physical Education, and Recreation (AAHPER). It was the opinion of the AAHE officers and Board of Directors that, in order to truly serve the members of this organization, it was critical that the members had an opportunity **to** provide input which could be used for planning and decision-making on both national and local levels. Little was known about AAHE members except for their names and mailing addresses.

Although the questionnaire was very detailed, there were relatively few major questions to be explored. These were:

1. Who are AAHE members? (personal profile)
2. Where do they live and work?
3. What is their academic training?
4. What are their professional tasks?
5. What are their professional strengths and weaknesses?
6. To which other organizations do they belong?
7. What are their opinions about the profession of health education?
8. What are their opinions about the various activities of the AAHE National Convention?
9. What are their opinions about the journal, *Health Education*?

10. What are their opinions of AAHE as a professional organization?
11. Do they have a willingness to serve AAHE through active participation at national and/or local levels? If so, in what way?
12. Can they identify other professionals who may wish to serve AAHE via regional projects?

Of course, with the capabilities inherent in computer processing, dozens of other meaningful questions may be posed which will permit further illumination of the data. Aside from simple frequency and percentage tabulations, information from any portion of the questionnaire may be compared with (cross-tabulated **with**) information from any other portion of the questionnaire.

We have chosen to present information in these reports which we hope will be of interest to the membership-at-large. Other information, more useful for planning at the national level, will be provided to AAHE on an "as requested" basis.

A Note of Caution

The information contained in this and in subsequent reports characterizes only those AAHE members who responded to the questionnaire. Primarily to save space, but also to avoid overgeneralization, the meaning of this data is left to the reader. To the extent that an organization should be guided by the opinions of those members who chose to respond, the information is offered as input for decision-making.

Extreme detail in the following tables has been avoided to preserve clarity. Please note that, due to missing data, percentages are a more meaningful basis for comparison than raw frequencies. Also, since several individuals chose not to respond to every item on the questionnaire, summated frequencies will not equal 916—the total number of usable questionnaires.

Report one focuses on the following aspects of the AAHE Membership Survey:

1. A brief profile of the respondents.
2. The opinions of the respondents about the status of health education, according to their current job title.
3. Opinions about the journal, *Health Education*.

Profile of the Respondents

Responses to the AAHE Membership Survey were obtained from members in all 50 states, plus several Canadian provinces, Puerto Rico, Mexico, and Germany. About one-half of the respondents live in ten states—New York (9%), Pennsylvania (7%), Illinois (6%), Ohio (6%), Texas (4.5%), New Jersey (4%), Minnesota (4%), Wisconsin (4%), Oregon (3%), and Massachusetts (3%).

Of those who reported their sex, 55% were female and 45% were male. The racial representation in the sample was: Caucasian-87%; Native American-9%; Black-2%; other, including Hispanic and Oriental-2%. Of the sample, 70% are employed in cities and metropolitan areas with the remainder serving in rural and suburban areas. The respondents work in a wide range of settings including academic institutions (84%), government agencies (5%), voluntary health agencies (2%), professional societies (1%), clinical settings (1.5%), and commercial enterprises (2.5%); the remainder (5%) were retired or unemployed. Of those who work in academic settings, 53% work at the junior college or university level and 25% work at the high school level; the remainder work in intermediate schools (14%), grade schools (7%), and nursery and vocational schools (1%).

Table 1. Status of the health education profession

<i>Current Beliefs</i>	<i>Job Title</i>	<i>Strongly Agree</i> <i>N (%)</i>	<i>Agree</i> <i>N (%)</i>	<i>Disagree</i> <i>N (%)</i>	<i>Strongly Disagree</i> <i>N (%)</i>	<i>TOTAL</i> <i>N</i>
1. If I were a college freshman again, I would prepare for a career in health education.	Health Educator	132 (48)	87 (32)	43 (15)	13 (5)	275
	Hlth and Phys. Ed.	87 (32)	121 (45)	48 (18)	15 (6)	271
	Physical Education	18 (27)	25 (37)	20 (30)	4 (6)	67
	Other, Hlth Related	76 (33)	86 (37)	52 (22)	17 (7)	231
	TOTAL - N (%)	313 (37)	319 (38)	163 (19)	49 (6)	844 (100)
2. Substantial attempts to increase standards for school health instruction at the state level are exercises in futility.	Health Educator	15 (5)	57 (21)	127 (46)	77 (28)	276
	Hlth and Phys. Ed.	17 (6)	59 (22)	123 (46)	70 (26)	269
	Physical Education	6 (9)	14 (21)	33 (50)	13 (20)	66
	Other, Hlth Related	11 (5)	53 (23)	107 (46)	60 (26)	231
	TOTAL - N (%)	49 (6)	183 (22)	390 (46)	220 (26)	842 (100)
3. The quality of the students currently pursuing professional preparation in health education is most satisfying.	Health Educator	28 (10)	167 (62)	65 (24)	9 (3)	269
	Hlth and Phys. Ed.	12 (5)	145 (56)	93 (36)	7 (3)	257
	Physical Education	1 (2)	34 (60)	19 (33)	3 (5)	57
	Other, Hlth Related	26 (12)	126 (58)	55 (25)	12 (6)	219
	TOTAL - N (%)	67 (8)	472 (59)	232 (29)	31 (4)	802 (100)
4. A professional connection with physical education is becoming less a deterrent to the goals of health education	Health Educator	22 (8)	115 (42)	90 (33)	45 (17)	272
	Hlth and Phys. Ed.	42 (16)	156 (58)	61 (23)	10 (4)	269
	Physical Education	13 (20)	39 (61)	6 (9)	6 (9)	64
	Other, Hlth Related	28 (13)	123 (56)	50 (23)	20 (9)	221
	TOTAL - N (%)	105 (13)	433 (52)	207 (25)	81 (10)	826 (100)
5. Respect for health education among the public is declining.	Health Educator	7 (2)	14 (5)	193 (70)	61 (22)	275
	Hlth and Phys. Ed.	8 (3)	28 (10)	165 (61)	68 (25)	269
	Physical Education	3 (5)	10 (16)	36 (56)	15 (23)	64
	Other, Hlth Related	2 (1)	27 (12)	143 (63)	56 (25)	228
	TOTAL - N (%)	20 (2)	79 (9)	537 (64)	200 (24)	836 (100)
6. Compared to colleagues of equal position and experience, the health educator is underpaid.	Health Educator	30 (11)	100 (37)	126 (46)	16 (6)	272
	Hlth & Phys. Ed.	18 (7)	81 (32)	128 (51)	26 (10)	253
	Physical Education	5 (8)	18 (30)	32 (54)	4 (7)	59
	Other, Hlth Related	19 (9)	90 (40)	102 (46)	11 (5)	222
	TOTAL - N (%)	72 (9)	289 (36)	388 (48)	57 (7)	806 (100)
7. Today's master's candidate in health education will be better qualified at graduation for his/her tasks than his/her faculty were at that stage.	Health Educator	56 (21)	177 (65)	32 (12)	7 (3)	272
	Hlth and Phys. Ed.	59 (22)	167 (64)	27 (10)	9 (3)	262
	Physical Education	16 (28)	37 (64)	3 (5)	2 (3)	58
	Other, Hlth Related	53 (25)	135 (62)	20 (9)	8 (4)	216
	TOTAL - N (%)	184 (23)	516 (64)	82 (10)	26 (3)	808 (100)
8. I fear that the doctorate degree in health education is inferior in quality to that in related fields	Health Educator	16 (6)	39 (16)	125 (50)	69 (28)	249
	Hlth and Phys. Ed.	4 (2)	52 (22)	138 (58)	43 (18)	237
	Physical Education	0 (0)	10 (21)	27 (56)	11 (23)	48
	Other, Hlth Related	9 (5)	45 (22)	113 (56)	33 (17)	200
	TOTAL - N (%)	29 (4)	146 (20)	403 (55)	156 (21)	734 (100)
9. Five years from now, health education will be in better shape than today.	Health Educator	84 (30)	168 (61)	21 (8)	2 (1)	275
	Hlth and Phys. Ed.	71 (27)	169 (64)	22 (8)	3 (1)	265
	Physical Education	13 (21)	44 (70)	6 (10)	0 (0)	63
	Other, Hlth Related	52 (24)	146 (67)	16 (7)	3 (2)	217
	TOTAL - N (%)	220 (27)	527 (64)	65 (8)	8 (1)	820 (100)
10. Respect for health education among colleagues in related fields is rising.	Health Educator	51 (19)	195 (71)	26 (10)	2 (1)	274
	Hlth and Phys. Ed.	34 (13)	196 (75)	25 (10)	5 (2)	260
	Physical Education	13 (21)	40 (64)	9 (14)	1 (2)	67
	Other, Hlth Related	41 (19)	156 (71)	23 (10)	1 (1)	221
	TOTAL - N (%)	139 (17)	587 (72)	83 (10)	9 (1)	818 (100)

Note: All percentages are rounded to the nearest whole percent.

Table 2. Preference of journal to which manuscript would be submitted

<i>Preferred Journal</i>	<i>Research Manuscript N (%)</i>	<i>Program or Editorial Manuscript N (%)</i>
Journal of Physical Education and Recreation	106 (16)	184 (25)
Health Education	240 (36)	410 (56)
Research Quarterly	81 (12)	NA
Journal of School Health	144 (22)	91 (12)
American Journal of Public Health	40 (6)	18 (3)
SOPHE Monographs	14 (6)	NA
Other	40 (6)	29 (4)
Total - N(%)	665 (100)	732 (100)

Note: All percentages are rounded to the nearest whole percent.

Of the approximately 600 respondents who answered the question regarding membership in other organizations, only about 25-30% indicated that they currently belonged to other related organizations such as ACHA, APHA, ASHA, SOPHE, ASSECT, and IUHE. For most, AAHE is the primary organization through which the members maintain contact with the health education profession. APHA and ASHA were the two major organizations to which AAHE members were more likely to belong.

The Status of Health Education

The following table depicts the opinions of AAHE members (according to their current job titles) regarding the status of the profession of health education.

An "eyeball" analysis of Table 1 indicates that, as a group, the respondents were optimistic about the current status of health education. Likewise, the respondents were remarkably uniform in their percentage responses across job titles. The sharpest points of disagreement between the various job categories occurred for statement 4. Health educators were split (50-50) in their opinions about the value of a professional connection with physical education, while the majority of physical educators (81%) thought that such a connection was becoming less of a deterrent to the goals of health education.

Further insight into this issue may be explored by contrasting the opinions of health educators and physical educators to the statement "AAHE should initiate steps now to separate from AAHPER." Only 11% of physical educators agreed with this statement, while 42% of health educators thought that a break with AAHPER was advisable. Those who indicated that their job included both health and physical education duties were overwhelmingly (87%) against separation, as were those in other health related positions (74%).

Of all the items on the questionnaire, this statement generated the most prolific and diverse unsolicited written comments. A sample of opposing comments includes: "Get health education separated from physical education as soon as possible." "Health education should *never* separate from physical education." Others noted that, until health education is "considered a separate entity by the politicians," it would be unwise to separate from AAHPER. Those who thought AAHE should dissolve and unite with other organizations tended to name ASHA and APHA as the most desirable organizations.

Opinions About the Journal

Health Education was rated "very good to excellent," by 52% of the sample with 90% of the ratings from "good to excellent."

In response to the questions "If you prepared a research-oriented manuscript... and were assured that the reviewers would be peers, to which (journal) would you submit it?" and "If you had prepared a program-

oriented or editorial-style manuscript... to which (journal) would you submit it?" the following data were obtained.

Based on the current interests of prospective authors, 56% of the respondents would consider submitting a program-oriented to editorial-style manuscript to *Health Education*, while only 36% would consider submitting a research-oriented manuscript to this journal.

Since the overall rating of the journal is very positive, these figures may be interpreted as follows. First, the current publication interests of the prospective authors may not be seen as compatible with the typical focus of *Health Education* articles. Whether this viewpoint reflects the preferences of the editorial board is unknown. Second, since the largest percentage of survey respondents (45%) work at the college or university level, these figures may reflect the relative status of *Health Education* as a desirable outlet for publishable material (in relation to promotion and tenure considerations). Third, the desire of the author to publish in those journals which have the highest readership in relation to the topic of the proposed article may also be a valid reason for selecting one journal over another.

Overall, it is quite clear that *Health Education* is positively received by the majority of readers and, for a reasonably large percentage of respondents, it is also seen as a desirable outlet for manuscripts.

Coming up

The next report will focus on the activities and opinions of the respondents related to AAHE as an organization, with special attention given to the National Conventions.