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## **AN APPLICATION FOR GAINING THE HABIT OF CLEANING AS A VALUE IN PRIMARY SCHOOL STUDENTS: CLEAN CHILD - DIRTY CHILD**

*(Research article)*

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# AN APPLICATION FOR GAINING THE HABIT OF CLEANING AS A VALUE IN PRIMARY SCHOOL STUDENTS: CLEAN CHILD - DIRTY CHILD\*

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## Abstract

According to today's understanding of health, the most important responsibility for the protection of one's health falls on him. For this, it is necessary to develop a positive attitude and value towards the subject. Considering this, the importance of bringing cleanliness, hygiene and being healthy to our children as a value, especially in epidemic conditions, increases even more. Therefore, in this study, it is aimed to apply and test the effectiveness of the activities developed by using value education methods in order to help students who have negative or low attitudes towards cleanliness and being healthy to gain an understanding of hygiene and cleanliness as a value. For this purpose, experimental design with pretest posttest control group, which is one of the quantitative research designs, was used. In the collection of data, a scale form was used for cleaning, hygiene and Covid-19 pandemic measures. In the analysis of the collected data, Mann-Whitney U test was used for comparison between groups. As a result, it was seen that the application of the activities developed in accordance with the values education methods significantly increased the attitude scores of the experimental group students towards cleanliness and being healthy. No significant change was observed in the control group.

*Keywords:* Being healthy, cleanliness, hygiene, value education

## 1. Introduction

People often realize the importance of their health when they are sick and naturally seek to regain their health. However, the most important thing is to preserve the state of health before one's illness (Öztek, Üner, & Eren 2012). However, there are many factors that affect a person's health status. Of course, an important part of these factors are related to the characteristics of the person himself. In other words, in addition to the physical conditions and genetic characteristics of the person, knowledge, attitudes and behaviors towards being healthy play an important role in protecting the health of the person (Gözüm & Çapık, 2014, p.230). In this context, today's understanding of health is tried to be structured on taking necessary precautions before people lose their health. Undoubtedly, this is only possible if the person has a sufficient level of knowledge, thought and value judgment. However, many people do not care about the situation until their health deteriorates due to attitudes and behaviors such as not having sufficient knowledge and skills or not caring even if they do.

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Therefore, it is very important to raise awareness on the subject from a young age, and to develop attitudes and behaviors. Because when it is considered that personality and character begin to take shape and the foundations are formed from an early age, behaviors learned and acquired at an early age are more permanent. In this context, according to Mercin (2005, p. 76), "...primary school years are the period when a child can be directed towards positive behaviors and will be most affected by the information received from outside." In this direction, especially from the first years of primary school, a Life Science Course has been introduced in order to provide children with the basic knowledge, skills and values necessary for their lives. To MEB (Ministry of National Education, 2018, p. 8), the main purpose of Life Science Course is to "...raise individuals who have basic life skills, know themselves, lead a healthy and safe life, assimilate the values of the society they live in, are sensitive to nature and the environment, research, produce and love their country." When the Life Science Course is examined, it is seen that it is aimed to gain many gains towards this purposes.

When the literature on the subject is examined, it is seen that cleaning is expressed as the removal of visible dirt from the environment, hygiene, protection of a healthy environment and purification from microbes, and personal care is expressed as concepts that include one's own hygiene, cleanliness and appearance. From this point of view, it can be said that the basic condition of protecting health is hygiene and cleanliness. According to Önsüz & Hıdıroğlu (2008), these concepts are "generally used in the sense of 'health protection science'" in the literature, and even today "all practices aimed at protecting health are called hygiene." Among these applications; "hand cleaning, nail cleaning and care, face, eye and ear cleaning, hair care and cleaning, mouth and dental care, foot cleaning, regular bathing, using soap and water in cleaning processes, using clean clothes, towels, comb, laundry, toothbrush, nail clippers belonging to the person can be counted." (Önsüz & Hıdıroğlu, 2008, pp. 9-10). Therefore, the concepts of hygiene and cleanliness are intertwined and closely related concepts, and they specifically mean the way we behave to prevent diseases and stay healthy (AusAID, 2011). Because humans are constantly under the threat of pollutants, viruses, microbes and bacteria around them. In order to stay healthy, it is necessary to take precautions against these threats. In other words, it is necessary to comply with the rules of cleanliness and hygiene in the first place.

Failure to comply with hygiene and cleaning rules at first, and then insufficient or incorrect information, practices and attitudes on this issue play a very important role in the high incidence and spread of infectious diseases and the deterioration of people's health. Because many parts of our body are usually in contact with external environments and objects, the risk of infection is quite likely. It also has important effects on the food and beverages consumed. For example, not paying attention to hygiene and cleanliness plays a very important role in the spread of new microbes, such as respiratory tract infections, intestinal infections, skin infections, eye infections, foodborne diseases and epidemics (Oyibo, 2012). Studies conducted in this context reveal that infectious diseases are still the most common and fatal diseases group today, and a significant portion of these diseases can be prevented by personal hygiene. For example, it has been observed that there is a significant decrease in the incidence of infectious diseases in these people as a result of the correct hand washing habit (Önsüz & Hıdıroğlu, 2008, p.10).

On the other hand, studies have revealed a strong and consistent link between poor hand hygiene and intestinal infection. Some respiratory infections have also been associated with poor personal hygiene practices. Therefore, personal hygiene and hygiene practices play a vital role in preventing the spread of new microbes, as in many infectious diseases, foodborne diseases and other epidemics. Therefore, in order to protect their health, people need to have

basic knowledge of personal hygiene and make necessary practices (Oyibo, 2012). For this, people must first have sufficient knowledge and skills about personal cleaning and hygiene practices. However, as the experts who deal with the subject agree on, knowing and understanding something does not guarantee that it will be transformed into behavior. Studies conducted in this context reveal that although many people have sufficient knowledge and skills, they do not turn this into a sufficient level of behavior. For example, a study by Onwasigwe (2001) revealed that although school children have a high level of knowledge about basic personal hygiene, they do not fully transform it into behavior. In fact, it has been observed that the majority of these children do not comply with the rules of cleanliness and hygiene at all (Cited by Oyibo, 2012). Because according to the theory of behavior, knowing something is not enough for it to become a behavior. It comes from the individual's intention to implement the behavior. In other words, in order for the behavior to occur, it is necessary to support the known emotionally (belief, value, attitude, motivation, etc.) and to create a willingness or obligation.

The "Health Belief Model", developed in this context, argues that the beliefs, values and attitudes of the individual towards health lie on the basis of health-related behaviors. In other words, the health-related behaviors of the individual are affected by the value, beliefs and attitudes he/she attaches to his/her health (Gözüm & Çapık, 2014, p.230). Therefore, the aim of the training for being healthy such as cleaning and hygiene is not only to convey information, but also to transform that knowledge into behavior. In other words, in this process (health education), without ignoring the personal, social, emotional and value dimensions of education, it should be ensured that the gains to be healthy and to protect one's health emerge as behaviors (Avşar & Kaşıkçı, 2009).

But it is not an easy task to ensure that every given information is translated into behavior. For this, first of all, it is necessary to understand people correctly. In order to understand a person correctly, it is necessary to take into account the system of values and beliefs that includes that person's interactions and emotional ties (Lopes-de-Oliveira, Toledo, & Araújo, 2018, p. 191). Because values emerge from many life and learning experiences. These, in turn, reflect the pressures imposed by the nature and pace of environmental and social change. In fact, what is acquired is a personalized perception synthesized with past experiences, current needs and expectations (Smyth, 2005, p. 52). For this reason, many experts who are interested in the subject point to the values that people have acquired in their life experiences as the basic basis of their behavior, choices and decisions (UNESCO, 1992).

Some explanations about the functions of values also support these ideas. For example, according to Ulusoy (2019), values are "...the facts that guide life principles, bring direction, endurance, joy of life, happiness and peace to life (p.65)." According to UNESCO (2005), on the other hand, they are the essential elements that direct our ideas and thoughts at every moment of our lives, consciously or unconsciously (p. 13). In this context, values guide our behaviors, actions, attitudes, ideology, moral judgments, the way we express ourselves, and our relations with others (Rokeach, 1973, p.13) and make something desirable or undesirable (Güngör, 2000, p. 27- 28) or what is right and wrong (Altuner, 2009, p. 114). In this way, the person determines good and bad and creates ideal ways of thinking and behaving. Values also represent our priorities, interests, desires, goals, needs, the distinction between what is and what ought to be, the reasons and purposes we seek. They determine what we do in a situation, the decisions we make, and even the quality of our reactions. In other words, values guide every moment of life and form the basis of our personal and social behaviors by regulating our attitudes, behaviors, decisions and planning in this process (Öztürk, 2005, p.43 and UNESCO, 2005, p. 13-15). Thus, they play an important role on our identity, personality and life (Oktay, 2007, p. 142).

Considering the above-mentioned functions of values, there is a great need to develop values for being healthy in the individual, as well as informing people for the emergence of behaviors to be healthy and protect their health. However, according to UNESCO, it is not an easy thing for people to develop value for something, adopt it and apply it in their lives, that will occur immediately and spontaneously (UNESCO, 2005, p. 14). Because values are produced from an early age, in line with personality traits and current conditions, by being influenced by the culture, nature, society and relations with oneself (Bobaroğlu, 2001) to which a person is connected, and are formed gradually over a certain period of time (Okday, 2007, p.140 and Öztürk, 2005, p.43). While this formation is formed through exposure to the current conditions, orientation, habits, tendencies, role models and examples, it comes into play in schools and teachers in the following processes.

According to Halstead (2005, p. 2), schools and teachers in schools have a great influence on the developing values of the family, the media and the peer group, as well as children and young people, and therefore society. When the effectiveness of values and behaviors acquired at an early age are added to these explanations, the importance of primary school years will be better understood in terms of transforming personal hygiene and hygiene rules into behavior. When we look at the explanations in the literature, it is seen that the general tendency is in this direction. For example;

The most important period in terms of transforming personal hygiene rules into behavior is the primary school age. Because it is a fact that personal hygiene behaviors can be transformed into behaviors more easily at a young age. Children take the first step towards becoming a healthy individual by adding what they learned at school on top of the health information they learned from their parents. Giving personal hygiene habits correctly at school age will directly affect the health of the person in the following years (Önsüz & Hıdıroğlu, 2008, p.10).

On the other hand, the current epidemic (COVID-19), in particular, is an indication that humanity is still and will continue to face deadly epidemics and many other health threats. It is seen that the most basic way of protection from these diseases is to protect health by taking the necessary precautions to avoid diseases. Therefore, it is of vital importance to provide children with the basic knowledge, skills and values necessary to protect their health from an early age. As stated above, the basic condition of protecting health is cleanliness and hygiene. In this context, today's understanding of health is tried to be structured on taking necessary precautions before people lose their health. It is emphasized that the most important responsibility in ensuring this is on the individual himself. So, individuals must make and implement the right decisions to protect their own health.

Undoubtedly, this is only possible if the person has a sufficient level of knowledge, thought and value judgment. However, many people do not care about the situation until their health deteriorates due to attitudes and behaviors such as not having sufficient knowledge and skills or not caring even if they do. Therefore, it is very important to raise awareness and develop behavior on the subject from an early age. In this process, although there are many factors affecting human behavior, the most important of them is thought to be values.

However, the knowledge, skills, values and behaviors that are acquired from an early age are generally shaped in line with the immediate environment and the conditions one is exposed to. When this is the case, the more opportunities the environment and the conditions they are exposed to provide people with the opportunity to be healthy, the more gains people gain. In this process, if the immediate environment has insufficient knowledge, skills and values, this situation naturally reflects on the child. Therefore, knowledge, skills and values related to being healthy, which are of vital importance for their lives, should be

systematically given to children. In order to achieve this, the education and training that a person receives has a very important role. Because, although the knowledge, skills and values necessary for people's life begin to emerge with birth and with the effect of the current conditions, they are usually realized in schools in a planned manner. According to the Ministry of National Education, the purpose of the Life Science Course, which is taught during the first three years, especially since the child starts primary school, is to help students acquire the basic knowledge, skills and values that they need and can use in daily life [Ministry of National Education (MEB), 2009, p.69 ]. In this context, when the 2018 Life Science Curriculum [Ministry of National Education (MEB), 2018] is examined, it is seen that the achievements for cleaning and hygiene are included within the scope of the "Healthy Life" unit. In addition, it has been observed that while the 1st and 2nd grade "Healthy Life" unit in this program includes the achievements related to cleaning, the 3rd grade "Healthy Life" unit includes the achievements related to cleanliness and hygiene.

When we look at the explanations above, it is seen that the value orientations of the person have a significant effect on their interests, wishes, goals and especially their behaviors. Because this tendency provides the individual with goal-oriented intrinsic motivation to implement the behavior. Considering these and similar effects of values, we aimed to bring the understanding of hygiene and cleanliness to children as a value in our study, and for this purpose, we developed activities within the scope of the "Healthy Life" unit of the 3rd grade Life Science Course. These activities are in line with personal care, cleaning, hygiene and Covid-19 measures (hand and face cleaning; ear, nose, hair cleaning; body cleaning, cleaning of clothes, teeth and mouth cleaning, cleaning of food and drinks, bathroom cleaning; contact, social distance, wearing masks, etc.) have been tried to be structured in accordance with values education methods and applied through distance (online) education.

### **1.1. Purpose**

The main purpose of this study is to help students who have negative or low attitudes towards cleanliness and being healthy, to pay attention to their personal care and cleanliness, and to realize the precautions to be taken to protect their health. For this purpose, within the scope of the "Healthy Life" unit of the primary school 3rd grade Life Science Course, the implementation of the activities developed in accordance with the values education methods in line with personal care, cleaning, hygiene and Covid-19 measures through distance online education and it is aimed to determine the effect on attitudes towards hygiene and Covid-19 measures.

## **2. Method**

### **2.1. Research Design**

This study was conducted in order to reveal the differences between the attitudes of the students who participated in the sessions for the implementation of the activities developed in line with personal care, cleaning, hygiene and Covid-19 measures in accordance with the values education methods within the scope of the "Healthy Life" unit of the Life Science Course and the students who did not participate in the pre-test and post-test. The test was carried out according to the experimental model with the control group. In the pretest-posttest control group experimental model, two groups were formed, one for the experimental group and the other for the control group, by selective assignment method, and measurements were made on these groups before and after the experiment.

## **2.2. Sample**

In determining the sample of this study, criterion sampling, one of the easily accessible sampling and purposeful sampling methods, was adopted (Büyüköztürk, Kılıç-Çakmak, Akgün, Karadeniz & Demirel, 2012, p.91-92). Since it is an easily accessible school by the researcher and has the opportunity to work with and observe students more easily, 23 third grade students in a primary school in Nevşehir Centrum district in the 2020-2021 academic year constituted the sample of the research. In determining the experimental and control groups, the criterion sampling method, one of the purposeful sampling methods, was used. In this process, the criteria consist of the criteria determined by the researchers. These criteria are; the participants in the experimental and control groups came from similar economic and socio-cultural backgrounds, the students' attitudes towards cleaning, hygiene and Covid-19 pandemic measures were low, they were in the 3rd grade of primary school (Since they were taking the Life Science Course for the last time, primary school 3rd graders were preferred. Because if students with negative or low attitudes towards cleanliness and being healthy have negative or low attitudes in the 3rd grade, it is assumed that it will be more difficult for them to develop positive behaviors towards being healthy in the following years) and the students in both groups agreed to participate in the study.

Within the framework of the explanations above, an easily accessible primary school has been determined since the study should be an applied research and should be in a suitable working environment. Then, 23 students (3/B branch) with similar economic and sociocultural characteristics were identified from the 3rd grades of this school (Actually, all classes and students had similar economic and sociocultural characteristics... but still, the closest class to each other in terms of these characteristics was preferred. ). After this process was completed, the cleaning attitude scale was applied to the participants as a pretest and the averages of the obtained scores were taken [In this process, those with an average score of less than 3 were evaluated as having a low attitude, while those with a higher score were evaluated as having a medium and high attitude (having a higher attitude)]. Considering these scores (need to purposive criterion sampling), 12 students with low attitudes formed the experimental group and 11 students with higher attitudes formed the control group.

## **2.3. Data Collection Tool**

In order to determine the tendencies (attitudes) of the students towards cleanliness, hygiene and Covid-19 pandemic measures, a scale form consisting of 5-point Likert type and closed-ended items was used by adding the Covid-19 process to the Cleaning dimension of the measurement tool developed by Tahiroğlu (2011) for primary school students. This form includes “hand and face cleaning; ear, nose, hair cleaning; body cleaning, cleaning of clothes, cleaning of teeth and mouth, cleaning of food and beverages, cleaning and hygiene of the living environment; contact, social distance, wearing a mask, etc.” It consists of 20 items prepared for The ratings of the items of the scale were listed as “Totally agree, Agree, Moderately agree, Disagree, Strongly disagree” and scored as 5,4,3,2,1. In this process, the opinions of 5 experts working in the field of primary education in the field of classroom education were taken and necessary arrangements were made in line with the suggestions. Afterwards, the pilot study of the survey was conducted. The Cronbach Alpha value of the questionnaire for 3rd grade students (as a result of the reliability study for 3rd grade primary school students in the 2020-2021 academic year) was found to be 0.716. Therefore, it is a measurement tool that can be used for the sample group in this study.

## 2.4. Experimental Process

### 2.4.1. Preparing the Measurement Tool and Activities

- The Covid-19 dimension was added to the 17-item Cleanliness Attitude Scale developed by Tahiroğlu (2011) for primary school students, and a reliability study was carried out on the resulting 20-item scale.
- The activities to be applied in the experimental process were prepared by making use of the activities developed by Tahiroğlu (2011, pp. 322-324) and for the "Healthy Life" learning gains in the Life Science program of the Ministry of National Education. Particular attention was paid to the fact that primary school 3rd grade students, who have negative or low attitudes towards cleanliness and health, pay attention to their personal care and cleanliness and realize the precautions to be taken to protect their health, especially during the Covid-19 process. In this process, personal care, cleaning, hygiene and Covid-19 measures (hand and face cleaning / hygiene; ear, nose, hair cleaning / hygiene; body cleaning, cleaning of clothes, cleaning of teeth and mouth, cleaning / hygiene of food and beverages, cleaning of the living environment) activities prepared for cleaning/hygiene; contact, social distance, wearing masks) are presented in Table-1.

Table 1. Activities to give importance to cleanliness, hygiene and being healthy

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### FORMAL SECTION

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**Learning Outcomes:** To help students pay attention to their personal care and cleanliness, and to realize the precautions to be taken to protect their health.

**Qualifications to be Gained:**

- 1- To understand the importance of cleaning, hygiene and Covid-19 pandemic measures for the health of himself and his surroundings.
- 2- Gaining the habit of cleaning.
- 3- Valuing being clean, hygienic and healthy.
- 4- Be willing to be protected from epidemic diseases.
- 5- Developing behaviors to be healthy, clean and hygienic.
- 6- To comply with the rules to protect health in epidemics.

**Materials:** Video recording explaining the spread of microbes in clean and unhygienic environments, video recording explaining what can happen if personal care and cleaning is not done (infectious diseases and their effects), video recording explaining the importance of personal care and cleaning, images of people who are sick by microbes, video explaining how Covid- 19 spreads and is transmitted, the video about what can happen if Covid-19 is infected, the images of patients caught in Covid-19 and the video recordings describing the problems they are experiencing, the video about the ways of protection from Covid-19, the puppet, mud, gel paint, activity papers, boxes, empty A4 papers, soap, brushes, paste, shampoo, etc. cleaning equipment.

**Methods and Techniques:** Demonstration, narration, visual presentation, Question and answer, decision making, creative thinking, group work, educational game, demonstration, value clarification and value analysis.

**Preparation:** The recordings to be watched in the lesson will be prepared, the materials (smart board, projector, etc.) to be watched will be prepared and a preliminary test will be made. Notebooks and cleaning materials to be distributed to students will be provided, cardboard boxes and activity papers will be prepared.

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## ACTIVITIES

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### Activity 1. How Do Germs Spread? How is it transmitted? What kind of damage does it have?

- ✓ "How do germs spread in which environments? How are they transmitted to humans?" questions are posed. They are asked to think about the answer to the question using their prior knowledge. Afterwards, they are told that they will watch a movie about the answer to this question, they can take short notes while watching the movie and answer the question after watching the movie.
- ✓ A video recording describing the spread of microbes and how they are transmitted in clean and unhygienic environments is watched.
- ✓ Answers are obtained by asking "How do microbes spread in which environments? How does it infect people?".
- ✓ Well, what would happen if these microbes infected us? The question is asked and after the answers are received, a video recording of what can happen (infectious diseases and their effects) is watched when personal care and cleaning is not done, and hygiene rules are not followed.
- ✓ Afterwards, the following questions will be asked for students to understand, comprehend, and relate the subject to their lives.
  - What happens when personal care is not done?
  - What are the hygiene and hygiene rules? Why should we follow these rules?

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### Activity 2. Dirty Child

- ✓ Two identical puppet children will be prepared from cardboard boxes (head, ears, mouth, teeth, nose, hair from white threads, hands, body, and feet will be removable).
- ✓ A4 paper will be given to the students and these papers will be divided into 15 equal parts together with the students. They will then be asked to write the following separately on the pieces of paper:
  - Washing hands
  - Face wash
  - Washing the feet
  - Ear cleaning
  - Nose cleaning
  - Cleaning of hair
  - Taking shower
  - Cleaning of clothes

- Teeth and mouth cleaning
- Nail cutting
- Cleaning of food and beverages
- Bathroom cleaning
- Cleaning of the house and belongings
- Cleaning of the school
- Cleanliness of the environment we live in

After this process is completed, students are asked to arrange these papers on the row (from top to bottom).

- ✓ After sorting, “now choose one by closing your eyes...
  - Would you do this (what is written on the card you chose) in your real life?
  - How often do you do it? Do you do it voluntarily or does someone (parents, etc.) want you to do it?
- ✓ Now throw this card in the box and think like this... Nobody reminded you of this... You forgot to do this cleaning, you left it or you didn't care... and you couldn't do such a cleaning for a long time by losing this feature...
  - What did you look like? Show it on the puppet (for example, if he has not brushed his teeth, residues resembling food residues are made on the teeth of one of the puppet's... red gel paint, tomato paste residue, green paint, parsley residue, etc...).
  - What will happen as a result of this situation? (germs spread, teeth rot... etc.) after answers are received, an image representing the teeth of a man who does not brush his teeth (rotten and dirty teeth) is shown and the result is said to be similar.
- ✓ Now take out another one in the same way and throw it in the box. Now, you don't do that either... (ie you lost this feature and you didn't do such a cleaning for a long time... similar questions are asked as in the previous stage). What did you look like? Show with gel paint on the same puppet as above (everything else on the other puppet will stay clean).

In this way, the activity continues until all the papers prepared in Stage 2 are finished.

- ✓ After the activity is over, “Now examine this puppet...” You are in the puppet's place (you could not or could not fulfill the cleaning duties) ... What kind of person have you become? What kind of problems await you in this case? What do you feel?

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### Activity 3. What can I do? Why are these important?

- ✓ Students will be shown a film recording explaining how personal care and cleaning is done, and how hygiene is provided.
- ✓ Then, the following questions are asked for them to understand, comprehend and relate the subject to their lives.
- ✓ What causes or will microbes cause?
- ✓ How can this be prevented?
- ✓ Do you plan to do something about it? What can you do to protect yourself from these germs? How do you do what you say?

- ✓ So, do you really intend to do what you say? What if you forget again? If someone doesn't remind you... or if you don't care?... They are asked to reflect on their questions...
  - ✓ Now that the thinking process is complete, think about the attributes you threw in the "Dirty Child Activity" ... Would you like to regain these attributes?
- 

#### **Activity 4. Clean Child**

- ✓ Students will be able to regain the features they lost in the " Dirty Child Activity"; however, they are told to answer the following questions. Then they are asked to close their eyes and choose a card from the box and look at it. The following questions are asked about this card:
    - ✓ Is this important to you?
    - ✓ Do you really want to regain that cleaning feature?
    - ✓ Do you want this feature to be in your real life as well?
    - ✓ Well, what do you plan to do or what do you need to do to have this feature in your real life?
    - ✓ Do you think this is enough? how and how often do you plan to do it from now on to be sufficient?
    - ✓ Do you need someone to remind you to do these things?
    - ✓ How will doing this affect your life in the future? Is it worth the time and money (remember water, cleaning supplies fee, etc.)?
    - ✓ Are you determined to do this? Is it necessary and appropriate for you?
    - ✓ After the questions are answered, those who really want this are asked to remove the relevant piece from the clean puppet and replace it with the piece from the dirty puppet, and discard the dirty piece, never to enter their life again.
    - ✓ Similar processes are applied for other properties as well. However, for the children not to get bored, all the questions are asked by spreading all the features instead of each feature.
    - ✓ After the activity is over, "Now examine this puppet..." You are in the puppet's place (you have done the cleaning duties) ... Now, what kind of person have you become? What do you feel?
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#### **Activity 5. Epidemics**

- ✓ "Yes, children, now we have become a clean and healthy child by doing our cleaning and following the hygiene rules. However, this may not always be sufficient. The ongoing Covid-19 outbreak is an important example of this situation. In other words, sometimes epidemics and infectious diseases affect all humanity, and although we follow the rules of cleanliness and hygiene, the probability of transmission is quite high. That's why, in addition to strictly complying with the rules of cleaning and hygiene, especially during epidemics, there are additional precautions we need to take." presentation is made.
- ✓ The video about how Covid-19 spreads and is transmitted, the video about what can happen if Covid-19 is infected, the images of patients caught in Covid-19 and the video recordings describing the problems they experience are watched.

- ✓ Then, the following questions are asked for them to understand, comprehend and relate the subject to their lives.
- ✓ How is Covid-19 spreading and transmitted?
- ✓ What does the covid-19 virus cause?
- ✓ A4 paper will be given to the students and these papers will be divided into 3 equal parts together with the students. They will then be asked to write the following separately on the pieces of paper:
  - Contact
  - Social Distance
  - Wearing a mask
- ✓ Not staying in closed areas outside the home for a long time
- ✓ After this process is completed, students are asked to arrange these papers on the row (from top to bottom).
- ✓ After sorting “now close your eyes and choose one...
  - Would you do this (what is written on the card he chose) in your real life?
  - How often do you do it? Do you do it voluntarily or does someone (parents, teachers, etc.) want you to do it?
- ✓ Now throw this card in the box and think about it... Nobody reminded you of this... You forgot to do it, you stopped, or you didn't care... and you didn't follow this rule for a long time...
  - What do you think will happen? Demonstrate on the puppet (viral shapes are drawn on the puppet).
- ✓ After the activity is over, “Now examine this puppet...” You are in the puppet's place. What kind of problems await you in this situation? What do you feel?
- ✓ How can this be prevented? After the question is asked and the answers are received, the "video describing the ways of protection from Covid-19" is watched. Then the following questions are asked.
  - What should be done to prevent the epidemic? Feedback is given after answers are received.
  - What are you doing to protect yourself from this epidemic? What are you planning to do next?
  - So, do you really intend to do what you say? What if you forget again? If someone doesn't remind you... or if you don't care?... They are asked to reflect on their questions...
  - After the reflection process is complete, “What have you decided on?” The question is asked and after the answers are received, "Let's do what we say then." Trying to move to the stage of movement (the movement stage is the behavior of children in normal life) and this process is observed.

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### Activity 6. My Personal Care, Cleaning and Hygiene Plan

- ✓ A table will be prepared with the students, which they will use throughout the activity and which will later become their personal cleaning diary. For this, the following processes are followed:
  - To support the students to transform their thoughts, attitudes and values towards cleanliness, hygiene and being healthy into behavior, they are first asked to re-

examine the cards prepared for cleaning, hygiene, and Covid-19 pandemic measures. After reviewing the cards

- “How and when can these cleanups be done without forcing you (without affecting your other plans)?” The question is asked, and they are asked to answer in writing. When answering this question, the Instruction "Specify the duration and when it can be done" is given.
- ✓ It is said that a cleaning plan will be prepared using the students' answers. In this process, the teacher prepares a weekly cleaning plan for himself/herself (which he/she will prepare with the students as a model). Before starting this plan, the following reminders are made:
  - This plan should be such that it does not affect your other plans.
  - If this plan doesn't suit you, you can change it to suit you.

After this reminder, the plan is prepared daily and weekly according to the content of personal care, cleaning, and hygiene processes (for example, washing hands during the day in line with hygiene rules, nail cutting weekly, etc.).

- ✓ After the plan is prepared, it is said that they will create a cleaning control chart to follow this plan, and it is emphasized that this will help them control themselves. A4 papers are given and a weekly chart is prepared with the students.
- ✓ They are asked to place this chart in a suitable place where they can see it in their bedroom. Every evening, before going to bed, this chart should be checked and they are asked to mark the cleaning and maintenance they have done in line with the prepared plan. In this process, they are told that if there is a cleaning/maintenance they did not do, forgot or do not want to do, they should not mark it (it is emphasized that they must be honest with themselves while doing this and it is important for them).
- ✓ When they get up in the morning, they are told to look at the plan again and remember what to do.
- ✓ “In a week, let's talk about these charts together. In this process, of course, your charts will be private, and you will not have to share them with anyone from the school. The lesson ends by saying, "You will only use it to monitor and control yourself". In addition, the teacher says that he will do the same things with the children to be a model.
- ✓ One week later, the chart is checked and if there is a cleaning that they did not do, they are asked to paint as they did in the "Dirty Child" activity.
- ✓ They are asked to examine the situation that has arisen on the puppet and the following statements are directed.
  - Now that puppet is really you. How do you feel in this situation?
  - So, did this make you happy? So are you satisfied with the result?
  - Do you intend to continue this way?
- ✓ Finally, in the group created for communication with students and parents during the distance education process (the communication group created over the phone), it is said that those who want can share the visuals of their cleaning and personal care. To be a role model in this process, the teacher also occasionally does hand, face washing, nail cutting, etc. Shares cleaning and personal care images.

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**Evaluation:** It will be evaluated whether the students act in accordance with the prepared plan. In addition, the Healthy Life Unit evaluation processes will be used.

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- The activities given in Table 1 have been prepared in relation to the achievements and course contents of the Life Science Course Healthy Life Unit. In addition, in the primary school 3rd grade curriculum, the Life Science course is 3 hours per week and 40 minutes per hour. For this reason, the activities given above were handled in the Primary School 3 Life Science Course Healthy Life Unit by associating them with the subjects and achievements and integrating them with the subjects. This process has been prepared as 4 weeks and 12 lesson hours in total. In addition, due to the pandemic, the activities have been prepared in a way that can be implemented online, since the education processes are often conducted remotely online.

#### 2.4.2. Application of the Experimental Process

- The Cleanliness Attitude Scale was applied to the experimental and control groups as a pre-test. Before the application process, the scale items were read by the practitioner to make sure that the students understood, and the students' comprehension was checked. Then, the items were evaluated in line with the criteria in the scale.
- After analyzing the data obtained from the application of the scale, the experimental group was formed from 12 students with low attitude ( $\bar{X}=2.8$ ) and a control group from 11 students with higher attitude ( $\bar{X}=4.14$ ), as required by purposeful criterion sampling.
- The activities prepared for the experimental process were applied to the experimental group. The application process was carried out in a total of 12 lesson hours. On the other hand, the control group was taught simultaneously with the experimental group in line with the curriculum of the Primary School 3 Life Science Course.
- The application was carried out within the framework of the Primary School 3 Life Sciences Course in the 2020-2021 academic year. On this date, due to the Covid-19 epidemic measures in our country, classes were held online from remotely.
- Cleanliness Attitude Scale was applied to the experimental and control groups as a posttest.
- The obtained data were analyzed and interpreted by the researchers.

#### Analysis of Data

In the interpretation of the items in the scale, starting from the "I totally agree" option, they were scored as 5,4,3,2,1 towards the "I totally disagree" option, and data were entered into the program. In the data entry of negative statements, coding was done in the opposite direction (5,4,3,2,1). After the pretest and posttest scores of the experimental and control groups were obtained, it was observed that the data did not show a normal distribution according to the Shaphiro-Wilk analysis results and the skewness/kurtosis values in the comparisons between the groups. Considering this situation, the Mann-Whitney U test, which is one of the non-parametric statistical tests, was used to compare the success of the experimental and control groups. In this process, 0.05 confidence level was adopted as the significance level.

### 3. Findings

According to the test results applied, the findings related to the pre-test scores that the experimental and control groups got from the Cleanliness Attitude Scale are shown in Table 2.

Table 2. Findings Regarding the Pre-Test Scores from the Cleaning Attitude Scale

Group	N	Mean Rank	Sum of Ranks	U	p
<b>Experiment</b>					
	12	6.79	81.50	3.500	.000
<b>Control</b>					
	11	17.68	194.50		

As can be seen from Table 2, when the mean scores of the students in the experimental and control groups obtained from the cleanliness dimension of the Cleanliness and Wellness Attitude Scale before the experimental procedure were tested with the Mann-Whitney U Test at a significance level of 05, in favor of the control group among the groups. It was found that there was a significant difference ( $U=3,500$ ,  $p<0.05$ ). According to this result, the pre-experimental attitudes of the students in the control group towards cleaning were significantly higher than the students in the experimental group. In this process, when the average scores of the students in the experimental and control groups are examined (Experimental group  $\bar{X}= 2.8$ ; Control group  $\bar{X}= 4.14$ ), it is seen that the average attitude scores of the control group towards cleanliness and being healthy are also quite high.

After these pre-test results, the activities described above and developed in accordance with the values education methods were applied in the form of distance online education in order to increase the attitudes of the experimental group students towards cleanliness.

At the end of the process, to determine the effect of these activities, it was first examined whether there was a significant difference between the post-test mean scores of the subjects in the experimental group and the mean scores of the students in the control group. The findings related to the post-test scores of the experimental group and the scores of the control group from the Cleanliness Attitude Scale are shown in Table 3.

Table 3. Findings Regarding Post-Test Scores from the Cleaning Attitude Scale

Group	N	Mean Rank	Sum of Ranks	U	p
<b>Experiment</b>					
	12	9.75	117.00	39.000	.095
<b>Control</b>					
	11	14.45	159.00		

As seen in Table 3, when the mean scores of the students in the experimental group from the post-test of the Cleanliness Attitude Scale and the scores of the students in the control group were tested with the Mann-Whitney U Test, it was found that there was no significant difference between the groups ( $U=39.000$ ,  $p>0.05$ ). This result shows that the cleaning activities developed in accordance with the values education methods significantly increased the attitudes of the experimental group students and made them close to the attitudes of the control group students, who did not take any action and had high attitudes. On the other hand, when the average scores of the students in the experimental and control groups were re-

examined after the implementation process (Experimental group  $\bar{X}$ = 3.81; Control group  $\bar{X}$ = 4.04), the average attitude scores of the experimental group towards cleanliness increased considerably (from  $\bar{X}$ =2.8 to  $\bar{X}$ =3.81). ) and the control group were found to be close.

In addition, the pre-test and post-test scores of this group were compared in order to determine the effects of the activities on the experimental group. The findings regarding the pre-test and post-test scores of the experimental group are shown in Table 4.

Table 4. Findings Regarding the Pre-test and Post-test Scores of the Experimental Group from the Cleanliness Attitude Scale

Group	N	Mean Rank	Sum of Ranks	U	p
<b>Pre-test</b>	12	7.67	208.00	14.000	.001
<b>Post-test</b>	12	17.33	92.00		

As can be seen from Table 4, when the pre-test and post-test scores of the students in the experimental group were tested with the Mann-Whitney U Test, there was a significant difference was found between the pre-test and post-test scores in favor of the post-test (U=14,000). , p<0.05).

#### 4. Conclusion and Discussion

As a result, it has been observed that the implementation of activities for personal care, cleaning, hygiene and Covid-19 measures developed in accordance with value education methods by integrating them into the Primary School 3rd Grade Life Science Healthy Life unit significantly increased the students' attitude scores towards cleanliness and being healthy. No significant change was observed in the control group. These findings have made significant contributions to the students who have negative or low attitudes towards cleanliness and health, to pay attention to their personal care and cleanliness, to gain awareness about the precautions to be taken to protect their health, and to develop positive attitudes and behaviors to protect their health. For this reason, it has been seen that it is very important to develop values for being healthy in the individual, as well as to provide information for the reflection of the education to be healthy and to protect the health. Because only gaining the necessary knowledge and skills on the relevant subject does not guarantee that it will be transformed into behavior. As a matter of fact, the findings of this study showed that more than half of these students did not develop enough positive attitudes and behaviors towards the subject, although they received the same education and training on the subjects related to cleanliness and being healthy (Healthy Life Unit subjects) by the same teacher/teachers in the same class from the first grade of primary school. This situation reveals the importance of the individual's interests, wishes, goals and especially value orientations for the transformation of acquired knowledge and skills into behavior. Already, experts who are interested in the subject (UNESCO, 1992; Lopes-de-Oliveira, Toledo & Araújo, 2018) point to values as the basic basis of people's behavior, choices, and decisions. Therefore, for people to adopt something and apply it in their lives, it is necessary for them to develop values for it (UNESCO, 2005).

Research on the subject supports these ideas. For example, it was stated that there was evidence that the Song-Based Values Education Program prepared by Topaç (2022) had positive effects on students' emotions and behaviors towards their social skills. In the study conducted by Kulanşı (2021), to reveal the effects of values education on prevention and

recovery from substance addiction, it was found that there is a positive relationship between the development of one's values and the behaviors of prevention and recovery from substance addiction; In the study conducted by Çayan-Yobaş (2020), it was concluded that values education practices in which students actively participate allow the child to develop positive values and behaviors towards the subject. In the study conducted by Akdoğan (2019), it was found that the effect of values education on students' positive attitudes and behaviors is very important. In addition, the activities developed by integrating them into values education; Tahiroğlu (2013), on benevolence attitudes and behaviors; Tahioğlu & Çetin (2012), on paying attention to being healthy attitudes and behaviors; Aladağ (2009), on responsibility attitudes and behaviors; Keskinöglü (2008), on attitudes towards moral maturity and aggression; Taylor (2007) on honesty, self-control, responsibility, reliability, respect and sportsmanship behaviors; Meaney (1979), on self-esteem, emotional, intellectual and physical development potential, family, friends, people with disabilities, responsibilities, patriotism, protection of the natural environment, aesthetic understanding and attitudes and behaviors towards hungry people; Thompson (2002) conducted studies showing that it has significant positive effects on all behaviors when applied effectively.

In studies on being healthy (Avşar & Kaşıkçı, 2009; Oyibo, 2012; Gözüm & Çapık, 2014; Bulduk, Yurt, Dinçer & Ardiç, 2015) it is generally stated that a person should have the necessary knowledge and skills to maintain their health; however, in order to transform this knowledge and skill into behavior, it is emphasized that they need to develop positive attitudes and values towards the subject. In this context, it has been observed that the students exhibited positive attitudes and behaviors during and as a result of the implementation of the activities for personal care, cleaning, hygiene and Covid-19 measures developed in accordance with the values education methods in line with the main purpose of the study. This situation can be interpreted as benefiting from values education processes in the process of gaining positive attitudes, behaviors and values towards cleanliness and being healthy will be highly beneficial.

On the other hand, the activities developed for this study were tried to be implemented in the form of distance online education. In this process, some students had difficulties in preparing puppet from cardboard, some of them painted it with wrong colors in the dirty child activity, the problems experienced in showing the results at the end of the activity (not being able to hold the camera in a suitable position), the distraction of some students in front of the screen, and the inability to focus enough at times due to distance online education. There have been some problems. Apart from that, most of the students actively participated in the activities and expressed their reactions openly, especially when they put themselves in the place of the puppet in the last part of the dirty child activity. Some students even stated that they will do their personal care and cleaning again and follow the hygiene rules. In this case, it shows that the participants were highly impressed by the activity, and they intended to exhibit positive behaviors towards personal care, cleaning, and hygiene.

Based on the explanations above and the findings of our study, it is recommended that students gain knowledge and skills about being healthy, as well as gaining values and habits related to the subject. Considering the importance of early ages and life science course in gaining values and habits for being healthy, it is recommended that the Healthy Life Unit should be integrated with values education.

When the findings of the study examined, it is seen that students' positive attitudes and behaviors towards cleanliness, hygiene and being healthy have increased. Therefore, it is recommended to benefit from the activities in this study or similar activities to develop

children's positive attitudes, positive behaviors, awareness and value judgments towards cleanliness, hygiene and being healthy.

This study was carried out through distance education and positive results were achieved. However, some problems or disruptions (mentioned above) were experienced in the process. It is predicted that even more positive results can be achieved when done face to face. Therefore, it is recommended to develop and implement similar activities in face-to-face education processes, to reveal the results, to identify problems and disruptions, if any, and to develop such activities further.

On the other hand, behaviors, and habits for being healthy are not only a problem of early age groups. It is seen at all ages and levels. Therefore, it is recommended to develop activities for students of different ages and levels who do not have positive values, attitudes, and behaviors towards being healthy, to gain these values, attitudes and behaviors.

## References

- Akdoğan, Y. (2019). *İlkokul görsel sanatlar dersinde değerler eğitiminin öğrenci çalışmalarına yansımaları üzerine durum çalışması*. (Unpublished master's thesis), Necmettin Erbakan University
- Aladağ, S. (2009). *İlköğretim sosyal bilgiler öğretiminde değer eğitimi yaklaşımlarının öğrencilerin sorumluluk değerini kazanma düzeyine etkisi*. (Unpublished doctor's thesis), Gazi University
- Altuner, İ. (2009). İhtiyaç, metafizik ve bilim açısından değerler felsefesi. *Değerler Eğitimi Merkezi Dergisi*, 2 (5), 112-124
- AusAID (2011). *Hands up for hygiene! Teaching hygiene behaviour in Pacific schools*. [https://livelearn.org/assets/media/docs/resources/Hands\\_Up\\_for\\_Hygiene.pdf](https://livelearn.org/assets/media/docs/resources/Hands_Up_for_Hygiene.pdf)
- Avşar, G. & Kaşıkçı, M. (2009). Ülkemizde hasta eğitiminin durumu. *Atatürk Üniversitesi Hemşirelik Yüksekokulu Dergisi*, 12 (3), 67-73
- Bobaroğlu, M. (2001). Değer üreten bir varlık olarak etik insan. *Us Düşün ve Ötesi*, 6. Retrieved November 03, 2019 from <http://www.dusunuyorumdergisi.com/deger-ureten-var-lik-olarak-etik-insan/>
- Bulduk, S., Yurt, S., Dinçer, Y. & Ardic, E. (2015). Sağlık davranışı modelleri. *Düzce Üniversitesi Sağlık Bilimleri Enstitüsü Dergisi*, 5 (1), 28-34.
- Büyüköztürk, Ş., Kılıç-Çakmak, E. Akgün, Ö.E., Karadeniz, Ş., & Demirel, F. (2012). *Bilimsel araştırma yöntemleri* (12<sup>th</sup> Edition). Pegem Akademi
- Çayan-Yobaş, H. (2020). *Yapılandırmacı yaklaşım bağlamında değerler eğitimine yönelik yöntem ve tekniklerin uygulanması (7. sınıflar örneği)*. (Unpublished master's thesis), Erzincan Binali Yıldırım University
- Gözüm, S. & Çapık, C. (2014). Sağlık davranışlarının geliştirilmesinde bir rehber: Sağlık İnanç Modeli. *Dokuz Eylül Üniversitesi Hemşirelik Yüksekokulu Elektronik Dergisi*, 7 (3), 230 – 237. <https://dergipark.org.tr/tr/pub/deuhfed/issue/46807/586981>
- Güngör, E. (2000). *Değerler psikolojisi üzerine araştırmalar* (3<sup>th</sup> Edition). Ötüken Yayınları
- Halstead, J. M. (2005). Values and values education in schools. In J. M. Halstead and M. J. Taylor (Eds.), *Values in Education and Education in Values* (p. 1-13), Taylor & Francis e-Library. ISBN 0-203-97355-0
- Keskinoğlu, M. Ş. (2008). *İlköğretim beşinci sınıf öğrencilerine uygulanan Mesnevi Temelli Değerler Eğitimi Programının ahlaki olgunluğa ve saldırganlık eğilimine etkisi*. (Unpublished master's thesis), Yeditepe University
- Kulaş, E. (2021). *Değerler eğitiminin madde bağımlılığından korunma ve kurtulma öz-yeterliliğine etkisi*. (Unpublished master's thesis), Atatürk University
- Lopes-de-Oliveira, M. C., Toledo, D. C. & Araújo, C. M. (2018). Continuity and discontinuities in the self-system: a values-based idiographic analysis of gender positionings. In A. U. Branco and M. C. Lopes-de-Oliveira (Eds.), *Cultural Psychology of Education-6: Alterity, Values and Socialization* (p. 191- 207). Springer International Publishing AG. ISBN 978-3-319-70506-4
- Meaney, M. H. (1979). *A guide for implementing values education in the primary grades*. (Unpublished doctor's thesis), Seattle University

- Mercin, L. (2005). Piaget ve Kohlberg'in ahlak (moral) gelişim kuramlarının özellikleri ve karşılaştırılması. *Sosyal Bilimler Araştırma Dergisi (SBArD)*, 5, 73-86
- Milli Eğitim Bakanlığı [MEB], (2018). *Hayat bilgisi dersi öğretim programı (İlkokul 1,2 ve 3.sınıflar)*. <https://mufredat.meb.gov.tr/ProgramDetay.aspx?PID=326>
- Milli Eğitim Bakanlığı [MEB], (2009). *İlköğretim 1, 2 ve 3. sınıflar hayat bilgisi dersi öğretim programı ve kılavuzu*. MEB Yayınları
- Oktay, A. S. (2007). İslam düşüncesinde ahlaki değerler ve bunların global ahlaka etkileri. In R. Kaymakcan, S. Kenan, H. Hökelekli, Ş. Arslan ve M. Zengin (Eds.), *Değerler ve Eğitimi Uluslararası Sempozyumu Bildirileri* (p.131-143), DEM Yayınları
- Oyibo, P. G. (2012). Basic personal hygiene: Knowledge and practices among school children aged 6-14 years in Abraka, Delta State, Nigeria. *Continental Journal of Tropical Medicine*, 6 (1), 5-11. <https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.364.4287&rep=rep1&type=pdf>
- Önsüz, M. F. & Hıdıroğlu, S. (2008). İstanbul'da farklı iki ilköğretim okulundaki öğrencilerin kişisel hijyen alışkanlıklarının belirlenmesi. *Adnan Menderes Üniversitesi Tıp Fakültesi Dergisi*, 9 (1), 9 – 17
- Öztek Z, Üner S & Eren N. (2012). Halk sağlığı kavramı ve gelişmesi. In Ç. Güler ve L. Akın (Eds.) *Halk Sağlığı Temel Bilgiler*, (2<sup>th</sup> Edition, p.2-24), Hacettepe Üniversitesi Yayınları, No. 2: 20.
- Öztürk, Z. (2005). On Beşinci Yüzyıl şairlerinden Akşemseddinzade Hamdullah Hamdi'nin Yusuf ve Zeliha Mesnevisinde işlenen değerler. *Değerler Eğitimi Dergisi*, 3 (10), 41-72
- Rokeach, M. (1973). *The nature of human values*. New York: Free Press
- Smyth, J. C. (2005). Environmental values and education. In J. M. Halstead and M. J. Taylor (Eds.). *Values in Education and Education in Values* (p. 52-65). Taylor & Francis e-Library. ISBN 0-203-97355-0
- Tahiroğlu, M. (2013). Performance task application concerning the promotion of the value of helpfulness in social studies course for primary schools. *Educational Sciences: Theory & Practice*, 13 (3), 1843-1862
- Tahiroğlu, M. & Çetin T. (2012). İlköğretim 4. sınıf sosyal bilgiler dersinde sağlıklı olmaya önem verme değerinin öğretimine ilişkin öğrenci tutumları. *Kuram ve Uygulamada Eğitim Bilimleri*, 12 (2), 1633-1651
- Tahiroğlu, M. (2011). *İlköğretim 4. sınıf sosyal bilgiler dersinde doğa sevgisi, temizlik ve sağlıklı olma değerlerinin öğretimi ve değerlere ilişkin öğrenci tutumlarının belirlenmesi*. (Unpublished doctor's thesis), Gazi University
- Taylor, H.J. (2007). *A comparison of character trait scores for affrotc students versus non-affrotc students*. (Unpublished doctor's thesis), Wilmington College
- Thompson, W. G. (2002). *The effects character education on student behavior*. (Unpublished doctor's thesis), East Tennessee State University
- Topaç, N. (2022). *Şarkı ağırlıklı değerler eğitimi programının (ŞADEP) 5-6 yaş çocuklarının sosyal becerilerine etkisi*. (Unpublished doctor's thesis), Bursa Uludağ University
- Ulusoy, K. (2019). *Karakter değerler ve ahlak eğitimi*. Pegem Akademi

UNESCO. (2005). *Learning to do: Values for learning and working together in a globalized world*. L. R. Quisumbing and J. Leo (Eds.) 06.01.2009 tarihinde, [http://www.unevoc.unesco.org/fileadmin/user\\_upload/pubs/LearningToDo.pdf](http://www.unevoc.unesco.org/fileadmin/user_upload/pubs/LearningToDo.pdf)

UNESCO (1992). *Education for affective development: a guidebook on programmes and practices*. Bangkok (Thailand): UNESCO Principal Regional Office for Asia and the Pacific. <http://unesdoc.unesco.org/images/0009/000932/093253eo.pdf>