

School health education and promotion: current approaches and critical perspectives: part 2

Introduction

This is the second of two special issues that focus on the critical perspectives in health education. As we suggested in our first editorial (Leahy and Simovska, 2017), critical health and well-being education research interrogates the politics, purposes and practices of health education. In the original call for papers, we placed a focus on the research that adopted a “critical approach” to school health and well-being. Such analyses can include historical, conceptual and empirical studies that examine curriculum content and teaching strategies. This work necessarily requires the revisiting of the underlying epistemological and methodological assumptions of research in the field with a view of exploring the many complexities involved in the field of health education in schools. Given health education’s continuing role in policy and curriculum and the rise of well-being agendas in schools, we suggest that it is crucial that we continue to question the everyday taken for granted assumptions that both characterize and drive the field. This work, rather than being simply understood as critique, requires all of us engaged with the empirical and theoretical development and implementation of health education and health promotion to continuously revisit, rethink and develop our research, policy and practice as we work to ensure better health and well-being education.

Connection with European Educational Research Association (EERA) research network

This special issue of *Health Education* is the second in the series of special issues planned under the framework of a collaboration between Emerald and the European EERA Network 8, Research on Health Education. EERA consists of more than 30 member associations and is organised in topic-based research networks with members from all over the world, representing broad range of the interdisciplinary field of educational research. EERA’s annual conference is attended by about 2,500 participants from across the globe.

Overview of the papers

There are six papers in this special issue. The papers utilise different approaches to critical scholarship and provide insights into school health and well-being education across a range educational contexts from the USA, Denmark, Finland, Spain, Australia and Canada.

The first paper by Martinson and Elia entitled “Ecological and political economy lenses for school health education: a critical pedagogy shift” provides an examination of school health education in the USA. In this conceptual paper, the authors draw insights from ecological models to highlight the limitations and opportunities for the improvement of health education. They reveal the dominance of individualistic approaches of health education and trouble how such approaches mean that programmes rarely engage with, or integrate the social determinants of health. For the authors, and many others engaged in the field, in areas such as research, scholarship, practice, policy making and implementation, this raises serious questions about the work that is sometimes done under the guise of health education. Martinson and Elia suggest that one of the ways forward is to ensure that versions of taught health education are grounded in ecological and political economy understandings of health and in critical pedagogies that allow students to more



comprehensively and accurately understand the complex nature of health, how their own socio-psychological worlds influence health, and their own potential for agency within those worlds.

In the second paper, Wright, O'Flynn and Welch search for a "Socially critical health education by exploring the views of health and physical education preservice teachers in Australia". As in Martinson and Elia's paper, the authors take issue with the continued dominance of individual behaviour change approaches in the field of health education. They suggest that a counter-model to this is a critical inquiry approach. They argue that this approach could shift the educative focus of health education towards developing students' capacities to engage critically with knowledge through reasoning, problem solving, and challenging taken for granted assumptions. Given this desire, the paper looks at what is currently happening within health education at grassroots level in teacher education, and questions whether or not critical ambitions are indeed possible in this context. The authors draw from data collected from 13 preservice health and physical education (HPE) teacher interviews that were related to school practice in health education, using the concept of "biopedagogies" to analyse the interviews. For their participants, the purpose of health education was essentially about risk reduction, improving the health of young people by attempting to reduce the risks that young people were exposed to. Given this focus, there was a little space for critical approaches. The authors conclude by suggesting that teacher educators need to work more explicitly within an educative approach that considers social contexts, health inequalities, and the limitations of a risk reduction, behaviour change model.

In the third paper, LeAnne Petherick offers an analysis of race and culture in secondary school HPE in Ontario, Canada. Petherick's paper "Race and culture in the secondary school health and physical education curriculum in Ontario, Canada: A critical reading" utilises critical race theory to analyse the secondary HPE curriculum. Her analysis highlights how the new curriculum provides multiple entry points for students to learn more about culture and race. For example, she highlights the fact that the areas of food, substance use and movement are considered to be key areas where issues of culture and race can be addressed. The acknowledgement in the curriculum of First Nations, Métis and Inuit people is significant when compared to other recently revised HPE curriculum from around the globe. She argues that this curriculum appears to offer more opportunity to educate people about how culture and identity affect health than is the norm.

Roen, Graugaard and Simovska in their paper "The research landscape of school-based sexuality education – systematic mapping of the literature" review the characteristics of the international research on school-based sexuality education. The purpose of the mapping is to discuss the overall characteristics of the research, with a particular focus on the framing of critical approaches. The review reveals that the international research landscape in this field is dominated by research conducted in schools in English-speaking countries. The authors find significant diversity in terms of the theoretical and methodological approaches, but despite this, they also find an overall lack of conceptual research. They also conclude that research that examines sexuality education aimed at younger children is generally a neglected field of study. Based on their findings, the authors make several recommendations. First, they call for research that engages with more diverse sociocultural, political and geographical contexts. Second, they suggest that there is a need for more conceptual research that utilises social theory. Finally, they suggest that there is a need for more research focussing on the potentials and challenges linked to critical sexuality education for younger pupils.

Cala and Soriano in their paper entitled "School and emotional wellbeing: a transcultural analysis on youth in Southern Spain" assess and compare emotional and school well-being among Romanian, Moroccan and Spanish youth in Southern Spain, and explore the relationships between them. The authors utilise a cross-sectional research method with

cluster sampling. They demonstrate that there are significant differences around emotional well-being relating to gender, with girls showing less emotional well-being than boys. The study also found that emotional well-being was lower in Moroccan students. However, levels of school well-being were higher in Moroccan students and girls. Emotional well-being and school well-being are presented as related and co-linear variables with a predictive power over one another. However, as their mixed and apparently somewhat contradictory findings show, understanding cultural expressions in heterogeneous cultures is a complex task and the cross-cultural approach deployed here allows for a questioning of the well-being framework that dominates modern western culture. The paper suggests that gender and culture remain decisive determinants for adolescent health, with both positive and negative effects. The authors argue that it would be useful to develop educative strategies to implement transcultural emotional and school well-being that build on the strengths of different communities.

The final paper “Subjective health literacy among school-aged children” explores Finnish adolescents’ subjective health literacy and its association to school achievement, learning difficulties, educational aspirations, and family affluence. In the first nationally representative study on health literacy, Paakkari and colleagues analysed Finnish data that were collected as a part of the International Health Behaviour in School-aged Children study. The sample consisted of a total of 3,833 adolescents from seventh and ninth grade from 359 schools. Analyses of data revealed that approximately one-third of the sample manifested a high level of HL, around 60 per cent had a moderate level of HL, and about one-tenth had low HL. Analysis also revealed that there were age and gender differences. For example, HL level was lower for boys than for girls, and lower for seventh graders than for ninth graders. In the total sample, the authors found that the strongest explanatory variables for HL were school achievement in the first language and educational aspirations.

Endnote

This second special issue portrays six different takes on critical health and well-being education in different geographical, socio-political and educational contexts. With this portrayal, we hope to continue to contribute to, and advance, debate related to the often taken for granted role that school health education is afforded and the mechanisms by which it is enacted. Different forms of critical research can also be valuable in providing more nuanced analyses and evidence which can inspire further development of health education practices in schools as well as related professional competences of teachers. Finally, we hope that such critical research can set the agenda for policy and curriculum development that consider the wider determinants of health and aim at the development of pupils’ comprehensive health-related competences instead of the regulation of their behaviour.

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Reference

Leahy, D. and Simovska, V. (2017), “Critical perspectives on health and wellbeing education in schools”, *Health Education*, Vol. 117 No. 5, pp. 430-433.