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'Health Education: Informed choices about health, physical activity and sleep'

Charlotte Ross, Kimberley Hibbert-Mayne and Dave Woodward

Aims of this chapter:

- To consider how we present the notion of health in education.
- To suggest a content structure for health, physical activity, and sleep across Key Stages 3, 4
 and 5.
- To explore ideas regarding positive pedagogy when teaching health education to encourage pupils to understand how to change/maintain healthy behaviours over time.

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What is health education?

Comprehensive and thoughtful health education allows pupils to approach decision-making from an informed perspective and understand the impact of such decisions. Although health education as a concept is vast and difficult to define due to its meaning for each individual, the PSHE statutory guidance (Department for Education (DfE), 2021) offers key principles and content that will support pupils in and beyond their school years.

The World Health Organisation (WHO) recognise that there is a "sense of urgency" required to respond to the ever-changing needs of our young people (WHO, 2017, p.25). This is compounded by concerning data published by the National Health Service (NHS) demonstrating the decline in children and young people's mental health and quality of sleep, school days missed and an increase in eating problems between 2017 and 2021 (NHS, 2021).

The place of education is pivotal as part of the broader Public Health Framework (Public Health England (PHE), 2015). Understanding how to present health education is constantly changing. However, there may be some pedagogical choices that can engage our pupils if creativity, pupil voice

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and choice are employed. Strömmer et al., (2021) suggest that adolescents do not prioritise being healthy; therefore, traditional methods of information giving with health as the only motivator are met with poor outcomes. Interventions should allow pupils to have multiple opportunities that are easy to access and achieve and incorporate their peers. Physical Activity Guidelines from the Department of Health and Social Care (2019) reinforce this message by ensuring that we communicate beyond the guidelines and highlight to our pupils that health benefits are irrespective of how much exercise is completed, there is "no absolute threshold" (p. 14). This could help pupils to feel empowered to reach achievable goals with strong links to motivational processes.

Suggested Content Structure for Health, Physical Activity and Sleep

Area of the	Key Stage 3	Key Stage 4	Key Stage 5	Health	PSHE
Curriculum				Objectives	Objectives
Health	Consider	To be able to	Planning and	The	To make
	what might	research	taking	characteristics	informed
	influence	personal	responsibility	and evidence	lifestyle
	decisions	choices	for personal	of what	choices
	regarding	regarding	health and	constitutes a	regarding
	health	health.	well-being.	healthy	sleep, diet
	choices, for	Develop a	How to	lifestyle,	and exercise
	example, diet.	further	recognise	maintaining a	The purpose
	The possible	understanding	illnesses that	healthy	of blood,
	impact of	of ill health.	particularly	weight,	organ and
	unhealthy		associated	including the	stem cell
	choices on			links between	donation for

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	physical and		with young	an inactive	individuals
	mental		adults.	lifestyle and ill	and society.
	health.			health,	
				including	
				cancer and	
				cardiovascular	
				ill-health.	
				The science	
				relating to	
				blood, organ	
				and stem cell	
				donation.	
Physical	Addressing	The wider	Independent	The positive	A range of
Activity	gaps in	benefits of	physical	associations	healthy
	physical	physical	activity	between	coping
	literacy post	activity and	choices and	physical	strategies and
	pandemic.	how this	planning for	activity and	ways to
	Encouraging	might aid	life-long	promotion of	promote
	pupils to find	stress	participation.	mental well-	wellbeing and
	physical	management.		being,	boost mood,
	activity that	Physical		including an	including
	they enjoy.	activity		approach to	physical
	Introduce the	preferences.			activity.

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	wider			combat	The benefits
	benefits of			stress.	of physical
	physical				activity and
	activity.				exercise for
					physical and
					mental health
					and wellbeing
Sleep	Benefits of	The	Embedding	The	The
	sleep;	importance of	positive sleep	importance of	importance of
	improved	sleep;	habits; well-	quality sleep	sleep and
	memory,	insufficient	informed	for good	strategies to
	creativity,	sleeps causes:	decisions, the	health. How a	maintain
	mood,	illness (e.g.	ability to	lack of sleep	good quality
	physical	high blood	identify	can affect:	sleep.
	performance,	sugar levels,	changes and	learning,	
	and	cardiovascular	knowledge of	mood and	
	productivity.	strokes,	how to act	weight.	
	Basic sleep	depression,	accordingly.		
	hygiene.	anxiety)			
		Unique			
		challenges for			
		teenagers.			
		Tools and			
		strategies for			
	1				

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	sleep		
	development.		

Health

Health can be personal and emotive for both pupils, teachers, and families, therefore, sensitivity is required. The PHE (2015) framework states that relationships should be at the core of all health education with an approach that recognises the intricacies and links between physical and mental health. The paper also notes that positivity and building resilience are imperative to a holistic line. Signposting where pupils can access support within and outside of the school community drives this notion of pupils being able to take responsibility for health and associated decisions.

The PSHE Association provide lesson plans and PowerPoints that look at the influence of others, potential barriers and strategies in relation to healthy eating and physical health choices in Key Stage 3 and 4. The PHE focus on whole-school ideas (https://campaignresources.phe.gov.uk/schools/topics/healthy-eating/whole-school-ideas) for healthy eating has some suggestions for supporting pupils, however, the resources are very much tailored to primary education. Creating a pupil voice forum has the potential to set up similar infrastructures more relevant to secondary schools and drive healthy eating options.

In addition to pupil voice, encouraging a wider perspective could include the involvement of parents/carers, celebrities as role models and social media may help pupils align health decisions with their own values (Strömmer et al., (2021). The manner in which this involvement is integrated and planned for should be mindful and have clear intentions. Carefully choosing potential celebrities to support discussions whilst incorporating the criticality of what makes a positive role model may help

This is an AAM of: Ross, Charlotte, Hibbert-Mayne, Kimberley and Woodward, Dave (2023) Health Education: Informed Choices About Health, Physical Activity and Sleep. In: Developing Quality PSHE in Secondary Schools and Colleges. Edited by

McPhee, S.; Pugh, V. Bloomsbury, London, pp. 63-72. ISBN Ebook (PDF): 9781350336971 • Ebook (Epub & Mobi): 9781350336988 • Hardback: 9781350336964 • Paperback: 9781350336957

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pupils work through distance scenario work, particularly if this is underpinned by values-based

education (Menon, Kar, and Padhy, 2021).

Pupils may have lived experiences of ill health. There must be a balance between information and

support. Staff pre-reading on ill health such as cancer and cardiovascular diseases might help

understanding, for example, World Health Organisation factsheets (https://www.who.int/news-

<u>room/fact-sheets</u>). Charities such as Cancer Research UK (https://www.cancerresearchuk.org/about-

cancer/causes-of-cancer) and the British Heart Foundation (https://www.bhf.org.uk/) have

information pages about how to reduce risk, however, it is important to note that these are often not

specifically targeted at school age pupils.

One area of the curriculum that has potential for emotive reactions to be displayed can be around the

broad area of donation. Delivery of this topic would encompass not only health but value-driven

education, with pupils learning how their values can influence decisions. Possible areas of discussion

would be the change in the law regarding organ donation in 2020 or the ethical implications of

donating or receiving blood. By engaging pupils with facts about the willingness of people to donate

vs the actual amount of people that do and the type of donations needed (for example, the need for

more blood donors from Black, Asian and minority ethnic backgrounds).

Inequalities in health exist, and engaging pupils in such information may go some way to empowering

them to understand their own experiences and futures. To present and discuss health inequalities

with pupils should be through considerate and clear language, talking about the wider life of pupils

and recognising pupils' "sense of personal identity" (McKeown, 2022, p.12).

Physical activity

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The relationship between physical activity and mental well-being is cemented and steadfast, however, the statistics present an uninspiring picture. In the academic year 2020/21, only 44.6% of children and young people met the Department of Health and Social Care (2019) Physical Activity Guidelines of an average of 60+ minutes of sport and physical activity per day, which is 94,000 less than in prepandemic data (Sport England, 2021). Understanding possible barriers and interventions across the key stages should support pupils in moving to a more consistent motivation to sustain physical activity. How we frame physical activity will ultimately affect pupil perceptions. The Youth Sport Trust (2022a) 2022 -2035 Strategy includes empowering young people as 'change makers' who build relationships and co-create opportunities within sport and physical activity with the ability to lead their peers. Research from Sweden also corroborates the notion of pupils having a voice in decision-making processes about physical activity. This research also suggests praising pupils for effort and providing opportunities to become more component will improve self-efficacy (Mikaelsson, et al., 2020).

As per the above table, physical literacy can underpin pupils' confidence by acknowledging motivation, understanding, participation and fundamental movement skills. This is particularly important as "higher physical literacy in children is associated with favourable health indicators" (Caldwell, et al., 2020, p.1). Benefits have also been found when pupils volunteer in sport (Sport England, 2021). Allowing pupils time to explore physical activity through choice, relating to peers and providing ample opportunities within school to gain improved competence is key. If learning activities are focused on the local area/school community, pupils might feel there is more meaning and engage with the content further.

Delving deeper into the wider benefits of physical activity across the key stages naturally coincides with stress management for examinations and, additional concerns, such as the negative social well-being Covid-19 legacy. The Youth Sport Trust (2022b) Annual Research Report notes the wider benefits

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of PE, physical activity and school sport as physical health, brain function, social well-being and mental health. As pupils move through secondary education, developing skills to make autonomous informed decisions about their physical activity should permeate the curriculum.

New messages and a personalised approach to teaching about physical activity would be more effective if embedded within the entire school culture beyond PSHE and PE. This is based on the simple fact that "unhappy, unhealthy children don't learn effectively" (Youth Sport Trust, 2022a, p.9). Although difficult to organise in a busy school, the short-term output would be worth the long-term gains. Opening up conversations across the school, including pupils, can ultimately support the physical activity provision on offer at your school and cater to the needs of the demographic.

Sleep

Sleep is just as important for our wellbeing as physical activity, diet or any other of our fundamental needs. Research has proven that a lack of sleep can cause illness, compromise our safety, ability to learn and our overall quality of life (Pandi-Perumal, 2018). As the statutory guidance 'Physical health and mental wellbeing: Secondary' states, content about the importance of good quality sleep should be introduced positively and at age and stage appropriate points (DfE, 2021). This is especially important as the sleeping patterns and cycles of secondary-aged students are likely to change for various reasons during that time and care should be taken not to cause unnecessary alarm or stress, especially during already stressful or important times (e.g. exam periods).

We suggest that during Key Stage 3 pupils should know the importance of sleep and how our bodily organs including our brains, revitalise with sleep leading to better physical health, improved mood, memory and creativity (Pandi-Perumal, 2018). The following basics of good 'sleep hygiene' could be introduced:

getting plenty of daylight

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- being physically active
- having a tidy bedroom
- keeping to regular betimes
- switching off screens 30 minutes before sleep

(Firth, 2016)

By the time pupils get to Key Stage 4, they have heavy homework burdens, increased extra-curricular and social activities and bigger weekday-to-weekend differences in sleep timings (Sun et al., 2019). It is important to educate students on the complex effects that these, as well as innate changes in teenagers' circadian rhythm, can have on sleep. Students should be taught how to recognise these changes and be equipped with tools and strategies to develop sleep and protect their health and wellbeing. 50% of teenagers in the UK are reported to be sleeping less than the recommended hours (Singh, 2021). As previous sections in this chapter have already emphasised, students need to become autonomous decision makers so by the time they leave Key Stage 5, they are not within the 25% of adults who are sleeping less than the recommended hours (Singh, 2021). As students can't practise sleep in school, communication with parents and carers about what is taught (e.g. by sharing the resources below) is of great benefit and importance.

Conclusion

A key component of health education is to avoid generic goals, guidelines and normative statistics as the focal point of lessons. Whilst important that pupils are armed with information, a whole school culture of reflective health, individual awareness and future targets should support and motivate pupils and avoid idealistic impressions of life-long health. A non-judgemental approach to health education could also provide a platform in which pupils feel more confident to discuss concerns, barriers and possible strategies to embed healthy behaviours.

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Questions for reflection:

- How might you gather information regarding the demographic needs of your pupils for their physical activity levels and need? How can you build your curriculum plan to meet these?
- Can pupils be involved in the food served in school? How might this work logistically?
- Could QR codes be used to signpost external support to enable pupils' easier access to health support?
- Are learning materials up to date with current research? Who is responsible for this?
- How do you communicate the intentions of your curriculum plans with all key stakeholders?
- How can you develop the health education content as a thread across departments?
- How are pupils assessed on their knowledge and understanding of health? How are they
 praised for individual health progress/goals met?

Recommended people, resources and organisations:

- PSHE Association Core Theme: Health and Well-Being (guidance on long term planning, programme builders, resources and research) https://pshe-association.org.uk/topics/physical-health
- Sport England (resources for secondary schools whole school approach, inclusion of SEND students in PE and teacher training) https://www.sportengland.org/how-we-can-belp/secondary-teacher-training-programme#contactus-12758
- This Girl Can (resources that are free to download and a 'studio you' for secondary PE teachers) https://www.thisgirlcan.co.uk/resources-for-schools/
- Activity Alliance and Disability Rights UK (an everyday guide for people living with an impairment or health condition)

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https://www.activityalliance.org.uk/assets/000/000/149/2518_BeingActiveReport_A4_FINA_L(1)_original.pdf?1461165840_

- NHS school resources including Change4Life and Rise Above lesson plans
 https://www.england.nhs.uk/get-involved/learning/schools-resources/
- NHS Better Health, Every mind matters https://www.nhs.uk/every-mind-matters/mental-health-issues/sleep/
- The Sleep Factor (available to members)
- Physical health (pshe-association.org.uk)
- Donation teaching resources: KS3 and KS4: Curriculum-linked resources to help teachers in
 England educate their students about blood, organ and stem cell donation

 https://www.nhsbt.nhs.uk/how-you-can-help/get-involved/download-digital-materials/donation-teaching-resources/

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