Teaching students to participate in health education: A study about action-oriented in-service teacher training in sex education

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Student participation has become a central aspect on various levels of international debate regarding health education teacher training and evaluation of health education projects. Participation is a prerequisite to develop student action competence and a result of that process. A participatory action-research constituted by Portuguese teachers (N=86) from 16 schools having as one of its objectives to investigate how teachers’ practices on Sex Education change during in-service teacher training, was carried out. These results and their implications in terms of health education teacher training and the organization and management of the Portuguese school curriculum will be presented.

Introduction

Health education in the school community composed of adolescents and teenagers has been given great emphasis lately. This priority is based on the fact that adolescence is an important phase of life in determining the future health behaviour of an individual, since the habits of many adults are established during their growing up years. Therefore, it is better to carry out health education projects in schools to prevent prejudicial health behaviours, and promote healthier ones in the early years, rather than trying to change negative ingrained habits in adults. According to Portuguese policies, sex education is understood as being a part of the entire educational process and one of the components of health promotion. Sex education in the school community is currently undergoing a great renovating dynamic to health education and creating the infrastructures that will permit schools to implement projects, evaluate them and establish co-partnerships, which are made easier through national sexual health policies.

In this research, it is argued that the principal educational objective of health education is to develop student action competence, which is achieved with the genuine participation of students in democratic sex education projects which develop their action competence within a broad concept of health.

General research design and objectives

This study included two in-service teacher training action-oriented workshops. The first one was aimed to create conditions where teachers, in collaboration with students, planned and created the necessary infrastructures at their school for an alternative approach to enhance action-oriented sex education. This first workshop lasted for 50 hours and involved 86 teachers from 16 schools who organized themselves as a critical community, within and with other schools, and showed themselves to be active participants in the planning, action, observation and evaluation/ reflection phases of the sex education project. The second workshop, carried out in the second year of the implementation of the project in schools, had three principal objectives: to promote a critical reflection on the methodology of the sex education project being developed;
increase the willingness of teachers to interact through a website; and train teachers more scientifically in the methodological areas and in specific themes based on sexuality. This training lasted 50 hours and involved 30 teachers from 12 out of the 16 initial schools.

This study was focused on the investigation of changes in the practices of teachers during their in-service teacher training. The objectives were, among others: (i) to analyze teacher competence during the implementation of participatory and action-oriented sex education projects; (ii) to investigate the student participation level in each phase of the project; and (iii) to analyze student’s visions regarding the relationship between their type of participation and the results of the project.

Theoretical framework

The concept of participation of children and youth as one of the principle aims of health education (and environment) and Health Promoting Schools (HPS), has become a subject that is increasingly discussed in the international community (e.g., Carlsson, 2000; Colquhoun, 2000; Hart, 2000; Jensen, 1994a, 1994b, 1995,1997a, 1997b, 2000; Simovska, Jensen, 2003). According to Simovska (2000), the most common meaning of student participation remains within the traditional behaviour-modification paradigm, which involves encouraging and/or urging students to make healthier decisions and to choose healthier lifestyles. In the HPS, the concept of health promotion, based on the Ottawa Charter, is interpreted as a “social process of individual and collective empowerment” (WHO, 1986). The development of skills of the individual related with their health, self-determination and action is therefore, principally constructed under the existing conditions and with the objective of strengthening their own control over social, structural and systemic determinants of health. The only difference between this “participatory approach” and the “behaviouristic approach” is that the teacher uses new learning strategies that are interactive, fun and participative and the second “is based on informing, shaping through reinforcements and sometimes even frightening students” (Simovska, 2000, p.30).

For Jensen (1994a), the main basis for the discussion about participation is the concept of action competence, which is, the individual’s ability to have reflexive individual or collective actions and provoke positive changes in his/her lifestyles and/or life conditions that will lead to a healthy life. Action competence is precisely the global aim of democratic health education and of the HPS. The type of student participation in the various phases of the implementation of the projects can be analysed as a function of who suggests and who decides, from a non-participation level that means, “the teacher decides for himself” up to a progressively larger participation level: “the teacher decides after consulting the students”; “the teacher suggests and decides together with the students”; “the students suggest and decide for themselves” and “the students suggest and decide together with the teacher” (Jensen, 2000; Simovska, Jensen, 2003).

This approach in schools, defended by the Democratic Health Education Paradigm is only compatible with a teacher who is open-minded, democratic, a sympathetic listener and cooperative, within a constantly changing school environment that stimulates the students’ participation, namely, through student assemblies. The students are seen as social agents and as key actors in society. The evaluation of these projects aims to measure student competence (thoughts, visions, commitment to the project, actions developed, etc.) and not to measure the changes in student behaviour (Jensen, 1995,1997). The following components have been pointed
out, among others, to define and put into operation the concept of action competence (Jensen, 1995; 1997 a; Simovska, Jensen, 2003): insight and knowledge, commitment, visions and actions.

According to Simovska and Jensen (2003), the first component is focused on the acquisition of coherent knowledge regarding the problem that worries students – knowledge about nature and the scope of the problem, how it appeared, who it affects and the variety of possibilities that are at hand to resolve them. The second component is related to the commitment of students and their drive to act. According to these authors, they are important because knowledge about the problem is not transformed into actions unless courage and commitment are present. The third component of action competence involves the development of visions by students of how, in general, the world and their lives could be and how society and the environment could be improved in relationship to their particular worries. This is seen as the development of students’ ideas and of their perceptions about their future lives and the society which they will grow up in. Jensen (2000) emphasises the fact that students are given an opportunity to develop, discuss and share their visions with others, or also participate in the development of common visions, is probably one of the most important prerequisites or precursors of the desire to act. The fourth component, action experiences emphasises the benefits of taking specific actions during the learning process. The author reinforces the idea that their experiences appear to support the point of view that participating in a variety of different types of actions, as a part of the learning process, is a vital step to develop action competence.

These four components could be carried out in health education projects when the S-IVAC methodology by Bjarne Bruun Jensen (selection of the problem, investigation, vision, action and change) (Jensen, 1994a, 1997; Simovska, Jensen, 2003) is applied in order to structure the activities aimed at health education and facilitate student participation with the objective of developing action competence. The four dimensions of knowledge geared towards the subjacent actions of that methodology are as follows: (1st) What kind of problem is it? – Knowledge about effects; (2nd) Why do we have the problems we have? – Knowledge of the root causes; (3rd) How do we change things? – Knowledge about change strategies; and (4th) Where do we want to go? – Knowledge about alternatives and visions.

The process of student participation in the S – IVAC methodology

Roger Hart created a metaphor of the ladder of participation to point out the distinction between several levels of non-participation, on one hand, and the different forms of participation, on the other. The higher steps of the ladder, express higher levels of initiative and independent decision-making by children and different forms of cooperating with adults. The first guideline, when the objective is pupil participation, is to avoid working the three lower levels of Hart’s ladder – steps of non-participation. The manipulation of students (first step of the ladder) occurs when they do not understand the problems and, consequently, do not understand their actions. According to Hart (1992), an example of manipulation occurs when children from the pre-school level wave political placards concerning the impact of the social policies on children without understanding their actions, although he defends that “it can be more precise to call them [those actions] misguided rather than manipulative” (p.8). Another type of manipulation is when pupils are consulted but are not given any feedback. It is possible to observe several examples of this type of manipulation in Portuguese schools, where the process of analysis is not shared with the pupils and, as a result, they have no idea about how their initial ideas were applied. An example of this is when teachers encourage pupils to investigate their initial ideas regarding a theme that
they had previously selected and then are not allowed to apply those ideas when selecting the investigative activities and when planning their sex education project. The same may happen when planning the action, when the application of pupils’ visions (dreams) is not a clearly defined process (Vilaça, 2006).

Decoration (the second step of the ladder) is seen, according to Hart (1992, 1997), when pupils, for instance, put on their uniforms or T-shirts and sing or dance with logos that promote a specific cause, but have little notion about what the cause really is and are not involved in the event. In this situation, adults simulate student involvement in the suggestion of the cause, but, in fact, the adults, who made all the decisions, suggested the cause. In Tokenism (third step), students appear to be given a voice, but in fact have little or no choice about what they are doing or why they are participating. Hart recommends that it is necessary to pay careful attention to children’s participation at conferences because it is common for an attractive child to be chosen by the adults to sit on a panel, with little or no profound preparation about the theme or without any opportunity to talk with his/her peers regarding what he/she is representing at the conferences. He affirms that “if no explanation is given to the audience or to the children of how they were selected, and which children’s perspectives they represent, this is usually sufficient indication that a project is not truly an example of participation” (Hart, 1992, p.10).

Hart’s basic premise about what young people can acquire is optimistic: “young people can design and manage complex projects together if they feel some sense of ownership. If young people do not at least partially design the goals of the project themselves, they are unlike to demonstrate the great competence they possess” (Hart, 1992, p.5). The ascending degrees of the Hart ladder of children’s participation are the following: “step 4 – assigned but informed”; “step 5 – consulted and informed”; “step 6 – adult-initiated, share decisions with children”; “step 7 – child-initiated and directed; and “step 8 – child-initiated, shared decisions with adults”.

Jensen (2000) created a practical instrument in order to make the students’ participation operational in health (and environmental) projects. This instrument represents a simplification of Hart’s ladder participation levels (five steps), intersected with a number of columns that illustrate questions or decision-making areas that can be included in the teaching activities: adhesion of students to the project; choice of the overall topic; selection of the aspects of the topic; investigation; visions/ visionary goals, actions and evaluation/ follow up.

According to Jensen and collaborators (Jensen, 2000; Simovska e Jensen 2003), students’ genuine participation has as its main objective, their socialization through a democratic process of shared decision-making with others, achieving the share of objectives and meanings and the development of emotional and personal competences as well. These investigators argue that genuine student participation does not mean, nonetheless, that they have to make all the decisions on their own. Jensen (2000) supports that the base level in the matrix, that is “level 1 - teachers decide on their own” (non-participation), has been included to make it clear that in some cases, due to one reason or another, participation is not possible. In the following four levels of codetermination, although the limits between them may be fluid, they represent different types of ideas. The first refers to a situation in which the teacher presents a proposal that is accepted, without much discussion by the pupils, “level 2 - teachers decide after consulting students” and the other three levels are distinguished from each other by the combination of who places the idea or proposal for discussion, and who actually makes the final decision: “level 3- teachers suggest and decide together with students”; “level 4 – students suggest and decide”; and “level 5 – students suggest and decide together with teachers”. According to Jensen, these three levels have been important in the school context because very often there is an implicit assumption that
the beginning of student involvement almost always excludes the possibility of the teacher presenting the proposal to be discussed. The focal point here is the subsequent dialogue and discussion which has to be developed respecting the target group. It is important to insist on the fact that the partners that are working together (which also includes the target group) should spend some time discussing “how” and “concerning which questions and decisions” they will include in the involvement aspect.

**Methods and techniques of collecting and analyzing data**

The participatory and action-oriented teaching approach that has been developed and discussed above, incorporates the main foundations of the conceptual network for the empirical part of this project. In-service teacher training worked with this conceptual approach, which constitutes the basis shared by teachers from several schools and classes for their sex education projects. Furthermore, the same conceptual network was used to organise the basic structure of collecting data methods.

During the two workshops, when teachers started dominating the teaching of participatory and action oriented-SE, the research instruments became more diversified and more under the teachers’ control and less under the researcher’s control. At the beginning of the in-service teacher training, the researcher proposed to teachers the collection of information to answer the research questions initially defined and those that would be (re) defined during in-service teacher training, through the following techniques: participant observation in sessions, informal individual and group interviews, and analysis of documents produced in in-service teacher training and in the school. The decision to implement these techniques was made together by teachers and the researcher, and the final interpretation of the analysis of the documents produced was also done jointly. When as a product of the first workshop, the website Healthy Youths In Action was put online, teachers decided autonomously to participate in the realization of online class diaries and in the Sex Education Pilot Project and Sexualities and Sex Education discussion e-forums. The last investigation technique was the discussion groups, which occurred from the beginning of the first workshop till the end of the second.

The final interpretation of the data collected with the teachers’ collaboration online, of the documents online and offline and of the triangulation of the results obtained by the research techniques was carried out in three separate occasions: at the end of the first in-service teacher training workshop and at the beginning and end of the second.

**Results and discussion**

**Teacher competence to teach students to participate and student participation**

Teachers acquired the ability to analyse “who suggests” and “who decides” during the several phases of action oriented projects, as a form of putting into practice and analysing the students’ participation in the process of solving health problems.
Student participation to join a Project

In most of the schools (73.3%) student participation in the adhesion to the project was suggested by the teachers and decided together with the students, but in 20.0% of the schools, student participation in the first year of this Project was decided on by the teachers (participation level 1: “the teacher decides for him/herself) who considered that students of the 8th grade (preparatory school) had been experiencing a lot of sexual concerns or problems without any type of support from the school curriculum, parents or the community:

In the previous curriculum of the 8th year, teachers said that there was no time to teach the theme entitled “The transmission of Life”! I skipped another theme in order to teach this one (...), because I thought students study this theme very late in the school year: in the end of the 8th grade! I think that it is very difficult to talk with them about the changes which take place during puberty, about the menstrual cycle and about the prevention of sexually transmitted diseases when students have already experienced them and have also taken sexual risks. In my opinion, this theme should be taught much earlier. In this school, all 8th year classes have students who are much older than the average in the 8th year [13, 14 years old]. I have students who are 16 and 17 years old and students who have already had sexual problems. Some of them ask me questions like: “My girlfriend’s period has not come yet. What should I do?” Others have come up to me and said: “Teacher, I have had sexual relationships and my period hasn’t come yet. What should I do?” These questions appeared before I taught this theme. And now in the present curriculum this theme has been transferred to the 9th year. I think that the opinions of teachers must be taken into consideration regarding this theme! As a result, students of the 8th grade do not study “The transmission of Life” in Science! Also, teachers do not feel comfortable enough talking about sexuality! I will suggest in my school that this sex education project be commenced in the 8th year in the “Project Area” and in “Civic Formation”. (Individual interview, H school: teacher, school project coordinator)

According to Hart (2002), projects in which adults decide on during some phases of the project (“Assigned but informed”), imply that although students may not have been involved in the initial phase of the project themselves, they may have been fully informed about it and feel a real ownership of the issue and may also have been involved in a critical reflection of the issue. This is considered by Hart to be the most commonly used approach to children’s participation by international development agencies working in the developing countries. In his opinion, it is common for “social mobilization” to be carried out in a manner that unfortunately, “does not meet the requirements of genuine participation and hence does not further the goals of democratic socialization of children” (Hart, 2002, p.42). He reinforces the fact that social mobilization can be used effectively as a first stage in more substantial participation projects with children, because if this does not happen, what will remain in children’s mind is the notion that children are to be used when needed, rather than the idea that children’s perspectives are important themselves.

Student participation in the selection of the overall topic

During the development of this research, 31 themes by 15 schools involved were selected. The selection of most of the general themes for the projects were suggested by the teachers and decided together with the students (54.8% of the themes) or suggested and decided by the students (38.7%). The first theme worked on was in all the schools suggested by the teachers and decided together with the students. Nevertheless, the themes which are part of the
Vilaça: Teaching students to participate in health education

Natural Sciences curriculum, were decided by the teachers after having consulted their students (6.5%) (participation level 2: “the teacher decides after consulting the students):

This year, we decided to work with 9th year classes because this theme is part of the Science curriculum [The morphological and physiological basis of reproduction]. We are going to work in the “Project Area” and in Natural Science. (...) Why did we take this decision? Most of the teachers who worked in this project in the year before have changed schools and also, I verified that only a few of the activities previewed for this year were carried out. Also, we became aware of the impossibility to effectively implement the project only in “Civic Formation”. “Civic Formation” has only 45 minutes per week.

(...) First, we explained to students, that they were going to participate in the project “Healthy Youths in Action”, showed them the site and the work prepared by their colleagues in the previous year and discussed with them what they could do to have their work on the website. Students gave their suggestions for work in this project and in the website. So, we explained that since we did not discuss with them what sexuality and sex education were, we would develop the first thematic nucleus in the “Project Area” [Sexuality and Sexual Education] and the second [The awakening of sexual maturity] in Science. We also explained why we chose these themes. (...) It appeared to us that they enjoyed them because they were smiling, made some positive comments and appeared excited. (...) They have been working with much energy and enthusiasm.

(Group interview, I school: teachers)

In the above situation, teachers decided that students would participate in the project and choose the overall topic. Students accepted both decisions without much discussion or disagreement. They were then informed about how their input would be used and the outcome of the decisions made by teachers. Students understood this process, were consulted, gave their opinions and saw these opinions treated seriously. Jensen (2000) comments that this type of situation, which is similar to the one above mentioned in the interview, could reasonably give rise to a debate about whether or not some involvement of students exists in these situations.

Student participation in the selection of the aspects of the topic

The aspects of the general theme were in 6.2% of the cases selected and decided on by the teachers after consulting the students, in 37.5% they were suggested by the teachers and decided on together with the students, in 25.0% of the themes they were suggested and decided on by the students and in 31.3% of the themes they were suggested by the students and decided on together with the teachers.

Student participation in the investigation phase

The choice regarding the activities to be carried out in the investigation phase were in 6.2% of the themes selected and decided on by the teachers after consulting the students, suggested by the teachers and decided on together with the students in 62.5% of the topics chosen, suggested and decided on by the students in 25.0% of the cases and suggested and decided on together with the teachers in 6.3% of the cases.
Student participation in the visionary phase

When the students developed visions so as to overcome the problem, in 55.0% of the cases visions were suggested by the students and decided on together with the teachers, in 35.0% of the cases they were suggested by the students who also decided which ones should be followed, and during the development of this research, there was only two cases where the teachers suggested the vision and decided together with the students (participation level 3). The situation described below is an example in which teacher suggests and students decide together with teacher. During the investigation phase which they had been carrying out in order to clarify their concept of sexuality, emerged a problem which they wanted to solve: “How to discuss with other colleagues of our school, what sexuality and sex education are and how the evolution of sexuality in our country has been taking place”. They had a vision about this: “To share common understanding with their schoolmates about what sexuality is and how it has been changing in the country”. In order to make it more useful for the students’ project, an “International Day Celebration” was taken advantage of by the teacher to suggest an action in order to help students reach their vision:

I know that students enjoy exchanging ideas with their colleagues of other classes regarding what they are discussing in order to share a common understanding regarding the theme. “X Day” arrived at the right time to carry out an action in school regarding the aspect of the theme we had been discussing [Different ways of living sexuality throughout the history of different cultures]. I suggested to the students that we should put on a small play. They not only agreed but also became very enthusiastic (...). The play made reference to the use of the pill, the legalization of abortion, the evolution of the different gender roles and the submission of women. Working in groups, the students explained why it was important for them to encourage their colleagues to seriously think about these topics. Later they shared their opinions and ideas in the class. Because of this, I wrote the play and asked the Portuguese teacher for her opinion about it and later we rehearsed it with the students. (Individual interview, I school: teacher)

This is the first of the three levels of participation that, according to Jensen (2000), have been important in the school context. These levels make it clear that no principle of pupil involvement excludes, per se the teacher. Also, according to Jensen, this could be the earliest possible stage in the participatory process in schools which are commencing their action-oriented projects. In order to achieve real shared-decisions, students need to be involved, in some degree, in the entire process.

Student participation in the action phase

When the students planned and carried out actions, in 33.3% of the cases they were suggested and decided on by the students (participation level 4). This was what happened in “M School” when students of the 12th year (17-18 years old) organized their visions and planned an action to solve the following problem: “Parents do not speak openly with us about sexuality and sex education and feel that we are worse than the youths of their time”. After investigating what sexuality and sex education represents for those of their parents and grandparents’ age, through the application of a questionnaire, they organized a “Post-it” Idea Storm in small groups in order to share their visions regarding what they would like to see happen in the future. Afterwards, in a class assembly, they exchanged these ideas and planned an action to debate with parents their dreams and to improve their communication with them regarding sexuality. They also organized
the debate, its implementation and evaluation themselves. Part of this process can be seen in the field note below:

I arrive at the school to attend a 12th year class. It is the first year that this teacher collaborates with me. The teacher introduces me as the coordinator of the global project in the University of Minho, the moderator of the forums and the researcher of the project. (...) Students are orientating this class based on the question guide proposed in this Activity Guide in order to: (1) help them in the systematization of the problems which have been emerging during the investigation of the selected theme and in the selection of the most important problem which they want to solve; (2) help them to demonstrate their abilities to see the real possibilities to carry out and develop their own dreams and ideas in relationship to the analysis of the problem selected. “I don’t mind to take the teacher’s role” says a boy, “neither do I” adds a girl. One of them begins a “post-it” idea storm using the proposed methodology of the Guide and other sits down in front of the computer to register the final syntheses.

They discuss: “(...) Why is this problem important for us? What are the consequences now and in the future of the existence of this problem? Why does this problem exist? What would we like to see happen in order to avoid this problem in the future? (...”)”. The teacher helps the student who is now acting as the teacher to organize the “post-it” papers on the blackboard at the end of each question. I heard some comments regarding the answers which had been written. Students are surprised with the quantity and quality of answers. They are working a lot, the class finishes. They have organized their ideas regarding the problems to be solved and their visions for approximately 90 minutes. I decide with them to come again in the next class.

(...) Students, who are in a class assembly, listen attentively to their visions written down by their classmates on a computer in the class before. (...) They decide to plan a debate. In the class, they select the target population, the theme of the debate and distribute the tasks: “Who will write the invitations to attend the action? Who will present the website?” asks the student teacher. One colleague argues that in her opinion, in this phase, it is very important to clarify with the participants that “sexuality is not only having sex”. A girl, who has been showing a lot of enthusiasm with the action adds: “It is also important to say that youths enjoy talking with parents about sexuality and not only about sex”, and “talking about sexuality with parents does not necessarily imply them talking about their own intimacy” adds another student. The class agrees and decides who will prepare the debate in order to develop these ideas with participants. (...) The 90 minutes are almost over but the students continue discussing how they will evaluate this action in order to discover if it has provoked changes in themselves and in participants.

(Field note, M school)

This category is more frequent in the selection of aspects of the theme, selection of the investigations to carry out and the visions and actions necessary to attain these visions (see, Young people’s work with alcohol, in Simovska, Jensen, 2003). In this level of participation, students initiate and direct a project or a specific phase of the project or give a class, or suggest an activity and the teachers are involved as facilitators.

In this research project, 61.1% of the actions carried out, were suggested by the students and decided on together with the teachers. This level of participation (level 5) can be seen in the field note below:

(...) What would we like to see happen in the future to people of our age in order not to have the fear of unwanted pregnancy, becoming infected with STDs and having the “first time” at “the right time” and with the “right person”?

The principal vision of the class is that youths should learn how to prevent unwanted pregnancies. The second vision is that youths should learn how to prevent STDs, the third is that young people should be able to speak openly and without negative preconceptions with the opposite sex regarding the decision to have their “first time” [first sexual relationship] and their first loving relationship. And finally, the fourth vision is that youths should begin to talk with parents and grandparents in order for them to know how sexuality is experienced today. The class
finishes the categorisation of their visions in the “post-it” brainstorming session. Afterwards, they debate in class what has to be done in order to accomplish these changes. “An informative session with doctors and nurses regarding contraceptive methods and STDs”, says a girl. “Like the other one which was carried out before?”, asks the teacher. “No, the one where it would be possible for us to clarify our doubts”, says another girl. “Do you want a practical session?” asks the teacher. The class smiles and agrees. (...) “Teacher do you think that it is possible to include in the invitations to the Health Centre, what we would like to know?”, “Yes, of course, in my opinion this is good for you and for the doctor and nurse, because if you do that they would know exactly what you want to learn and discuss. I totally agree with your suggestion. I think that it could also be interesting to include in the invitations, the difficulties which you mentioned before, regarding what could be experienced during the session by you. What do you think about this?” says the teacher. (...) (Field note, N school)

This is the highest level of student participation because teachers are involved without subjecting students to their control, but as equal contributors to discussion with different insights/ knowledge and experiences of life; “in the school context, this priority stresses how necessary it is for the teacher to appear as a responsible adult with her/ his own opinions when involved in the projects built around pupil participation. The more the pupils themselves are involved, the more important, presumably, it will be for the teacher to be visible and to play an active role in the discussions.” (Jensen, 2000, p. 226). Students and teachers exercise a democratic discourse where students initiated the project or a particular phase of the project but shared their decisions with the teacher.

Students’ visions about student participation and the results of the Project

The students’ initial ideas regarding their participation in sex education projects published online included: giving ideas about themes or problems to be dealt with in campaigns and sex education projects, because they are the ones who know how they would like to see the theme of sex education dealt with and what are their doubts (86.7%); asking for help, trying to do research, exchanging ideas with the teachers, etc. (80.0%); collaborating in the planning of the projects, presenting suggestions for activities that will later be carry out, because they are the ones who know how to attain their sexual doubts and worries (46.7%); not having problems in asking and answering teachers’ questions (20.0%); talking freely about sexuality in practical classes about sexuality (13.3%); participating collaboratively in websites about sex education (6.7%); participating collaboratively in the sex education work carried out by the students in the school (6.7%); forming study groups and seeing films (6.7%); collaborating with the teachers’ ideas.

At the end of the project, the students who were interviewed in groups (n=25) talked about participation essentially regarding the viewpoint of who chooses and not who suggests, and pointed out that these were the aspects that most contributed to liking the project and gaining self-confidence to solve their personal problems in the future. There were also some fundamental participation aspects for all the students who experience them: (i) having had the responsibility of choosing the themes (92.0%) and activities to carry out (68.0%); and (ii) having given lessons to their peers in their own class after the class had selected the activities that they wanted to carry out within the theme (60.0%). The third aspect referred to by the students was the greater freedom they felt when suggesting the visions and deciding on their own (26.7% of the schools) or with the teachers, who would only give their opinion without imposing which ones should be followed (46.7%), just as what happened with the planning and carrying out of the actions.
Conclusions and educational importance of the study

The analysis regarding the type of student participation in the project Healthy Youths in Action (HTIA) in the several schools allowed the conclusion that the students’ greatest level of participation (the students suggest and decide together with the teachers) was found in the selection of the aspects of the theme to be worked on, in the development of visions and in the action phase. The efficiency demonstrated by the application of the S-IVAC methodology in sex education in the development of student action competence and the increasing of their level of participation suggests that this methodology should be taught to the teachers in the training, as well as the paradigms of education for moralistic and democratic health and the broad and positive concept of health within a methodological approach which creates conditions to build the four dimensions regarding action-oriented knowledge. This training should therefore, be included in the pre and in-service teacher training, in all the teaching degrees, considering the compulsoriness character of sex education in schools and the characteristics that teachers and students, just as in the national guidelines, consider desirable for the implementation of sex education in the school community and for the development of schools as health promoting schools.

The results of this research also suggested that the programmes regarding the several school subjects, even when they are not central in the development of the health education project, should have some flexibility so as to collaborate with the non-disciplinary curricular areas and optimize the integration of their interdisciplinary knowledge. According to the teachers’ visions, when the subjects have within their curriculum, themes related to sexual health promotion, the participants in the sex education project should consider the analysis regarding the possibility of integrating these themes in the project.

This research project is important to educational theory and practice of Health Promoting Schools since it contributes to a theoretical and practical bank of knowledge on health education and explores the combined actions of the democratic approach (participatory and action-oriented) with the collaboration between schools and the use of information and communication technology.

References


Local and Global Perspectives on Change in Teacher Education

International Yearbook on Teacher Education

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53rd World Assembly of The International Council on Education for Teaching July 14-17, 2008 University of Minho, Braga, Portugal

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