CASE STORY

Authenticity in teaching about health: School/community collaboration in Denmark*

Monica Carlsson

In Vigersted School, a rural school in Denmark, Year 8 pupils and their teachers involved a socio-educational consultant from the municipality and a health visitor in their project (the partners). The project ran over three months. The teachers drew up the following criteria for the pupils' work: it should be about health/wellbeing; involve pupil actions; there should be a specific outcome; pupils should keep a logbook over the course of the project; they should disseminate the results; and their projects should involve the local community.

In the start-up week of the project, the teachers and local community partners, the socio-educational consultant and the health visitor presented some health topics for inspiration, and the pupils worked with these questions: "What is good and what is bad in your local community?" and "What do you want to change?" The partners participated in the planning and implementation of the start-up week, and provided information all through the project.

The pupils worked with various sub-topics and actions. The following is just one example: the school did not provide the pupils with access to the Internet, so a group of pupils made a survey about the budget and an action plan for the establishment of an Internet café. They approached and became members of the youth club committee in the school in order to lobby for their plan.

In the research linked to the project, the teachers underlined project learning outcomes such as the fact that pupils developed their concept of health, health knowledge and skills, self-esteem and engagement, and the social environment in the class improved. Teachers pointed out that the partners' involvement gave access to extra funding, and that the project strengthened the usual school-partner collaboration:

"It is positive to meet in situations other than when things go wrong. The pupils especially stressed the good experiences with pupil-to-pupil dissemination of the project and the feeling it gave them of 'we can do it'."

* From a health education development project: Collaboration between school and local community about health education, in CARLSSON, 2001.

CASE STORY

An athletic school: Community-based obesity prevention programme in Maniago (Italy)*

P.A.U. Education

In a community project in the city of Maniago outside Udine in Italy, a pre-school and a primary school were involved in a community obesity prevention project. The project focused on four main structures:

- A knowledge structure related to curriculum activities about healthy habits and preventing obesity, such as biology, physical and civic education.
- A time structure the way the child's days are planned: getting up, having breakfast, arriving at school, break, meal time, going home, having free time, going to bed.
- A mobility structure all the journeys that the child takes every day: going to school, classroom, playground, dining room, the gym, home, etc.
- A space structure all the places the child has to go during the day: house, street, classroom, corridor, playground, dining room, gym, park, etc.

Interaction between the four structures was to secure the integration of the project into the daily life of the school and children alike. The different stages in the project were:

- 1. An initial assessment stage: who are we and what is our lifestyle? A questionnaire answered by parents and pupils.
- 2. What do we want to change stage: teachers and children drew up a plan for action to generate activities.
- 3. Activities stage: children were involved in activities 1) at school, 2) shared activities with the other school, 3) with the families, and 4) in the city.
- 4. Final assessments and evaluation of results stage: self-assessment activity, whereby children and parents distributed selfassessment questionnaires on healthy habits. An evaluation was carried out and compared to the initial assessment.

In the project, children were involved in the following activities:

- Creating and posting pictures and 'traffic signs' in the classroom and at school about healthy habits.
- Children were given a notebook with suggestions for family activities, such as games, and a section for noting family activities.
- The schools produced brochures announcing activities and children took them home to tell their parents.
- The children gave their opinions about activities via a mail-box in the school hall.
- In an annual event, children were involved in activities such as an orienteering race in the park and a game about the digestive system.



An athletic school: children and teachers share an action plan.



Children act for their parents: the digestive system.

* P.A.U. Education, La Scuola in forma: an educational project on child obesity, Working papers, 4, 2006.