THE IMPLEMENTATION OF SPHE AT POST-PRIMARY SCHOOL LEVEL: A CASE STUDY APPROACH

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FOREWORD

This Evaluation was commissioned by the Management Committee of the SPHE Support Service (Post Primary), who wish to acknowledge the work and commitment of the research team.

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CONTENTS

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1. INTRODUCTION

In April 2000 the Department of Education and Science approved the Junior Cycle Social, Personal and Health Education (SPHE) syllabus (Department of Education and Science Circular M22/00). SPHE was designed to match with and facilitate the educational principles that underpin the Junior Cycle (JC) curriculum and all post-primary schools were advised by circular (Department of Education and Science Circular M11/03) that SPHE must form part of the core curriculum of Junior Cycle by September 2003. In September 2000 the SPHE Support Service (post-primary) was put in place. The support service takes the form of a partnership between the Departments of Education and Science and Health and Children and the Health Service Executive (formally the Regional Health Boards). While the development of the SPHE curriculum followed the main phases as other curricular developments, and should be interpreted within the framework of such innovations, there are key differences concerning the cross-curricular nature of the content and the need for specific training in the content and processes of SPHE for most post-primary schoolteachers.

A number of research studies have been undertaken to date that have monitored and informed the development and implementation of the SPHE Curriculum (SPHE, 2004; Burtenshaw, 2003; Geary &

Mannix-McNamara, 2002; Millar, 2003a; Millar, 2003b). All of these reports provide vital information on the operation of the SPHE Support Service and the roll out of SPHE in schools. Nevertheless, gaps remain in our knowledge and understanding of SPHE implementation. Burtenshaw (2003) indicates the need to know more about the degree of integration of SPHE at school level and the underlying mechanisms, both in terms of the outcomes of the training activities of the support services and the potential synergy between SPHE and other curricular activities.

In addition, the information collected thus far has been provided by members of the SPHE Support Service (both Health Promotion Officers and Regional Development Officers), teachers in receipt of SPHE training, SPHE teachers in school, non-SPHE teachers and Principals. Two of the key stakeholders in the SPHE process have not been involved: students and parents. It is therefore timely to include all educational stakeholders in the current investigation.

This study was commissioned by the SPHE management committee to examine the contribution of SPHE to the experience of Junior Cycle students and to the Junior Cycle curriculum. Twelve schools were considered as separate units in order to examine the relationship between the various factors that might have an effect on SPHE within schools. The modified case study approach employed in this study used mixed methodologies, including interviews, questionnaires and participatory methods of data collection. These methods elicited a rich variety of opinions from students, teachers, parents and SPHE Support Service staff on their perceptions of SPHE at present and their aspirations for its future.

A clear message from the research is that all schools involved in the study supported the need for educating the whole person, and each had their own unique perspectives on current SPHE provision. The insights and understanding of stakeholders identify areas for possible improvements and challenges in practical and effective planning for the future of SPHE in post-primary schools.

2. RESEARCH AIM

Drawing on the invitation to tender, the overall aim of the proposed research is to examine the contribution of SPHE to the experience of Junior Cycle students in the education system and the contribution of SPHE to the Junior Cycle programme. The focus for exploration concentrated on five main themes:

1. Teacher and parent views of the quality of SPHE provision as well as student, teacher and parent views on the value of SPHE provision

2. The contribution of SPHE to the educational experience, health attitudes and behaviours of students from the student, teacher and parent perspectives,

3. Stakeholders' perceptions of how SPHE is supported in their school, through inclusion in planning processes and the structures, policies and roles that promote SPHE implementation in the school; views of teachers of their own competence and confidence in teaching SPHE; the extent to which SPHE complements the work of other school personnel.

3. CONTEXT

4. Parental expectations of SPHE for Junior Cycle students and perceptions of schools' consultation with parents, teachers and students in relation to SPHE as well as how schools create links with community, Support Services and outside agencies to support SPHE.

5. Views on how SPHE can be built on in the Senior Cycle, including Transition Year.

Current Educational Policy Context

The Department of Education and Science in their statement of strategy 2005-2007, (Department of Education and Science, 2005) state that their mission is to provide for high-quality education, which will enable individuals to achieve their full potential and to participate fully as members of society, and contribute to Ireland's social, cultural and economic development. This mission is expressed for education in general, reflecting governmental desire to encourage young people to remain in education for the whole secondary phase. The present education system is reflective not only of these ideals but also of the dynamic nature of Irish society which has witnessed considerable change over the past 18 years. Participation rates in the school system have increased with larger proportions of the Irish young people remaining in post primary education beyond the minimum school leaving age. Changes in parenting and child-rearing patterns related to changing family structures have affected relationships between teachers and pupils. The Celtic Tiger economic boom established the perception that education levels are one of the key variables in economic performance (Walsh, 1997).

Introducing curriculum change

The Junior Cycle is part of the compulsory period of education usually taken by students between the ages of 12 and 15. *"The Junior Cycle programme is based on the curricular principles of breadth and balance, quality, equity, relevance, coherence, continuity and progression."* (NCCA, 2004). The introduction of the Junior Cycle programme in 1989, heralded much curriculum change needed to develop a post-primary school system that balances unity and diversity in an increasingly pluralistic Ireland. The approval in 2000 of the SPHE curriculum for Junior Cycle rests within a suite of curriculum changes in the Irish education system (Kellagan & McGee, 2005). As Fullan (2001, p.69) points out *"Educational change is technically simple and socially complex"*. For curriculum changes to become established, more is required than mandatory statements of intention. Even when change is acknowledged as being necessary, resistance from within the system is inevitable (Walsh, 1997). Many writers acknowledge that change should not be considered as a discrete event but as a difficult process (Lawton, 1996; Fullan, 2003). On one level it is a political process involving the many actors in the educational system, among whom there may well be some conflicts of interest. However, change is also a cultural process (Walsh, 1997; Fullan, 2001), with an element of 'conversion' for the participants who gradually adapt their understanding, beliefs, practice and relationships in order to work through the change successfully. Nearly eighteen years

after the introduction of the new Junior Cycle syllabi the concerns highlighted in early evaluations are still relevant.

Assessments as to the success of whole curriculum changes in the Irish education system have been conducted by the Department of Education and Science in conjunction with the National Council for Curriculum and Assessment (NCCA). The NCCA Junior Cycle Review Progress Report (1999) and the Department of Education and Science Junior Certificate: Issues for Discussion document (2002) outlined a number of items for discussion. A series of consultative meetings were organised by the NCCA in 2000 for teachers and other partners on the nature of Junior Cycle. The consultation highlighted concerns on duplication or overlap of topics being delivered, alongside concerns of syllabus overload. The NCCA, in association with the School Development Planning Initiative (SDPI) have developed a set of four instruments for Junior Cycle curriculum review at school level. These instruments support school-based curriculum planning and reinforce the areas of experience as a model of curriculum design (NCCA (2004). Subsequent research among first and second year students by the Economic and Social Research Institute (ESRI) and the Gender Equality Unit of the Department of Education and Science (2004) found that students do not feel overloaded by the Junior Cycle syllabus, rather enjoying the facility to have subject choice. The issue of overlap (Looney, 2001)

since the introduction of new syllabi such as SPHE, CSPE and Religious Education into the Junior Cycle remains relevant.

The process of curriculum change can be divided into three phases: initiation; implementation and continuation. In the initial initiation adoption phase, Fullan (1991) identifies the three R's of "relevance, readiness and resources" as being vital (p.63). Whether an initiated change actually happens in practice depends on more intricate factors such as the local characteristics (these include the specific school characteristics) and external factors. For an innovation to become embedded in the whole school the continued support of the Principal, the existence of a critical mass of teachers who are trained and committed to the change, and procedures for training new staff are all necessary (Fullan, 2001; Walsh, 1997). The change process as a whole may take from three to ten years depending on the level of complexity of the change. Fullan (1991) illuminates this change process with four insights, summarized by Walsh (1997, p.101) as:

1. *"let participation in the change grow slowly as opposed to insisting on everyone's involvement from the start,*

2. *effective change is usually the result of a judicious mixture of pressure and support,*

3. *for most participants, change in their practice is more the source than the outcome of change in their understanding and belief (i.e. for most the change in practice comes first),*

4. *ownership of the change is a progressive thing which emerges fully only at the end of the process."*

Research has demonstrated the importance of teachers to the successful implementation of any change within the school system. *"Educational change depends on what teachers do and think - it's as simple and as complex as that."* (Fullan, 2001, p.115). Nevertheless, in some schools change is more likely to be accepted than others. Research has illustrated that a key factor in teachers' acceptance and implementation of change is a culture of collaboration between teachers (Rosenholtz, 1989; Hargreaves, 1994; Scott et al 2000). Planned changes can fail if they do not take into account the multiple realities of the teachers who will implement the change. In relation to SPHE the appointment of a Co-ordinator to facilitate a team of trained SPHE teachers is envisaged as being crucial to the successful implementation of the SPHE curriculum within schools.

In some schools the coordination of SPHE is the specific responsibility of a teacher with a paid promotional post, sometimes called a 'post of responsibility'. These co-ordinators may or may not have additional responsibilities (of middle management). The status that a school allots to SPHE can be reflected in the time and authority attached to post holders responsibility for SPHE coordination.

Schools are dynamic systems in continual interaction with social and cultural environments. The curriculum is a 'central structural component' and thus teaching, learning and curriculum are connected. The curriculum is embodied in the teachers and comes to be embodied in the learners. *"The degree of freedom and exploration which is required for real education must extend also to the curriculum"* (Walsh, 1997, p. 107). In order to function effectively the school needs freedom, opportunity, capacity and resources (Skilbeck 1984). The school-based curriculum development (SBCD) movement is focused on whole-curriculum as well as part-curriculum development, and emphasizes the advantage of exploiting the potential of schools' creative abilities within wide limits.

Social Personal and Health Education (SPHE)
In most education systems there has been relative neglect of curriculum innovations in personal and social education when compared with academic education (Fullan, 2001). In Ireland the origins of SPHE can be traced back to the pastoral care/tutorial system of the mid 1970's, and later more structured programme initiatives, for example Life Skills for Health (1979), On My Own Two Feet (1991) and Relationships and Sexuality Education (1995). The introduction of the SPHE programme gave structure and coherence to that which was often informally in place in Irish schools; this formalisation demanded space on the timetable. The SPHE programme also challenges the more didactic methods of teaching, traditional classroom management and assessment and requires a commitment to facilitate the process by individual teachers, indeed *"it challenges the traditional concept of the teacher as the 'source of all knowledge'"* (SPHE Story - An example of incremental change in the school setting 2004, p. 4). In September 2000 the Department of Education and Science and the Department of Health and Children, together with regional health boards (now HSE) in partnership developed a support structure for the SPHE programme. The SPHE Support Service was set up to assist schools and teachers to implement the new curriculum.

The broader school environment is of paramount importance in the lives of young people; school and teachers can have an enormous influence on shaping children's emotional development and behaviour (Atkinson & Hornby, 2002). The Ottawa Charter (WHO, 1986) established the settings approach to health promotion and identified schools as one of the settings within which health promotion might be integrated. In 1995 the WHO defined a health promoting school as one in which *"all members of the school community work together to provide children and young people with integrated and positive experiences and structures, which promote and protect their health. This includes both the formal and informal curriculum in health, the creation of a safe school environment, the provision of appropriate health services and the involvement of family and wider community in efforts to promote health"*.

The importance of the school as a setting in which the issues of health and well being for students can be addressed successfully has been recognised in a number of strategy and policy documents published by the Health and Education sectors in Ireland. For example: Charting our Education Future (Department of Education, 1995) outlined *"The promotion of the social, personal and health education of students is a major concern of each school. Schools provide opportunities for students to learn basic personal and social skills, which will foster integrity, self-confidence and self-*

esteem while nurturing sensitivity to the feelings and rights of others" (p. 155). The subsequent Irish Education Act (Government of Ireland, 1998) emphasises that schools should promote the social and personal development of students and provide health education for them.

Current Health Policy Context

Recent developments within the Health Sector reflect the growing international movement away from the traditional emphasis on the treatment of illness and towards the integration of health and wellness promotion within health systems. It is recognised that such a shift requires a recognition of both the factors that influence health and also the wide range of actors and agencies that need to work together to address these factors. The Irish Health System has been subject to a range of structural changes over the last few years, which should assist in the continuing focus towards the promotion of the health of the population and inter-sectoral collaboration. These have included the establishment of the Health Service Executive (HSE) as the single delivery agent for health services and the reform of the Department of Health and Children to address overall health policy. Thus there is greater clarity of roles and expectations from the various arms of the health system, which will pave the way for more efficient and effective partnership working.

In terms of policy and strategy developments, the National Health Promotion Strategy (2000 - 2005) (Department of Health and Children, 2000) embraced the wider determinants of health as its focus and stressed the need for health to be placed on the agendas of other government agencies outside the traditional healthcare sector. It also acknowledged that both inter-sectoral and multi-disciplinary approaches were required to address both health inequalities and the major determinants of health. The strategy had among its objectives: *"To work in partnership with the Department of Education and Science to support the implementation of SPHE in all schools consistent with the Health Promoting schools concept... to work in partnership with the Department of Education and Science and relevant bodies to develop and implement drug education and prevention programmes for schools and the youth sector"* (p.47).

The importance of a multi-sectoral approach has been underpinned by a range of recent national policy documents. The National Health Strategy (Department of Health and Children, 2001) included a commitment to improving children's health and established that the *"concept of 'health services' is seen to include every person and institution with an influence on or a role to play in the health of individuals, groups, communities and society at large."* (Review of the Health Promotion Strategy 2004, p.21). The National Anti Poverty Strategy (Department of Social and Family Affairs, 1997) and Sustaining Progress

(Department of the Taoiseach, 2003) both reinforced the importance of reducing health inequalities through inter-sectoral collaboration and partnership working, as epitomised by Health Promotion. More specifically, the National Drugs Strategy, (Department of Tourism, Sport and Recreation, 2001) had education and prevention as key arenas for action, the National AIDS Strategy (Department of Health and Children, 2000), included support for the full implementation of the RSE programme while the National Children's Strategy, (Department of Health and Children, 2000), established the framework for the continued enhancement of the status and quality of life for Ireland's children.

The principles in the National Children's Strategy (Department of Health and Children 2000) and the National Anti-Poverty Strategy (Department of Social and Family Affairs, 1997) are reflective of the vision of the whole school as presented in the SPHE Curriculum Guidelines. In addressing issues that relate to a supportive school environment, the SPHE Support Service promotes the implementation of these policies and strategies (Lahiff, 2006).

Health Promoting Schools
SPHE aims to create a whole school approach to health and education. *"A health promoting school; promotes the health and well-being of the whole community"* (Health Promoting Schools Working Group, 2004, p.3).

It is clear that creating a healthy school requires a holistic approach; health cannot be seen in isolation from the other objectives of a school. The approach needs to be multi-strategic and focus on every strand of school life, rather than solely on the curriculum. A school is much more than the classes delivered to its students. Piette and Rasmussen (1995) defined the 'hidden curriculum' as the ethos (culture) established by the atmosphere of the school, the school's code of discipline, the prevailing standards of behaviour, the attitudes adopted by the staff towards students and values implicitly asserted by its mode of operation. Lahiff (2003) points out that when schools engage in health promotion their objective should be to create a supportive environment that will make 'the healthier choice the easier choice'. However, it is vital to acknowledge that such environments, like the ethos of SPHE, do not 'begin or end in school' (INTO, 2005). Full partnership between all the stakeholders within a school community, ensures that parents will also be fully involved in the process; they can actively participate in curriculum development and; learning can be supported and enhanced within the home and wider community.

SPHE offers opportunities to foster the personal development, health and well-being of the individual child, to help him or her create and maintain supportive relationships and become an active and responsible citizen in society (SPHE Primary School Curriculum, 1999). However, efforts to integrate SPHE more closely with the development of the health promoting school process have been hindered by a lack of clarity on the issues involved (Burtenshaw, 2003). The term 'healthy schools' is frequently used interchangeably with health promoting schools. Nevertheless, the principles and processes involved in the health promoting school movement have substantially informed the development and operation of SPHE within Ireland, and have been employed here to inform this research. It is important to recognise the convergence between the principles and practice of 'good' or 'effective' schools and those of 'healthy' or 'health promoting' schools, indeed in many conceptualisations the two are interchangeable (Nic Gabhainn & Clerkin 2004).

A health promoting school has a holistic view of health (Thomas et al., 1998; Rasmussen & Rivett, 2005). The WHO remarked that a health promoting school is *"constantly strengthening its capacity to be a healthy setting for living, learning and working by focusing on all the conditions that effect health"* (WHO, 2006). These conditions fall into four broad categories, which are known as the four pillars of a health promoting school (WHO, 1996): physical & social environment; health education programme; parent/community involvement; health policies (Lahiff, 2002). The Health Promoting School approach is not prescriptive. Rather the four pillars function as a guide for planning and action within schools (Lahiff, 2002).
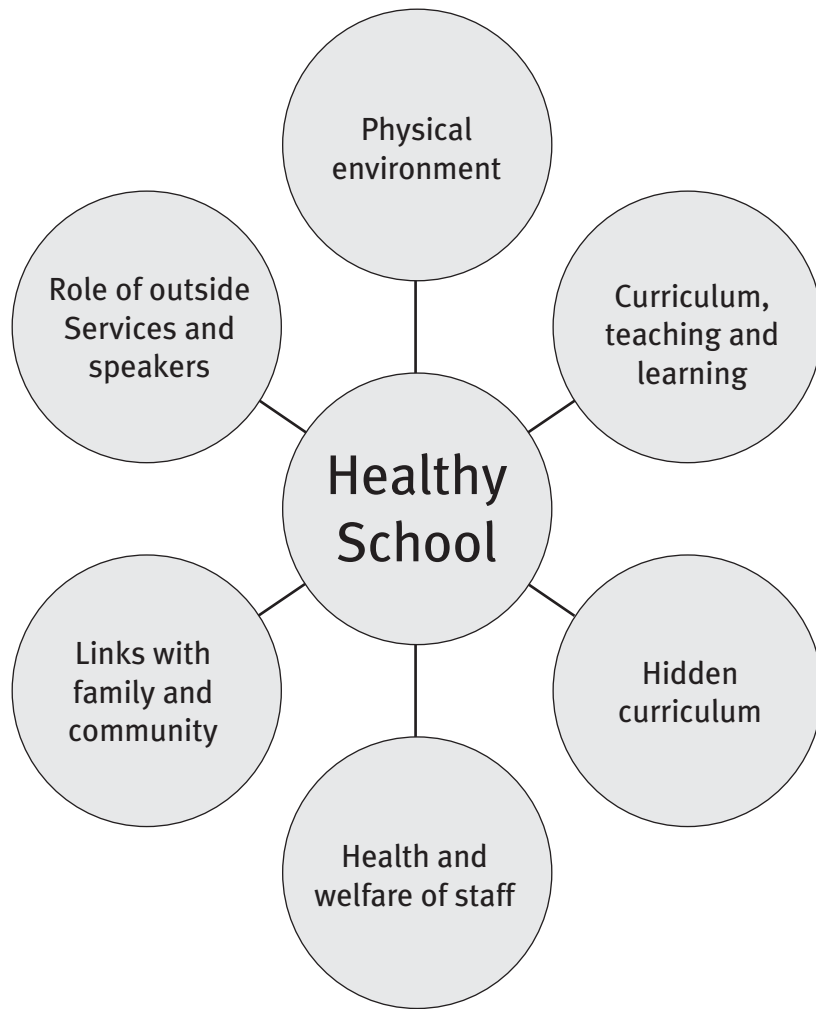
Figure 1: The whole school environment

The physical and social environment

The physical school environment involves the school buildings, furniture, equipment, structures and any physical, biological or chemical threats it may pose (WHO, 2003a). Inappropriate or unsafe physical environments can lead to poor health (St. Ledger, 1999) and consequently poor educational achievement. The school social environment is an essential part of emotional well-being (WHO, 2003b). A supportive social environment can improve the behaviour of students, can positively affect the mental health and well-being of young people and can enhance student learning outcomes (WHO, 2003b). A positive social environment can also contribute to an improved sense of belonging, better quality of life, reduce bullying and harassment, reduce truancy and provide a strong foundation for positive health in later life (WHO, 2003b). St. Ledger (1999) remarks however, that although the school social environment is fundamental to a health promoting school it is difficult to evaluate and assess due to its abstract nature.

Health education programmes

The health education programmes within a school can *"successfully raise self-esteem and knowledge levels, and develop attitudes, values and skills"* (Denman, 1999). If students have a sense of their own worth they are more likely to think positively about such matters as health and to modify their behaviours (Young & Williams, 1998). Many school subjects incorporate elements of health education in secondary schools. Although the teaching of these subjects may increase knowledge, health education does not inevitably change behaviour (Lister-Sharp *et al.*, 1999). The emphasis on health education programmes should be placed on the teaching of lifeskills such as decision making, critical thinking, negotiating, communication, listening, and problem solving (Young & Williams, 1989). Parcel *et al.* (2000) propose a behavioural approach to health education teaching for effectiveness. Here the emphasis lies on preparing students to resist the pressures of risk taking behaviours and to promote the employment of healthy behaviours. This issue of students' 'action competence' (Jensen, 1997) recognises the social and environmental influences on certain behaviours and aims to tackle the difficulties students face in a holistic and life-skills orientated manner.

It is important that students participate in SPHE classes, that they identify the health issues relevant to their lives and communities and that they provide suggestions for solutions through critical thinking and problem solving methodologies. The importance of participation was mentioned in both the Jakarta (WHO, 1997) and Alma Ata Declarations (WHO, 1978). *"Participation is essential to sustain efforts. People have to be at the centre of health promotion action and decision-making processes for them to be effective"* (WHO, 1997). If SPHE programmes are to be successful the school must practice the messages advocated in the programme and provide a supportive environment for their implementation (St. Ledger, 1999). The positive influence of teachers and school staff who advocate and practice positive lifeskills in their everyday interactions with students cannot be overemphasised.

Parent and community involvement

Parent and community involvement is an essential component of a health promoting school. The values, attitudes and behaviours in relation to health need to be replicated in the home and community if they are to be effective in the long-term (Denman, 1999). Denman also notes that the values, attitudes and behaviours learned by the students are the most important influences on their education and health. If health promoting practices are to be effective they must be designed to relate to the home and community environments. *"Linking the curriculum with the school environment and the community, a greater range of factors which affect students' health will have a better chance of being addressed, than if*

explored through classroom curriculum" (St. Ledger, 1999, p.56). Parental influence is particularly important. Parcel *et al.* (2000) note that parents act as role models for their children. They provide both opportunities for, and barriers to health in the home and they also influence the determination of their child's peer group that in turn will have a major influence on their child's health. It is therefore important that the school strengthens the link, and looks for support and reinforcement within the home and community settings for effective health promotion. Links with the community are also important according to Denman (1999), as the school can work in conjunction with community health initiatives by mirroring them in the school.

Healthy school policies

The fourth pillar of health promoting schools is healthy policies. The development of health policies in schools, ensure a sense of openness, accountability, responsibility and clarity about the school's attitudes, role and practices, in relation to health (Lahiff, 2002). Lahiff (2002) also notes the importance of policy implementation, adherence and review. If a policy is developed and consensus is reached about its contents and practicality, it is essential that the policy is implemented with the full knowledge and understanding of all its implications. Policies will inevitably lose impact and effectiveness if they are not supported in the school. These pillars are further supported by Stewart-Brown's (2006)

systematic review of controlled trials of school based health promotion initiatives. This WHO review found that interventions for which family involvement was reported demonstrated improvements in health knowledge, but improvements in health, health attitudes and behaviours were less reliable. This review also found that the most effective programmes were of long duration, high intensity and involved the whole school.

Democracy in education

The four pillars for a health promoting school lay the foundation for action and identify target areas. Since their development, further work has been conducted on compiling specific areas for action within a health promoting school (e.g. Rasmussen & Rivett, 2005; Paulus, 2005). Issues, particularly in relation to democracy and student involvement, have emerged as core health promoting practices. Paulus (2005) identified goals and processes for schools to employ to become health promoting. These included actively promoting democracy and involving the whole school by working with school councils, students and others involved in decision making, bringing parents and the community into the school and reaching out into the community (Paulus, 2005). That students will benefit from having their voice and opinion valued is clear from the literature on participation and empowerment.

Jensen and Simovska (2005) state that if students are not actively involved in the processes they will never develop a sense of ownership for their learning. If there is no sense of ownership the activities are very unlikely to lead to changes in students' attitudes, behaviours and actions.

Rasmussen & Rivett (2005) suggest providing opportunities for students to make meaningful contributions to the school and community life, achieving more participatory approaches in teaching and learning, reinforcing personal and social responsibility through school organisation, and adopting organisational practices that complement the teaching programme. These goals, processes and actions illustrate that health promoting schools support the practices and principles of participation and democracy in order to help develop young people's competencies (Rasmussen & Rivett, 2005). Students are encouraged to become empowered, to be actively involved in shaping their school environment, partake in participatory style lessons in the classroom, and develop citizenship skills and a sense of responsibility. Students need opportunities to be involved with decision-making, policies and structures of the school if they are to experience ownership of, as well as commitment and responsibility towards their school (Lansdown, 2001).

The NCCA (2006) commissioned the Educational Policy Research Centre of the ESRI in May, 2006, to continue research into second year students' experiences of teaching, learning and the curriculum and students' attitudes to school and school work. The study showed that a majority of students are positive about school, get on well with teachers and are engaged in the learning process. It also identified a significant minority of students who have a negative experience of school, with little engagement with school life and likely to drop out of school completely. The study demonstrated that the social climate of the school strongly influences student attitudes in their first two years in second level education. It also verified that a challenging, supportive learning environment and positive teacher-student interactions lead to a stronger academic self-image and higher educational expectations.

Implementation of SPHE

"A well-implemented SPHE programme has the capacity to provide a framework that can make the school environment more health promoting and supportive of those at risk and experiencing difficulties" (Lahiff, 2006, p5.). SPHE as part of a whole school plan has the potential to enhance the educational experience of all students. Yet implementation within an already over-crowded curriculum is not an easy process. Lahiff (2006, p5.) identified some keys issues to be considered:

- The specific training needs of teachers to empower them with the skills and confidence to teach such a *"personal and sensitive subject"*.

- Timetabling problems will necessitate on-going support i.e. the need for planning time and for teachers to be released to attend training.

- The aim of SPHE is to assist in building skills, understandings, attitudes and values, and further support will be required from *"education and health 'specialists' to respond to the health and well-being needs of young people"*.

- The recognition that the SPHE team within a school is an important and valued resource, which *"needs ongoing professional development and 'minding'"*.

The implemention of SPHE in Ireland needs to be considered within the wide range of educational change, particularly curriculum innovation, which has been on-going in Irish schools. There have been considerable advances in our understanding of the determinants of healthy and effective schools, and the centrality of the education partners as both the context and process indicators for the introduction of SPHE, and these deserve specific attention. In addition, the effectiveness of SPHE depends on continuously evaluating the needs of students as well as consulting with teachers, parents and school management to ensure that the content of the subject remains relevant (SPHE Support Service, 2004). Thus, it is important to understand how the range of factors that contributes to school performance and healthy school environments, in the context of SPHE, interact with one another.

4. RESEARCH METHODS

In order to gain the perspectives of all those involved in the delivery and receipt of the SPHE programme a case study approach with mixed methodologies was adopted. A case study is an intensive study of a single participant usually over a period of time (Rosenthal & Rosnow, 1991; Dane, 1990). In this study, 12 schools were considered as separate units in order to examine the relationship between the various components that might have an effect on the value and quality of SPHE within each of the schools.

A random sample was drawn representing different sets of combinations of school dimensions. Characteristics included school type (Secondary, Comprehensive & Community and Vocational), size, geography, disadvantaged status, gender and co-education.

Table 1: The characteristics of schools selected to participate

No.	Gender	Size	Location	Status	Type
A	Girls	Large	City	Not disadvantaged	Secondary
B	Co-ed	Large	Rural/ town	Not disadvantaged	Secondary
C	Boys	Small	Rural/town	Disadvantaged	Secondary
D	Co-ed	Small	City	Disadvantaged	Secondary
E	Boys	Large	City	Not disadvantaged	Secondary
F	Girls	Large	Rural or town	Disadvantaged	Secondary
G	Co-ed	Medium	Rural or town	Disadvantaged	Community Comprehensive
H	Co-ed	Small	Rural or town	Not disadvantaged	Vocational
I	Co-ed	Large	City	Disadvantaged	Community Comprehensive
J	Co-ed	Medium	Rural or town	Not disadvantaged	Community Comprehensive
K	Co-ed	Medium	Rural	Disadvantaged	Community Comprehensive
L	Co-ed	Large	Rural or town	Not disadvantaged	Community Comprehensive

4.1. Data Collection

Following agreement to participate from the Principal, active informed consent from parents and students was elicited. A range of methods were employed to meet the objectives of the research:

- Individual one-to-one semi-structured interviews were held with members of the school staff. The interviews all followed the same protocol and were semi-structured. Interviews were taped and took place with the Principal, the SPHE Coordinator, two SPHE teachers and another member of staff who was involved with the pastoral care aspect of the school; including Home-School Liaison Officers, Chaplains and Guidance Counsellors. In one school, the Principal did not want to be taped. Two schools had no SPHE Coordinator and in a third the Co-ordinator was the only SPHE teacher. In total, 49 members of staff in the 12 schools were interviewed.

- Interviewees were also asked to complete a paper and pencil task in order to facilitate the production of a whole school perspective on key issues. This involved them rating various aspects of the implementation process and the school as a setting for learning and health. All interviewees agreed to and participated in this exercise.

- A focus group, planned according to the guidelines provided by Litoselliti (2003) and facilitated by a moderator and assistant moderator, was conducted with parents to explore the issues in a consensus building fashion. Nine focus groups were held in the 12 schools. In one school no parents participated in the scheduled focus group and in two schools no focus groups were scheduled on the advice of the Principal (in the first schools because it was advised that no-one would come and in the second because they had just moved premises the previous week and were unable to facilitate such a process). In total, 57 parents participated in the 9 focus groups.

- A participative data collection exercise was conducted in a workshop format with three classes within each school, drawing on the work of Nic Gabhainn & Sixsmith (2006). A summary of the procedures adopted is located in appendix 3. In total, 713 students participated in the workshops.

- Self-completion questionnaires were administered to all students participating in the workshops and sent to all parents within that school whose child was attending SPHE classes (i.e. all first, second and third year students). The questions were primarily closed, with a limited number of open-ended questions. In order to maximise the reliability and validity of the questions some were taken from similar research studies, specifically the Health Behaviours of School Children (HBSC) questions on school culture and settings (Samdal et al., 2000). In total, 686 students completed questionnaires.

- Questionnaires for parents were developed and were analogous with those for students. Students who participated in the workshops were given questionnaires to take home for their parents, and in other SPHE classes they were distributed by teachers. Schools were also given a large freepost envelope and parents were advised they could either post their own questionnaire back or have it delivered to the school where the SPHE Coordinator (or other nominated staff member) would collect and return them to the research centre. In total 911 parents completed and returned questionnaires.

- The RDO (Regional Development Officer) for SPHE was interviewed for each region in which the 12 participating schools were located.

All questionnaires, focus group and workshop protocols were submitted for approval by representatives of the funders. In addition all data collection methods were pilot tested within the context of a full pilot case study. Parental and student consent was obtained for all data collected from students. A summary of the data collection phase can be found in appendix 1.

4.2. Data Analysis

The data analysis included both qualitative and quantitative components. The data collected from the questionnaires were primarily quantitative and were analysed using SPSS, version 12.0. The responses from the parents and students were not matched, as this would compromise the confidentiality of both. The qualitative interview data were transcribed and analysed according to guidelines for content analysis from Strauss & Corbin (1990).

The reliability and validity of this study rests on the faithfulness of the process to the contributions of the participants. The inclusion of a broad range of informants could be conceptualised as a form of triangulation (Dane, 1990) that maximises the external validity of the data collected.

5. DATA PRESENTATION

The data from all twelve schools together mask wide variation across the schools. Data presentation comprises first a thematic analysis across schools, drawing together perspectives from all stakeholders, followed by two summary case studies to illustrate both low and high quality SPHE implementation in practice. In the thematic sections below the findings are grouped into five areas, which are divided into 13 subheadings for the presentation of the perspectives of school staff, students and parents:

5.1. The quality and value of SPHE
a) *The quality of SPHE provision in the school setting*
b) *The value of SPHE in the school setting.*

5.2. The contribution of SPHE
a) *The contribution of SPHE to health attitudes among students*
b) *The contribution of SPHE to health behaviours among students*
c) *The contribution of SPHE to the educational experience of Junior Cycle students.*

5.3. Implementation of SPHE
a) *Teacher competence and confidence in teaching SPHE*
b) *How schools include SPHE in planning processes*

c) *Schools' experiences of structures, policies and roles that support SPHE implementation.*

5.4. Stakeholder involvement
a) *The extent to which SPHE complements the work of other school personnel*
b) *How schools consult with parents and teachers in relation to SPHE*
c) *How schools create links with stakeholders to support SPHE*
d) *Parents' expectations of SPHE for Junior Cycle students.*

5.5. Continuing SPHE programme into Senior Cycle, including Transition Year
a) *How SPHE can be built on in Senior Cycle, including Transition Year*

Data from all schools and from the various data collection methods employed have been integrated within the themes. In most subsections the perspectives of school staff are presented alongside that of the other education stakeholders involved. However there are some topics where views were not elicited from students and parents, for example on the school planning process. Where percentages are given, these refer to the percentages of students (n=713) or parents (n=911), who reported a particular perspective. A summary of quantitative findings can found in appendix 2.

5.1. Quality and Value of SPHE

(a) The of quality of SPHE provision within the schools

Key issues emerging on the quality of SPHE provision within schools

- SPHE is challenging and worthwhile

- Quality teaching is an essential ingredient for the successful delivery of SPHE

- Insufficient time is given to SPHE

- Sufficient and relevant resources are essential for the delivery of a high quality SPHE programme

- Many parents lack sufficient knowledge and commitment

The majority of members of staff, parents and students perceive the quality of SPHE provision positively. However, there is a considerable degree of variation on some aspects of quality provision between stakeholders in each of the twelve schools involved in this study.

School staff

Generally, the quality of SPHE provision is viewed highly by the staff. In 10 of the 12 schools SPHE is regarded as a subject that is both challenging and worthwhile. Where various social and health education initiatives

and lifeskills' programmes had already been implemented, staff members view the introduction of SPHE as an obvious progression in the development of student wellbeing in the education process. In one school SPHE is still called Personal Development, a subject that has been on their curriculum for years. Here, the Principal and staff incorporate SPHE as an extension of this, as well as part of the caring ethos of the school. Overall, SPHE is regarded as a welcome and relevant initiative in Junior Cycle. The quality of the teaching is regarded as paramount to the quality of SPHE provision.

The enthusiasm for SPHE is evident in several schools. A Home-School Liaison teacher expresses this: *"...the highest status you can give it is to assign a person's whole post to it and it's given the time, it's allocated the time every week ..."*. A number of interviewees identify a teacher's commitment to the subject as a necessary ingredient for success. One Co-ordinator comments: *"if the teacher only goes in and says, ah well you've a free class now, then they're not going to gain very much"*. Another Co-ordinator remarks that *"...Some teachers ... make sure they deliver, others see it as a bit of a doss class and if something needs to be done instead of it, they'll do it..."*

Concerns raised about the quality of SPHE provision relate mainly to the tensions between assigning sufficient time to the subject and the difficulty of curriculum overload. In many schools the view is that too

little time was given to SPHE provision. Since SPHE is a relatively new subject on the curriculum, in a number of schools it is recognised as needing much time and effort before reaping satisfactory results. One teacher comments that: *"we are not where we want to be yet"*. SPHE is not accepted as yet by several members of staff who do not teach it. A Co-ordinator stresses the point that, for quality of SPHE provision, there is a need for: *"... a whole school approach to SPHE. It's really vital, that it's not just the SPHE teacher trying to bring forward these ideals..."*.

Students and parents

The students express a great variety of opinions with almost two thirds of them (65%) agreeing that SPHE is interesting. A majority of parents (59%) are of the opinion that their child find the subject interesting. Among the suggestions from the students is allowing for more discussion time: *"more open debates on the topics"*, to learn: *"more about things that are important in our lives and learn information that I could use in the future"* and to deal with issues that arise regularly such as: *"how to deal with exam stress and subject/college choices"*. Some are unclear as to the relevance of the subject: *"I would like SPHE to be taken out of schools...a waste of time...that could be spent doing a worthwhile subject"*. A 2nd year girl comments: *"we don't learn anything anyways"*. It was evident from the open-ended questions that there are a number of students who feel the classes were worthwhile but could be improved: *"what*

we're doing in SPHE is everything I think I need to know, but I'd like more activities in it".

A widespread view held by parents was that they have insufficient information on SPHE. Of those who completed questionnaires, many state that they could not comment on the subject due to their lack of knowledge. One parent remarks: *"until I received this questionnaire I knew nothing about the content of SPHE class"*. Both parents and students concur with school staff that the teacher plays a pivotal role in ensuring quality. One parent believes that the quality of delivery was reduced due to lack of funding: *"teachers are not given enough resources to teach the subject ... [it] needs more financial backing"*.

Most members of staff interviewed believe their school is providing a worthwhile SPHE programme. The importance of the teaching is stressed as the essential ingredient for successful delivery of a quality programme. The other significant issue emphasised is the need to allocate sufficient time to the subject. A considerable majority of students are interested in SPHE, an attitude that is reflected by parents. The lack of understanding and knowledge of SPHE that a large number of parents demonstrate militates against them being able to give an informed opinion on the quality of SPHE provision.

(b) The value of SPHE provision within schools

Key issues emerging on the value of SPHE provision within schools

- SPHE is regarded as valuable and helpful

- SPHE suffers from timetabling pressures and there are difficulties with curriculum overload that influence SPHE provision

- SPHE has a lack of status in comparison to examination subjects

The majority of parents, students and members of staff perceive the value of SPHE provision in the schools to be high. Nevertheless, there is more ambivalence and less agreement among the three groups of stakeholders on this issue.

School staff

Eight of the twelve participating schools assert a positive view of the value of SPHE provision. Timetabling pressures and lack of status, however, are regarded as the two main challenges that confront almost all the schools. Many members of staff regard the subject as less important than examination subjects and the fact that it has to compete with these subjects in terms of time and resource allocation is seen as problematic. Thus, some members of staff believe its value is diminished because it is not an examination subject. A recurring view is that it also takes valuable time away from these 'more important subjects' as one SPHE teacher highlights: *"I think it's great we have it but it's where do you fit it in"*. There is one notable exception where SPHE is considered to be a core subject in the school. The Principal confirms this: *" ...it can be the only place for some students where certain issues can be spoken about and expressed and where there is time to give to these issues."* The Co-ordinator concurs and also considers that the perception of value of SPHE within the school filters down to the students: *"...belief in the subject and the importance of it. I think that comes across to the children as well because they do take it seriously and they know"*. Of the eight schools who claim to value the subject highly, there were conflicting attitudes not only among the staff interviewed but within individual opinions as one Co-ordinator highlights: *"I would say it's highly valued by the school ... [but] this would be well down the priority list you know ... the way we would see it is that it is a filler in, it wouldn't be priority"*.

It was acknowledged by four of the participating schools that the perceived value of SPHE is low. One Principal, newly appointed, admits to having little knowledge of what SPHE entails and disagrees that SPHE is as important as other subjects: *"... my initial reaction would be no, I suppose ..."*. Yet another Principal observes: *"... it wouldn't just be your biggest priority ... It's not fundamental to the timetable, definitely not ...*

It's an added extra that you want to safeguard you know ... if something had to go it probably would be SPHE unfortunately". Similar responses are frequent among members of staff in many schools; one Co-ordinator reiterates: *"do I think this is critical core stuff they should be doing as students in this school? I'd say yes, but do I think it's as important as Irish, English, Maths, French? No"*.

As was evident in the views on the quality of provision, the significance of teachers and the relationship between teacher and students are regarded as vital in evaluating the value of SPHE provision. One Principal observes regretfully that: *"... a teacher will have a class for first year ... by it's nature it tends to be the last item in the timetable and it just might not be possible to give that teacher that class next year"*. Two SPHE teachers in the same school are unenthusiastic about the attitudes among staff: *"... there's a kind of a negative attitude from certain teachers...generally older teachers don't want to teach it ..."*.

Students and parents
A range of views on the value of SPHE is also expressed by students and parents. In the student questionnaires slightly less than half (49%) consider that it was an important part of what they learn or that it is as important as other subjects (41%). A substantial majority (71%) believe that SPHE classes are not too long and many observe that they would like the class period extended or to have more classes: "I'd prefer to have more than one SPHE class a week and spend more time at it since it's important". Many robust views, both positive and negative, are articulated by students, for example: *"I think it is very important for us to learn the harmful effects of smoking, drinking, eating badly etc. so that we can make informed decisions"*. Another participant disagrees with this view: *"It's so boring. It doesn't help at all. It's the worst subject ever because it's useless"*. Almost three quarters (74%) of parents regard SPHE as important as other subjects. Several parents comment positively, for example: *"I think it is a very worthwhile subject and is as important as academics as it prepares the student for life both in school and outside"*. Parents were asked if they ever discussed SPHE with their child, and almost half of the respondents (49%) say that they did, as reflected in the following view: *"I think this is a great programme which helps children and their parents to talk about health issues as well as growing up and drugs etc. together and discuss what they are being told in these classes"*. Another respondent advocates that parents: *"... be more involved with the school so that parents and teachers can act as mutual support in these very important aspects of the children's lives"*.

The majority of participants indicate their endorsement of the worth of SPHE provision. However, the challenge for schools in promoting and valuing SPHE within the school ethos cannot be underestimated. The most frequent issues confronted by staff are in dealing with timetabling overload and general ambivalence as to the value of SPHE when compared to examination subjects. Its value and importance are reflected in many positive contributions from parents and students, albeit with some reservations being expressed.

5.2. The contribution of SPHE to health attitudes, health behaviours and educational experience of Junior Cycle students

(a) Perceived contribution of SPHE to health attitudes among students

Key issues emerging from the perceived contribution of SPHE to health attitudes among students

- SPHE contributes positively to students' attitudes to health, especially for their future lives

- SPHE helps students to think about and discuss health issues relevant to their age group

- SPHE provides opportunities *for* the development of personal and social skills among students

There is almost unanimous agreement among members of staff and Principals, parents and students in all the participating schools, of the positive contribution of SPHE to health attitudes among students. The widespread perception is that SPHE provides students with the opportunity to develop personal and social skills, promotes their self-esteem, self-confidence and wellbeing, contributes to their physical, mental and emotional health and fosters tolerance and respect for others.

School staff

Several members of staff believe that the subject helps to develop a spirit of enquiry, reflection and discussion, where difficult topics can be discussed in a safe environment. One Principal states: *"it makes them think, gives them an opportunity to discuss things …"*. A Guidance teacher is of the same opinion: *"I think sometimes it makes them think … it's not that they're being ignorant or they don't care, it's that they actually just literally never took time to think …"*. In another school, the Principal reflects a prevalent view that the results of SPHE might not be obvious until the students are more mature: *"it has to have a positive influence long term given the fact that you're discussing issues … which they may not see the importance of at the time they're being dealt with …"*. However, one Principal articulates a more wary attitude as to the effect of SPHE on the students: *"… again I wonder about one class a week, I wonder would it really have that huge effect, we would like to think it does*

and I'm sure it's designed to do that but sometimes you wonder". The need to address issues that are regarded by the students as relevant to their health is emphasised by some members of staff.

Students and parents

Both parents and students were asked whether they thought that SPHE teaches students the importance of being healthy. A significant majority of respondents from both groups agree with this view; 81% of parents and 76% of students. Several students, who feel they were receiving little instruction on health matters, nevertheless, regarded SPHE class time as an opportunity to find out about these issues. One boy suggests learning about: *"how to take care of yourself and the effects of not looking after yourself"*. Other health concerns that are proposed for SPHE classes relate to physical, mental, emotional and sexual health, for example: *"I would like to know more about emotional health especially before my exams"*, and another student states: *"I would like to learn more about stress and what happens"*. The young people were also asked to indicate their opinions as to whether SPHE gave them the opportunity to think about things and/or to discuss things. Over two thirds of respondents (68% and 69%) agree with both these statements. One girl remarks: *"I think SPHE is a very positive class where you get to talk about things"*. Another proposes that SPHE classes could be used to: *"focus on making important decisions, for example, if you*

thought a classmate was unhappy ... and how you would deal with this sort of situation". More parents (62%) than students (41%) regard SPHE as effective in building confidence.

A large majority of members of staff, parents and students consider that SPHE contributes positively to students' attitudes to health, especially in their future lives. The widespread belief is that the subject helps, or has the potential to help, students to think about and discuss health issues relevant to their age group.

(b) The contribution of SPHE to health behaviours among students

Key issues emerging on the contribution of SPHE to the health behaviours among students

- It is difficult for staff to evaluate the influence of SPHE on health behaviours among students

- There is agreement that SPHE has the potential to improve the health behaviours of students

- Most parents and students are satisfied with the support SPHE offers in relation to keeping healthy

Many conflicting views are expressed by contributors in all three groups; members of staff, parents and students, on their views on the contribution of SPHE to health behaviours among students.

School staff

The majority of staff interviewed are reluctant to quantify the impact of SPHE on the health behaviours of the students. It is considered by most schools to be difficult to determine such effects, and reported that it is difficult to answer the questions definitively. However, many express the hope that SPHE will have a positive influence on the future lives of students and believe in its potential to improve their health behaviours. One Principal stresses the importance of assessing, through research, the effects, if any, of SPHE on students. Another Principal remarks that: *"... it has a greater possibility of impacting on their personal lives than say History or Geography"*.

Despite the difficulty in evaluating the effects of SPHE on student health behaviour, there are some affirming views as to the benefits, the following example was articulated by an SPHE teacher: *"... it gives them time to reflect on themselves ... it heightens their awareness of what the difference is between appropriate and good and bad behaviour"*. In one boys' school, the Co-ordinator believes that SPHE had a positive influence on male behaviours: *"I always get the feeling that they are correcting their attitudes say about female sexuality, or whatever. I try to emphasise responsibility and I have a feeling it does, again effect their attitudes generally about everything ..."*.

One Co-ordinator expresses a view, held by several staff, that although some students will inevitably be influenced in a positive way, others might not profit: *"... we're bound to touch some of them; the drugs thing I think opened their eyes to what is going on around them. Some of them would be very, very aware, but most of them aren't"*.

Students and parents

In the questionnaires, when asked whether SPHE helps students to stay healthy, over three quarters of parents (77%) and slightly fewer students (71%) agree that it did. However, a divergence of opinion between the two groups is evident on the question of whether SPHE encourages physical exercise and activities; a majority of parents (71%) believe that SPHE teaches their child to be physically active with a smaller percentage of students (45%) in agreement. Most parents (71%) indicate that they feel that SPHE discourages their child from drinking alcohol, and interestingly, less than half of students (45%) agree. However, as regards cigarettes, a majority of young people (55%) believe that SPHE influences their decision whether or not to smoke and most parents

(78%) indicate that they are of the same view. Once again a greater percentage of parents (70%) than their children (59%) perceive that SPHE has a positive influence on eating healthy food. During the focus groups with parents, many requested that in SPHE classes, a strong emphasis be placed on the importance of healthy eating and physical activity as well as the dangers of alcohol, drugs and cigarettes. One parent believes that these issues were connected: *"... diet, healthy eating habits, exercise, keeping fit helps children in all aspects of life and may turn them off drinking drugs and smoking ..."*. Students also volunteer suggestions, similar to those raised by parents. Issues around alcohol, drugs and cigarettes, healthy eating and exercise are even more strongly emphasised by students. One young female comments succinctly: *"it could be interesting if we were made to be a bit more honest. I mean it's not as if everyone doesn't know that we've tried smoking, drinking and may be drugs. So perhaps if we discussed more real-life experiences it might make us see how dangerous these things really are"*. Several teenagers indicate strongly that more information on all of these issues was very important to them: *"Many girls in my class still drink alcohol in huge amounts. I think harsher statistics and facts could help stop them and may be a guest speaker of someone with experience"*.

Although a small number hold positive views, many of the staff interviewed are reluctant to

speculate on the influence of SPHE on health behaviours of the students. This is mainly due to the difficulties perceived in evaluating such a contribution. The majority of parents, on the other hand, express their satisfaction with the support that SPHE offers their children in keeping them healthy; on the influence it has on their physical activity, on their approach to alcohol, smoking and healthy eating. Most students also consider that SPHE helps to keep them healthy but they are more reticent than their parents about the impact it has on the decisions they make in relation to alcohol and physical exercise.

(c) The contribution of SPHE to the educational experience of students

Key issues emerging on the contribution of SPHE to the educational experience of students

- There is consensus that SPHE ennhances the educational experiences of students. all groups are enthusiastic about the educational potential of the subject

- Students are more ambivilant than their parents about the influence SPHE has on their education

- Students express the view that SPHE is helpful to them in dealing with difficult situations

The perceived input of SPHE to educational experience is very positive. It is emphasised by members of staff, parents and students that the SPHE class provides students with a unique opportunity to express themselves openly. It is regarded as a forum where issues relevant to students can be raised, where difficulties of all kinds can be discussed, thus adding an extra dimension to the educational experience of students.

School staff

Almost all of the staff and Principals who were interviewed believe that SPHE makes a positive contribution to the educational experience of the Junior Cycle students. Several members of staff consider that SPHE benefits from being a non-examination subject, without the stress that accompanies some of the more academic subjects. As one religion teacher points out: *"... they look for a certain amount of relaxation and fun anyway, you know ...They enjoy the class ... and they love the group work and the interaction with each other"*. Another recurring opinion relates to the advantages of SPHE spill-over to other subjects as illustrated in the remark of one Principal: *"it's a holistic kind of issue and I think it can be cross-curricular, delivered as well with other subjects"*. An SPHE teacher, who also teaches Geography and Irish to these classes, emphasises the rewards that accrue from such a system: *"... 99% of the time they're more willing to row with you in the Irish and the Geography if they have a good experience of you in SPHE"*. A frequent

view expressed by interviewees is that SPHE offers the teacher the opportunity to get to know students in a more holistic way than would be the case with other subjects. One of the SPHE teachers notes: *"I would say it would may be help you to understand them or to get to know them better and as individuals"*. A Co-ordinator was in agreement: *"I think they get a different insight into the students' needs ...You have to have a different relationship with them in the class than you would have may be in a normal mainstream subject. I know I certainly would benefit a lot from it now"*.

Only one school in the study is ambivalent about the contribution of SPHE to the educational experience, a view expressed by one of the SPHE teachers: *"I suppose the big challenge is the whole thing is intangible isn't it? You just have to believe in it ..."*.

Students and parents

Students were asked whether they felt SPHE made their school a better place to learn and less than half of them (43%) agree. Even fewer (34%) feel that SPHE helps them with other subjects but over half of parents (55%) have a more optimistic view of its influence. With regard to getting on with their peers, over half of the young respondents (51%) say that SPHE helps them and almost two thirds of parents (64%) believe that their children benefit in this way. Interestingly, a greater number of students (62%) than their parents (52%) are clear that SPHE teaches them skills to handle

difficult situations. Less than half of students (46%) feel that their fellow students really take an active part in SPHE class.

Participants from both groups express their opinions in response to the open-ended questions enthusiastically. Getting on with peers and managing difficult situations are issues that crop up regularly as needing more attention in SPHE classes. The following two student remarks illustrate this: *"It would be good to cover things like how to deal with problems (family and friends) and more practical advice ...", "[I would like to know] what to do in difficult situations and how to handle peer pressure"*. In a similar vein a parent notes: *"I would like my child to learn how to handle hard times and how to come over them, get back up and still be content about life"*. Another parent was keen for the student to learn: *"... how to get along with difficult friends and how to handle difficult situations they may find themselves in, in the next year and even afterwards"*. Many students (62%) hold the view that they handle difficult situations better because of SPHE while a smaller number of parents (52%) believe that it helps their children to deal with problems.

The general consensus among members of staff is that SPHE enhances the educational experience of students. As a non-examination subject, it gives students and teachers alike the opportunity to examine and discuss issues relevant to the lives and wellbeing of young people. Students prove to be more ambivalent than parents about the influence SPHE has on their education but, on the other hand, they feel more strongly than their parents that SPHE is helpful to them in dealing with difficult situations. All three groups of stakeholders are enthusiastic about the educational potential of the subject.

5.3. The Implementation of SPHE

(a) Teacher competence and confidence in teaching SPHE

Key issues emerging on teacher competence and confidence in teaching SPHE

- SPHE staff, particularly those who choose to teach it *and* have been trained, enjoy the experience

- The majority of the students enjoy learning during SPHE classes

- The importance of continuity in relation to teaching SPHE to the same class over a period of years is stressed by teachers

- Support and training for the teachers are regarded as essential for success of SPHE

Most members of staff on the SPHE team enjoy teaching the subject, particularly those who are trained. A majority of parents are of the opinion that their child likes and benefits from being taught SPHE and a large proportion of students agree. Support and training for teachers are regarded as being the most important aspects of delivering a successful SPHE programme.

School staff

Most SPHE teachers interviewed have attended SPHE training and the vast majority of these, particularly those who volunteered to be part of the SPHE team, express confidence, enthusiasm and enjoyment in teaching it. There are five schools where some teachers have not had any training and generally these interviewees express more negative views. Of the twelve schools involved in this study, there are four schools where the teachers chose to teach SPHE, in the others teachers are timetabled to teach the subject.

Many coordinators convey strong views on the importance of tuition and on-going training: *"... we went on every course available ... so I'd see that as a huge thing because there's no point asking teachers to take a subject if they've no training"*. The lack of value, which some SPHE teachers hold for the subject, is an issue that is expressed by some interviewees. One Principal comments: *"... I suppose if there's an in-service that they can cut out, they'll cut out their SPHE"*. Generally, teachers in the schools where there is little in-

service training express a lack of confidence, interest and enjoyment in the subject. One teacher with no SPHE training comments: *"I wouldn't have been that thrilled with it [being timetabled with SPHE] because I don't know certain areas of it, there would be certain areas I wouldn't feel comfortable teaching ..."*.

The timetabling of teachers is a thorny issue and seen by many interviewees, including Principals, as problematic. One Co-ordinator expands: *"... you're plonked with it you see, it's on your timetable, you're given the job"*. One of the Principals reflects on some of the difficulties encountered in organising timetables: *"there are occasions when slots appear vacant on a timetable and you have people available and consequently you may have to slot them in"*. The Principals of some schools believe that asking a new member of staff if they would teach SPHE was a reasonable option: *"I suppose, you'd be looking at new teachers coming in, you would ask them if they are willing to teach SPHE, and of course they would say yes ..."*. Nevertheless, in one such school an SPHE teacher points out that: *"it's literally random, timetables, you don't get any say. Well, that's here anyway; it's just given to you"*.

The issue of continuity is raised by some staff members, the importance of teaching the same class over a period of years and where possible the teaching of another subject as well as SPHE to the same class group. This is

reflected by one SPHE teacher: *"I thoroughly enjoy the subject, especially with a group that works well and in a way I've been spoiled in that way because the group that I teach I also have them for Geography and CSPE so I know them very well … I would think it's more difficult with a class that size if you only had them one day a week"*.

Students and parents

As mentioned earlier almost two thirds of students (65%) agree that the subject appealed to them. The following is a typical comment from one student: *"most of the things we do in SPHE is the stuff I would like to do … there is nothing else really. Classes should be a lot longer than thirty five minutes …"* Another student remarks: *"I don't mind - just not any of the things we done, because it's kind of similar every week and it gets boring"*. Less than half of the students (46%) think that their teachers really like teaching SPHE.

The majority of parents (59%) report that their child finds SPHE interesting. One respondent reports that: *"from what my daughter has told me, the school at present are covering a wide range of topics … she seems happy with what they are doing and I'm sure as she progresses through her years in her school, she will gain from the benefit of these classes"*. Some parents (26%) feel that the SPHE teachers need more training. Many communicate strong views on the requirements for a successful SPHE teacher: *"I think professional*

teachers should be working in the school who know how to talk and answer students' questions in the best way as possible and not just any teacher that just tries to teach SPHE". Another comments that SPHE is: *"sometimes given to junior teachers with inadequate training"*.

Teachers who choose to teach SPHE are generally more enthusiastic and dedicated than those who have been timetabled, without consultation, to teach the subject. The training and the Support Services are considered to be of great benefit and importance in the delivery of a successful SPHE programme. Most students enjoy learning the subject and their parents report that they do so too. Likewise, most teachers like teaching it.

(b) How schools include SPHE in planning processes

Key issues emerging on how schools include SPHE in the planning process

- SPHE is included in the planning process in fewer than half the schools

- Schools are keen to include SPHE in whole school planning

In over half of the schools SPHE is not currently included in the school plan but three schools are integrating the subject into the planning process. One Principal states: *"we haven't actually gone into all that yet. We're only starting"*. Another Principal notes: *"...we have had in-service on whole school planning ... we haven't really got it completed yet"*. In a third school the Principal expands on the plans for the school: *"... we're just more or less embarking on the subject planning aspect of school planning ... the first meeting [was] for SPHE planning but there's a lot of work to be done on all the subject planning but SPHE would be one of those"*. In three other schools the Principals are strong in their commitment to SPHE and its assimilation into the planning policies and processes. This is reflected in a comment from one Principal who regards its integration as an essential part of validating the subject: *"... it is part of the school. So the plan for the school would be rather to integrate SPHE, rather than SPHE looking for the integration, it is part of the school plan ..."*. Parents and students were not requested to comment on the integration of SPHE in the school planning process.

(c) The Schools' experiences of structures, policies and roles that support SPHE implementation

Key issues emerging on the structures, policies and roles that support SPHE implementation

- In almost all schools, policies and structures are in place that support the running of the SPHE programme

- The role of the SPHE Coordinator is seen as pivotal to success

- Members of the SPHE team who feel valued and supported express a strong sense of satisfaction in their work

- More than half of parents think that schools need more support in their delivery of a successful SPHE programme

In almost all schools, there are some policies and structures in place that support the running of the SPHE programme. Members of the SPHE team who feel valued and supported within the school express a strong sense of satisfaction in their work. More than half of parents report that schools need more support in their delivery of a successful SPHE programme.

School staff
In five of the twelve schools, the SPHE Coordinators have shared posts of responsibility. In one school the Co-ordinator has a full post of responsibility. There is no post given to the SPHE Coordinator in four schools and there are no Co-ordinators at all in two schools. Only one school states that they had no structures or policies in place to help support the SPHE programme. The measures

which are in place in the rest of the schools include policies on bullying and behaviour, drugs, healthy eating and RSE. In the majority of schools there are informal meetings to assist the SPHE team and in two schools there are weekly formal meetings. These meetings, both formal and informal, are for the purpose of discussing any difficulties that arise in class and issues such as in-service, information, procedures and resources.

A number of SPHE staff voice their dissatisfaction with the lack of help and assistance available to them within their school. One teacher notes: *"it's very much you're left to your own devices really ..."*. In another school an SPHE teacher comments: *"I suppose, there's no real support as such ...I just get on with it"*. In many schools there are no arranged meetings, they are conducted on an ad-hoc basis. As one Religion teacher explains: *"I mean there's no set time, but that happens, through break time if the need arises, or if there's an issue..."*.

However, some of the schools are keen to put more formal structures in place. One SPHE teacher suggests a plan for improvement: *"if we had some sort of a kind of an internal school in-service on SPHE where the SPHE teachers were may be given an afternoon off time so they could sit down and plan..."*. Frustration is clear in the schools where there is little support given to the SPHE team. This is in stark contrast to schools where SPHE is regarded highly. In one school, for example, a

specific classroom is used to deliver the SPHE classes. Here, SPHE resources are stored and project work displayed. The Co-ordinator also has a generous budget, and a time allocation for co-ordination of two class periods per week. The Principal explains that: *"...on a weekly basis resources are shared, difficulties are discussed and if there's an adjustment to be made it's made. But the policy is there so they pretty much go with the policy and recently they reviewed their policy and were happy...".*

Parents

Over half of the parents (52%) think that schools need more support in order to deliver SPHE successfully. One parent observes: *"I think it is a very important subject and should be given as much emphasis as other subjects. Teachers are not given enough resources to teach the subject"*.

Many SPHE staff members feel supported in their positions. The role of the SPHE Coordinator is seen as pivotal in the successful integration and delivery of the programme. It is the SPHE Coordinator who supports the SPHE team in the school, organises meetings of the team, allocates the SPHE budget and sees that training needs are met. In a few schools there is a sense of dissatisfaction at the perceived lack of structures and support. A little over half of the parents who responded would like to see SPHE getting more assistance.

5.4. How schools complement, consult and create links with various SPHE stakeholders and parent expectations of SPHE

(a) The extent to which SPHE complements the work of other school personnel

Key issues emerging on the extent to which SPHE complements the work of other school personnel

• The level of awareness among all staff is essential to increase the influence of SPHE

• The pastoral care ethos in a school has major influence on the perception of the SPHE

Perceptions vary greatly on whether SPHE complements the work of members of staff not on the SPHE team. In five of the schools, participants are positive about this issue, in five others they are negative and in the remaining two there is a mixed response. Where SPHE is seen to complement the teaching of other school personnel, the SPHE teams believe this to be dependent on the awareness of the general staff of the SPHE programme. Not surprisingly, the pastoral care ethos in the school is perceived to influence the extent to which the complementary element of SPHE affects the work of other school personnel. Thus, the Chaplain, the Religion teacher and the Home-School Liaison teacher within the school have an important supportive role to play.

School staff

In some schools, staff are kept informed of what is happening in the SPHE programme so that if, for example, assertiveness is being discussed in SPHE, the rest of the staff are primed to expect new assertive behaviours from the students. One Principal emphasises that: *"...so we've always had that pastoral sense and that work and we've always worked with tutors and the sense that we look after the students... So I suppose SPHE just sits in lovely with us except now we have to put it into the timetable and we have to have a teacher fixed for it"*. A Co-ordinator explains how teachers were kept informed of SPHE issues: *"...the new Religion and the new Science teacher will be invited to the meeting and they would normally come. We'd have it at a time that they'd be able to come"*. One Principal ponders the problem: *"I suppose there really should be a slot in staff meetings..."*. Another Co-ordinator expresses irritation at the lack of time to get a proper procedure in place: *"I would love to sit down with the Science teacher and find out when they're doing RSE, when they're doing the reproductive system, when they're doing it in Religion so we can all hit it at the same time, I don't have time for that, I just don't"*.

The lack of knowledge of what SPHE is about is articulated by one Principal who is keen that the RDO would come to speak to the staff: *"...even if it were an afternoon, two hours session... just to give them an insight to what is happening. Teachers, particularly secondary level, can get bored and isolated in their*

boxes". The vagueness, as to whether there is a spill-over to other subjects, is apparent in many of the schools. One SPHE teachers is tentative: *"I'd say a lot of us cover more or less the same things but in different ways"*. In one school, the Principal reflects on the view that: *"it forms a big part of the pastoral area, I suppose, more than other subjects... as regards the planning itself there would be no meeting of the Religion teachers and the SPHE teachers..."*. The Chaplain in the same school is unsure about the role of SPHE: *"...there might be an overlap between SPHE and other subjects like Home Economics, may be Religion, may be Science..."*. One SPHE Coordinator states that: *"people in a secondary school tend to operate like islands"* and the Guidance teacher in the same school agrees that very little knowledge about the programme is evident in the school.

The perception among the SPHE teams as to the extent to which SPHE complements the work of other school personnel is dependent on the general understanding and appreciation of the programme among staff members. The will to increase awareness and value of the SPHE programme among all staff members is apparent in many schools.

(b) How schools consult with parents and teachers in relation to SPHE

Key issues emerging on how schools consult with parents and teachers in relation to SPHE

- The influence of the SPHE Support Service is crucial to increasing the knowledge and support for the SPHE programme among other teachers

- There is little engagement with parents in the planning and development of SPHE

One school declares that their staff members have a good understanding of SPHE and this is due to a visit from the SPHE Support Service RDO, who came to the school and worked with all the staff for a full day. In the majority of schools it is not considered relevant to have consultation with general staff members in relation to SPHE. This is due to the lack of knowledge and understanding of what the programme is about among those not on the SPHE team and, in some cases, those on the team. In relation to parents being consulted and informed about SPHE, although the majority of schools have an active parents' association, there is little involvement of parents in the planning or development of the subject. Six of the twelve schools involved have SPHE as a subject on their report cards. SPHE teachers are present at parent-teacher meetings in six schools. Although school staff emphasise the range of communications between the school and parents, both parents and students agree that there is relatively weak communication in relation to SPHE.

School staff

The dearth of appreciation and interest in SPHE among staff who do not teach the subject is regarded by some Principals and members of the SPHE teams as an issue needing attention. One SPHE teacher suggests succinctly that it would be helpful if there were: *"...more support from the entire school, a whole school approach towards SPHE"*. A number of interviewees comment on the confusion among some teachers between SPHE and CSPE. One Co-ordinator finds that not only were the rest of the staff disinterested but some of her own team are unwilling to embrace the SPHE ethos: *"...I photocopy everything and give it to them. Some of them use them. Some of them ignore them completely"*. An SPHE teacher maintains that a number of the staff: *"...wouldn't regard it as a subject that would be of importance, but I don't think it makes it difficult for them, I just don't think they think about it at all..."*.

In a number of schools, parents of first year students are invited, at the beginning of the school year, to an information evening, on the curriculum their child will follow in Junior Cycle. SPHE is explained to them at this stage and for many parents this is, often, their only opportunity to obtain information on the subject. Most schools agree that parents are not consulted about the planning and development of SPHE. Some parents gain information through parent-teacher meetings. However, in a few schools, SPHE teachers reported that parents never approach them on these occasions. Some interviewees believe that the parents are not kept as informed as they could or should be and are certainly not consulted. As one former SPHE Coordinator observes: *"...we regularly had parents' evenings where we explained the pastoral care system... in a funny kind of a way when it became an official subject, you weren't calling meetings... so it kind of dropped and it was terrible really"*. One Principal notes that in relation to consultation with parents about SPHE, it is: *"...no more than any other subject. We don't consult them around history or geography, so we don't consult them around SPHE"*. Half of the schools admit to having a low level of parental involvement generally. A Home-School Liaison teacher claims that: *"it's very difficult to engage parents. Parents are becoming harder and harder to engage and that's the reality..."*. The Principal in the same school puts this down to the trust the parents have in the education of their children: *"I've never had a parent who feels that the children aren't cared for... in my experience of the parents in the school, they leave it to us..."*.

Many SPHE teams observe that there is a lack of interest and knowledge about SPHE among staff members who do not teach it. Therefore, it is regarded as extraneous to consult with them about the subject. Likewise, parents are seldom consulted as they also are perceived to have little knowledge of SPHE and some staff members consider them to have no apparent interest in it. The parent focus groups, which were held as part of the

research, reinforced the general view that they have little knowledge but their enthusiasm to acquire information on the subject is obvious.

(c) How schools create links with stakeholders to support SPHE

Key issues emerging on how schools create links with stakeholders to support SPHE

- In all schools there has been some staff in-service training - this is regarded as a crucial support for SPHE

- RDOs have visited some schools to suuport the teaching of SPHE by working with the whole staff

- Outside agencies and guest speakers have been invited to most schools and are seen as positive additions to the SPHE programme

All the schools have had some staff attend in-service training and generally the comments are positive on the assistance and encouragement that is given by the SPHE Support Service. Some schools have invited the RDO to the school to support the teaching of SPHE. Over half the schools in the study have invited outside agencies and guest speakers to deliver talks to students as part of the SPHE programme. The outside agencies and guest speakers specifically mentioned, who were invited to visit, included Accord, the

Garda' people to speak on substance abuse/drug awareness, sexual health for juniors, and Health Board officers.

School staff
There are various reactions to the in-service training and support. The enthusiasm of one Co-ordinator about the tuition that all the SPHE staff received is obvious: *"...the best in-service courses we've ever been at...they're very practical. They get you up and you've to do all the things... they're excellent"*. One Principal, who is very impressed with the RDO, comments: *"she is just super. She's on top of the whole thing and she insists and makes sure that people get to one or two in-services every year at least..."*. An SPHE teacher mentions the importance of continuity with regards to the training: *"I think there needs to be the same teachers so that if you went on two in-services this year and two different ones next year and two different ones the year after and you build up your area of expertise, that's the way I'd see it"*. Several staff members point to the importance of a supportive Principal, in terms of in-service training and resources, which sustain and advance the SPHE programme within the school. In one school, in relation to engagement with the SPHE Support Service, the Principal had been reluctant to let staff attend training. One of the SPHE teachers there expresses the wish *"to have a more structured approach and a goal... may be more communication from the SPHE support group..."*.

One Co-ordinator is less than positive about the training and the trainers: *"...they're not given by teachers for teachers... there aren't enough materials out there to convince me that the people out there are serious"*. This reaction is echoed by an SPHE teacher: *"I think the people giving the in-services, I don't think they know what it's like on the ground, you know teaching the classes. I don't think they really understand"*.

One of the schools relies on outside agencies to a large extent, to deliver talks as part of the SPHE programme. The Co-ordinator elaborates: *"...we had someone on drug awareness, sexual health for juniors that will complement the RSE. Some of our teachers wouldn't feel comfortable doing that"*. The SPHE Support Service RDO feels this might be due to a lack of confidence on the part of the staff, in relation to the delivery of certain aspects of the programme. This notion of lack of confidence is confirmed by one of the SPHE teachers: *"I wouldn't say I'm well prepared..."*.

The significance of the SPHE Support Service, their in-training and visits, their encouragement and back-up, is stressed by most schools. It is regarded as crucial to the SPHE programme development. Generally, in schools where outside groups and guest speakers were invited into the school, there is a positive attitude to their value in supporting the work and development of SPHE.

(d) Parents' expectations of the SPHE programme

Key issues emerging on parents' expectations of the SPHE programme

- Parents that do comment are both enthusiastic and encouraging about the SPHE programme

- Many parents feel unable to comment due to their lack of knowledge of SPHE

- Some of the parents' comments convey that they would not only like to know more about the SPHE programme but also feel more involved with this aspect of their child's education

Parents' expectations of the SPHE programme are reflected in their comments in the questionnaires. For example: *"I believe SPHE to be an excellent subject. Huge emphasis should be placed on drugs, alcohol and unsafe sex. This should be done with the involvement of parents by way of letters"*. The parents list a wide variety of topics for inclusion in the programme and among the most frequently mentioned were sexuality and sex, alcohol, drugs, cigarettes, relationships and social development, self-esteem, self respect, stress, grief and bereavement, feelings with particular emphasis on anger, healthy eating and health issues generally, responsibility, bullying, money issues. Another parent explains that they would like

SPHE to include: *"Building confidence in teenagers so that they can speak their minds honestly. Have respect for themselves and others"*. Some parents offer the idea that outside speakers or 'specialists' might be better able to cover some of the more sensitive areas of the programme, *"I think a specialist teacher coming in without any preconceived ideas about each child might be more beneficial and children might feel more free to express themselves"*. Some parents comment negatively as to the quality of the SPHE classes that their child was receiving. *"As far as I am informed by my child SPHE class is watching videos that are not to do with SPHE and as far as they know no other student has a SPHE book apart from them"*.

In relation to what should be included in the Senior Cycle SPHE similar topics are listed with additions such as *"...skills for coping with stress, failure, others expectations + lifeskills re living away from home - healthy eating, safe food handling, budgeting."* One parent ventures *"Would it be possible for the young people to become involved in projects in the community - where they work together in small groups?"* Parents are looking for more than just points from the education system; one parent explains *"to be able to make unbiased decisions, informed choices, hopefully it will help him become a well balanced, confident and disciplined adult"*. Overall, the responses are enthusiastic and encouraging but once again, it is apparent that, as with other curricular areas, many

parents feel unable to comment due to lack of knowledge of SPHE.

5.5. Continuing SPHE programme into Senior Cycle, including Transition Year

(a) How SPHE can be built on in Senior Cycle, including Transition Year

Key issues emerging from the perceptions of how SPHE can be built on in Senior Cycle, including Transition Year

- Staff in most schools are in favour of the continuation of SPHE into the Senior Cycle

- Important issues for the implementation of SPHE in Senior Cycle include timetabling, teacher training and the value placed on SPHE by all members of school community

- A minority of both parents and students support the continuation of SPHE into the Senior Cycle

Ten of the twelve schools in this study are in favour of the continuation of SPHE into the Senior Cycle. However, a minority of both parents and students support this view.

School staff

The importance and the need for the subject to be taught in all classes is emphasised by many of the members of staff including Principals. A number of interviewees believe that SPHE, as a non-examination subject, offers an opportunity to the older teenagers to discuss and get information on important issues, such as relationships and break down of relationships, depression, suicide, emotional problems, homophobia, drugs and alcohol. One Home-School Liaison teacher echoes many other opinions: *"I just think the time for the young people to have a space that's not academically driven if you like and that there's a time for them may be to, you know just to find themselves"*. More community involvement in a Senior Cycle SPHE programme is proposed by some schools.

The positive attitude of the majority of staff members to the introduction of SPHE into Senior Cycle is tempered by the practicalities of implementing such an initiative, in particular the demand for space on the timetable which SPHE requires. A Home-School Liaison teacher voices such a reservation: *"in an ideal world they should have it because all the issues just don't go away after third year... it's the actual practicalities of implementing it that is the problem"*. The management, co-ordination and support, necessary to continue the subject successfully into the Senior Cycle, are regarded as a major challenge. Staff and Principals stress the importance of specific training, directed towards teaching older students, in order to make it worthwhile and to avoid repetition of work already done in the Junior Cycle.

In one school, where the teachers are reluctantly in favour of the continuation of SPHE into the Senior Cycle, the Principal is ambivalent as to its value to the older age group, but is clear that, for any degree of success, direction from the Department of Education and Science as to how to incorporate it into the system is vital: *"...I think if the programme was well worked out and if at their [senior] level, I think it could be more than worthwhile"*. This is echoed by a Co-ordinator: *"...it would want to be much more co-ordinated and organised..."*. In another school, the staff members communicate their doubts on the issue and the Co-ordinator is particularly vocal on several counts: *"I'd imagine the parents won't be happy because they want points, teachers won't be happy because they want the students to get the points, management won't be happy because they won't be able to fit it in on the timetable, the RE teachers won't be happy because we're doing it already, and the SPHE team won't be happy because we've done it all before and now you want me to do more"*. Many interviewees consider that Religious Education is dealing sufficiently well with elements of SPHE for the older students and that there will be an unnecessary overlap unless, as one member

of staff points out, these two subjects are more defined, or that SPHE focuses on the RSE components of a senior cycle curriculum. One Principal feels it would be of value to the ëweaker' students and improve their self-esteem; it would also fill up their timetables but as for the other students: *"unfortunately you wouldn' t be able to offer it to the more able students"*. Another Principal believes that the value of SPHE among students will be enhanced if it were assessed as a subject in Senior Cycle: *"I think it should be an exam subject, I think if you want the students to take it seriously, especially at senior level..."*.

Students and parents
Almost half of parents (49%), who responded to the questionnaires, regard the introduction of SPHE to the Senior Cycle, including Transition Year, as beneficial and 40% of students agree with this point of view. The majority of parents who offer a written opinion are keen to see the subject taught to the older students: *"It seems that currently SPHE classes provide a variety of typical subjects relevant to teenagers. Therefore, continue on as it is"*. Lack of knowledge of the subject militates against some parents expressing any opinion: *"Parents need more information about the content of SPHE before they can really decide what needs to be included in the programme"*. Another parent adds to this: *"as I have no clear information on what is being taught to her now, how can I comment on the future"*. Others comment adversely on the time that would be taken from other subjects

coming up to Leaving Certificate examinations. Students were also asked if they considered SPHE to be relevant to their future and 62% did not agree. One female student comments: *"I don' t think it makes a difference in my life anyway"*. In some schools students express their enthusiasm for continuing the subject in all classes and one girl states that she would like to learn more: *"about different effects of drugs on the body and may be learn more about your self"*.

A large majority of staff believe that SPHE should be carried through to Transition Year and Senior Cycle. The challenges which staff members raise for implementation include finding the time in an already overloaded curriculum at Senior Cycle level, the training of teachers, and tackling the perceived lack of value of SPHE among teachers, parents and students alike. In the questionnaires, less than half of both students and parents consider that it will be helpful to continue SPHE to Senior Cycle. However, it is clear that students and parents in some schools have a more positive view of the possibilities than those in others.

5.6. Case Studies

Each of the twelve schools in the study reflected a unique ethos and structure that was not just related to their size, geographical location and gender type. In order to illustrate the prerequisites that support SPHE being a valued and a quality programme within schools two individual case studies are presented below; one of the schools exhibits many factors that support the implementation of SPHE while the other school reflects a range of factors that inhibit full implementation.

a) Case Study 1

Characteristics of the school
The first school is a large city-based boys' secondary school, without disadvantaged school status. SPHE has been on the curriculum for 5 years. The researchers were welcomed in the staff room, and the teachers expressed interest in the research being conducted.

On 18 of 25 questions about SPHE (72% of all questions on SPHE), students from this school were more likely to volunteer positive feedback on SPHE than the average from other schools. The parents are also extremely positive about SPHE; on 23 of 26 questions about SPHE (88% of all questions on SPHE) the parents were more than likely to volunteer positive feedback than the average from other schools. Thus, although the students in this school were not more likely than students in

other participating schools to perceive their school positively, they were substantially more likely to be positive about SPHE

The quality and value of SPHE
The perception of the quality of SPHE provision within the school is very high, indeed it was described, by a member of staff, as a potential 'model' for other schools. The value of SPHE provision is also very high amongst the staff and the Principal. SPHE is clearly perceived of as being equally important as other subjects and is taken very seriously within the school, both by school management, staff and students.

The contribution of SPHE
The positive contribution of SPHE to health attitudes among students is clearly described by the staff and the Principal and the Co-ordinator. The Co-ordinator reports a positive effect on the health behaviours of the students. Although the Principal and SPHE teachers are reluctant to quantify the impact of SPHE in relation to students' behaviour, and rather emphasise the importance of knowledge, self-esteem and decision making as outcomes from SPHE. The staff perceives SPHE as having a very positive contribution to the educational experiences of the Junior Cycle students. SPHE is described as offering space for the development of the self and learning to value one's own judgements.

Implementation of SPHE
Members of the SPHE team report that they

chose to teach SPHE; they are all trained and report that they are confident and enjoy teaching SPHE. The Principal follows a deliberate policy of widening the group of teachers in the school with SPHE training and teaching experience. The Principal believes that SPHE is extremely important in a boys' school, and is strongly committed to it within school planning. SPHE was included in the school planning process from the outset as a fundamental part of the school, rather than as an afterthought. There are many structures and policies within the school that actively support the integration and delivery of the SPHE programme. There are policies on RSE, SPHE, drugs and bullying in place. The SPHE policy was recently positively reviewed by the SPHE team.

The SPHE team meet at weekly timetabled meetings, in order to plan, share information on recent training days and as a support for each other; the Guidance Counsellor also attends these weekly meetings. Although the SPHE Coordinator role is not a position of responsibility, the Co-ordinator is allocated two class periods for co-ordinating along with a specific SPHE budget. The SPHE team requested a base room for SPHE and that was allocated. The room is used to deliver SPHE classes, store resources and display project work.

Stakeholder involvement
The perception of the extent to which SPHE complements the work of other school personnel is high. However, SPHE is not fully integrated in a cross-curricular fashion, although there is clearly a desire for it to be so. In relation to parents' knowledge of SPHE, it is on the report card and there is an SPHE table at Parent/Teacher meetings. There is a very active parents association, SPHE is discussed at the Parents Council, and parents feel welcome within the school. Parents have positive expectations of SPHE, they value the contribution of the school and the teachers, and report that SPHE is an important and valuable component of their children's' education. They expect their children to be safe in SPHE classes and for SPHE to help build knowledge about health, tolerance for others and a sense of responsibility to society. The Principal and the Co-ordinator emphasise the vital role of the SPHE Support Service and particularly their Regional Development Officer for SPHE. Although external agencies such as the Garda' have made a contribution to SPHE within the school, the Co-ordinator expresses a desire for more resources to facilitate a wider range of external contributors.

Continuing SPHE programme into Senior Cycle, including Transition Year
The Co-ordinator, Principal and all the teachers interviewed are in favour of the continuation of SPHE into the Senior Cycle. Parents also express their support for SPHE continuing.

However, both the Co-ordinator and the Principal report some concern in relation to time-tabling and potential overlap with other subject areas, particularly Religious Education. The Principal is concerned with the availability of appropriate training for teachers if SPHE was to be introduced into the Senior Cycle.

Student workshop

The use of participative techniques is a popular approach to facilitating young people to have voice about issues which concern them, and this was the goal with the students workshops conducted in all schools. The value of the schema lies in the illustration of students' ideas of the actions required for improving health within the school, and illustrate the degree of sophistication of students in matters which are of concern to them.

In this school, the schema was created by a group of third year boys in response to the question *"If it were your job to improve the health in the school, what would you do?"* The methods employed are summarized in appendix 3. They presented their response in the shape of a person; they used the colour of the cards to reflect that the person was wearing a top, trousers and shoes. The data reflects concerns about the physical environment of the school, i.e. cards about toilets, 'more facilities' and 'build pitches...' as well as the social environment; 'mixed school', having music of choice during breaks as well

as 'get rid of old teachers'. They included issues that they would like to know more about such as 'focus on drugs', 'let people know about diseases' and '...make a project on good health' as well as health behaviours; 'totally ban smoking...' 'I'd encourage students not to smoke'. Advice about drinking vodka was also included.

This schema reflects its creators being from a school where SPHE is highly valued. They remark less upon what they are being taught within SPHE than the need for more sports and other facilities as well as a ban on unhealthy behaviours by other members of the school. The schema also reflects a desire for more knowledge in relation to STIs and drugs, a common theme in the students' comments from all participating schools.

Add more facilities

I will make a project which deals with good health

Music of your choice during class intervals

There are not enough toilets, eg 3 urinals & 3 toilets for 150 students

A lot less homework

Get rid of the old teachers

Encourage internet use

I'll encourage students not to smoke

Let people know about diseases, etc

Mixed Schools

Build pitches where the school was

Focus on drugs

Totally ban smoking in schools - For good this time

Don't down a nagin in one go, you'll get sick

In response to the question 'If it were your job to improve the health of the school. what would you do?' Half of the 83 student participants worked to create this schema.

b) Case Study 2

Characteristics of the school
The second school is a medium sized co-educational community school based in a town and with disadvantaged school status. SPHE has been on the curriculum for 4 years, but is only taught to first and second year students. This was a quiet school, with apparently little informal interaction between students and teachers.

On 21 of 25 questions about SPHE (84% of all questions on SPHE), students from this school were more likely to volunteer negative feedback about SPHE than the average from other schools. On 14 of 26 questions (53%), parents were also less positive than the parents in other schools. Thus, although the parents and students in this school were not more likely than those in other participating schools to perceive their school positively, they were substantially less likely to be positive about SPHE.

The quality and value of SPHE
The perception of the quality of SPHE provision is generally low, but there is recognition of the need to include SPHE in the planning process, to build in evaluation and to facilitate those involved in delivery of SPHE to meet formally. Nevertheless, the perception of the potential value of SPHE provision is high amongst the staff. However, SPHE has yet to be introduced to third year groups, and thus is not yet fully implemented.

The contribution of SPHE
The potential contribution of SPHE to the health and future lives of students is recognised by school staff. SPHE is described as contributing positively to the self-esteem and assertiveness of students, and there is a belief expressed by school staff that the influence of SPHE would be seen in the future lives of students, specifically in relation to their enjoyment of life and adoption of a healthy lifestyle. All the staff interviewed perceive a positive contribution of SPHE to the educational experiences of the Junior Cycle students, particularly with regard to their relationships with peers and confidence to 'speak up' in class.

Implementation of SPHE
The SPHE team are timetabled to teach SPHE, and are subsequently offered training, where possible. Thus, not all of the teachers are trained and report that they do not feel confident in the teaching of the entire programme, nor do they enjoy teaching SPHE. Lack of continuity in teaching is also an issue, in that a teacher may be timetabled for SPHE in one year, but not the next and thus the motivation for training is lower and the build up of experience may be dissipated. Concern regarding a similar lack of continuity in training opportunities is also expressed. SPHE is not explicitly included in whole school planning, but has been considered as part of pastoral care. There are policies on healthy eating, drugs, bullying and behaviour in place that support SPHE. However, there is no SPHE Coordinator at present; when there is, it is a shared position of responsibility. The SPHE team meet informally to support each other,

and the former Co-ordinator worked with the team on their plan for the academic year. All interviewees are aware and concerned about, the lack of team support at the moment for SPHE. Although there is a supportive pastoral care team, there have been a number of staff changes that have influenced the effectiveness of that team.

Stakeholder involvement
The extent to which SPHE complements the work of other school personnel is generally perceived to be low, and those staff that do not teach SPHE expressed their lack of understanding of SPHE. Nevertheless, the Principal emphasises the potential for cross-curricular implementation of SPHE and one teacher explicitly notes how the methodologies employed in SPHE have been employed positively in teaching other subjects. SPHE is on the school report card, but both teachers and the Principal report little parent knowledge or interest in SPHE. Indeed the minimal level of parental involvement in the school is attributed to work commitments and the low priority that parents place on school life. Parents note that their expectations for SPHE included relationship building and maintenance, including peer relationships and sexual health. External agencies or individuals have not participated in the SPHE programme within the school.

Continuing SPHE programme into Senior Cycle, including Transition Year
The Principal and other staff are in favour of the continuation of SPHE into the Senior Cycle, and suggested that there would be opportunity to deal with specific issues in

more depth. This in turn may help the students cope with the range of pressures they experience. However, the SPHE teachers are less enthusiastic about continuation, particularly for mainstream Leaving Certificate students.

Student workshop
This schema below was created by one group in a class of mixed Transition Year students in response to the question 'If it were your job to improve the health in the school, what would you do?' The methods employed are summarized in appendix 3. The data reflect issues in relation to both the physical and social environments of the school. There is a strong emphasis on improving the social environment with such comments as 'stop bullying', '...better relationship between students and teachers', 'More celebrating for school achievements' and 'less rules'. Interesting ideas on how to improve the relationships within the school included involving students in role plays to bring history alive and having a sliding scale of punishments for students not attending in class. The improving of physical health was mentioned with more PE classes and making healthy food cheaper in the canteen.

This schema reflects that the students are not happy with the social relationships within their school. They appear not to feel valued for the achievements that are attained and under a lot of pressure to perform academically amidst a lack of facilities for other pursuits. They give examples of how to improve classes as well as the atmosphere within the school.

In response to the question 'If it were your job to improve the health of the school. what would you do?'

Half of the 66 student participants worked to create this schema.

Less competitive in school work and exams

I would have more things for students to do at school

I would have a better relationship between teacher and student

Shorter days

Stop having fundraiser

More PE class to get fit

More celebrating for school achievements

I would try to lighten the schoolbags

I would not punish students who were working in class like I would with disruptive people like in history

Improve seating and relaxing facilities

More toilets

Less rules

I would involve students in classes more by giving examples eg - role plays to help students understand

I would have more classes for games

Stop bullying

I would only give three tests a term

Wear no uniforms

Have one study class per day so we can catch up on our homework

Reduce the cost of the healthy food in the canteen so people would buy the healthy food

5.7. Limitations

School selection
The methodology employed in order to select the participating schools demonstrated good practice as it is unbiased and random. Although, the schools selected were not representative of the proportion of the different types of schools within the country, the sampling process ensured that all types of schools were included.

Parental data
There were two methods of data collection used with parents. Both questionnaires and focus groups were employed to try to ensure that the views of the parents were collected. In reality, the focus groups were not always a useful form of data collection as the level of knowledge among parents about SPHE was minimal and those parents who came to the focus group were primarily interested in the receipt of information and clarification of SPHE itself. They appreciated the fact that their perspectives and suggestions were valued, but what they wanted was to know more about the subject. For the most part the parents that attended the focus groups were identified by the staff as being those who regularly respond to letters from the school. At three of the focus groups, teachers, school secretaries, SPHE Coordinators, Home-School Liaison teachers or Principals were present in their capacity as parents, which meant that very little free discussion was possible.

There was substantial variation across schools in response rates to the questionnaire for parents (see appendix 1). The distribution of these parental questionnaires were organised within schools and thus were not standardised, which may have influenced the apparent response rate.

The variety of respondents in the study
Direct comparisons between the data from the various groups in this study are not appropriate in terms of reliability. Very different types and numbers of informants were involved. The schools yielded an enormous amount of rich data, which was reliable within the context of that school, but which are not necessarily suitable for between school comparisons.

6. CONCLUSIONS

The research findings indicate that the value of the SPHE programme is not in dispute. The widespread view among all the stakeholders is that the SPHE provides students with the opportunity to develop personal and social skills, promotes their self-esteem, self-confidence and wellbeing, contributes to their physical, mental and emotional health and fosters tolerance and respect for others.

6.1. Facilitators of the implementation of SPHE

In order that SPHE becomes a valued and effective part of the curriculum, structures need to be in place to ensure that its importance is visible to everyone within that school community. Once SPHE becomes part of the whole school approach its implementation process is more effective.

a. Leadership
Among the schools in the study it is clear that Principals play a pivotal role in facilitating or hindering the implementation of SPHE. It is crucial that a whole school approach that incorporates SPHE is led and supported by the Principal and the SPHE Coordinator. The School Leadership Support Service can support such leadership.

Policy development
It is part of the role of a Principal to initiate and oversee the creation of *"whole-school planning in order to create optimum learning environments and to develop and implement the most appropriate curricular provision for their students"* (Department of Education and Science Circular M20/99). Post-primary schools are expected to develop a range of whole school policies. In this study three schools had under-gone a process of developing a whole school plan. In so doing they stated that they had in place both RSE and SPHE policies. Under the Department of Education recommendations on the consultative process, all members of the school community are to be involved in the creation of policies. Such consultations it is hoped will highlight, inform and require agreement from all those involved in the development of the policy. So parents via the parents committee, students via their council, all the teachers and the boards of management will become aware and more knowledgeable about the SPHE programme. In one school however where all the policies are in place, except one for SPHE, the Principal stated that there was no parent council and policies were decided upon by the Principal and were then issued to the school. These policies were seen to be acceptable if there were no letters coming in from the parents. In this school the rest of the staff and parents had little knowledge about SPHE, and the

students generally disagreed that SPHE provision was of high quality.

The value of having school policies in place that support the teaching of SPHE was stressed by several Principals and Co-ordinators. Yet it is not the case that without policies the implementation of SPHE will be ineffective. In one particular school where no polices had yet been developed, the SPHE programme was in fact very well accepted within the school community; viewed positively by students, parents and staff. This was due to the leadership given and sustained by a very committed and enthusiastic SPHE Coordinator.

There is little doubt that policies do support and sustain the implementation of SPHE, especially if they are developed using a participative consultation process that involves all members of the school community. The inclusion of SPHE within the school plan reflects an acceptance of SPHE as an integral part of the curriculum and reflects the development of a whole school approach.

SPHE Coordinator

The appointment of a Co-ordinator is key to the successful implementation of SPHE within a school. If the post is one of responsibility it reflects the value placed upon the subject by the school. It also allows the Co-ordinator a certain number of hours per week in which to undertake co-ordination duties. In relation to the post being one of responsibility it is important that the right person be appointed; it was suggested that Co-ordinators appointments be based upon suitability rather than seniority. While this is not feasible within the terms and conditions of employment, it does highlight the importance of appropriate support and training for SPHE Coordinators. It was apparent in three of the schools in this study that the enthusiasm and leadership of a good Co-ordinator can help overcome lack of support from the Principal.

Teacher selection

The selection of teachers who are willing and able to teach SPHE is crucial to the quality of SPHE provision. Opting to select the youngest and newest teachers on the staff automatically reflects a lack of value for the subject. SPHE benefits from the knowledge and insights gained from life experiences, as well as from an ability to adopt different teaching methods that are more appropriate for the delivery of the SPHE programme. Where the more junior members of staff are allocated SPHE classes their lack of experience as teachers may hinder their ability to facilitate SPHE and it's more interactive, participative methodologies. This was noted in most of the schools, as the noise levels involved in SPHE are clearly higher than in other subjects. Many teachers are judged on their ability to control a class and in many cases noise denotes a lack of control. Hence young teachers may be reluctant to embrace the SPHE teaching methodologies for fear of being seen not be able to control students.

The high turnover of temporary non-permanent members of staff disrupts the continuity of SPHE delivery.

Continuity in relation to teacher allocation to class groups was also stressed as a facilitator of the SPHE programme. If teachers are allowed to stay with one class as they advance through the school, the quality and strength of the relationship built between the students and that teachers, enhances the delivery of the programme. This enhanced relationship is also facilitated if the teacher is teaching their SPHE class for another subject as well.

Teacher training

SPHE staff need to be allowed to participate in all the sessions of SPHE training to gain the support and resources necessary to deliver the programme effectively. Continuity will also affect the value of attending in-service training. Several of the SPHE teachers mentioned having been sent on training and not being able to apply that knowledge as they were not timetabled for SPHE the following year. For example, where a teacher is allocated an SPHE class for the following three years they will see the value of and benefit of attending in-service training as envisaged; starting with the two days introduction, then two days continuation and the modular units as they become scheduled.

SPHE Team meetings

Team meetings allow for the proper coordination of the programme, give support, advice as well as information and allow for the sharing of good practice amongst the members of the SPHE team. If these meetings are regular and timetabled, the importance of SPHE is more visible to the rest of the staff. In the school with the most effective implementation of SPHE team meetings were timetabled weekly and were open to all interested members of staff. A second school had incorporated SPHE into the school plan and the team meetings were timetabled like any other subject team meeting.

The Report Card

If SPHE is given a separate heading on the report card its importance is clear to the whole school community. Parents are thus reminded of its existence and importance in the educational experience of their children. SPHE is on the report card in eight of the schools in this study. In the one of the two schools where there is a specific SPHE table at the parent teacher meetings, the Co-ordinator reported that there was always a queue of parents waiting to discuss their child's progress in the subject.

Class size

In SPHE classes small numbers facilitate participative discussions and allow for less didactic teaching methodologies to flourish. Classes were halved in one of the schools in the study, where the Principal, who was fully behind the SPHE programme, believed that having smaller classes allowed for the delivery of the programme as it had been intended.

b. SPHE Teachers

The support and training of teachers is regarded as vital as the expertise of the teachers determines the effective delivery of the programme.

Ability and confidence to teach SPHE

If teachers volunteer to teach SPHE they tend to be confident and enthusiastic about the subject. It requires particular skills and resources to teach and enjoy some of the modules within the SPHE programme. The teachers expressed the view that the confidence necessary, for example, to teach a class the Relationships and Sexuality aspect of SPHE emanates from; having had adequate training, access to relevant and modern resources, life experience, being able to handle awkward questions and having built up a good working relationship with students.

Training is a crucial aspect in teachers' ability to deliver the SPHE programme. The full in-service training sequence needs to be completed by all the staff intending to teach SPHE. In addition, many of the teachers stress the need to teach their SPHE class groups for more than just a single SPHE class per week.

Resources

The dearth of up to date Irish resource material was evident. The SPHE teachers and Co-ordinators stressed the need for the Department of Education and Science and the SPHE Support Service to keep all resources up to date and relevant to the Irish situation. The most enthusiastic Co-ordinators spend considerable time and effort in sourcing materials from where ever they could. The view was expressed that much of the material within the SPHE workbooks is out of date and irrelevant. Having sufficient funds to purchase the best of the available resources was an issue for some schools. The use of different innovative teaching methodologies utilising videos, DVDs and IT were seen as being advantageous in terms of programme delivery.

Support

The necessary supports mentioned by staff in the schools include:

• Having timetabled meetings

• Being able to attend in-service training

• Having school policies in place that support the learning of the students within SPHE classes, for example on healthy eating and bullying.

With such structures in place the teachers feel supported and valued in their role of SPHE delivery.

c. SPHE Support Service

All of the staff in schools mentioned the valuable support role offered by the SPHE Support Service and the RDOs.

In-service training

In most cases the in-service training was seen as being enjoyable, useful and a source of great support to the participants, in that they had the space to share their experiences and examples of best practice with others. Many did express a desire for more mutual support but without the necessity of taking time out of their respective schools. The negative perceptions in relation to in-service concerned the teachers not feeling confident about the practical transfer of their training outcomes to the realities of their schools, for example when they have to deal with large class groups, for only one class period a week. Nevertheless, it is important that the training provided is carefully structured to meet the needs of teachers, recognises their readiness to change and learn, embodies the principles and methodologies being promoted and is cognisant of the practical realities of school life.

Working with the whole school

A whole school approach that embraces SPHE is vital to its successful implementation. The value of the RDOs visiting the schools to work with the whole staff was mentioned by the two schools that had been fortunate enough to have that experience. One school had invited the RDO to work with the whole staff for a full day. In this school the level of understanding and support for the SPHE programme was clear from the interviews with other staff members. The Co-ordinator felt that that input had been responsible for SPHE being embraced within the whole school ethos. Pastoral care teams are seen as having a particularly important supportive role.

Support for Principals

The need for training of Principals in relation to the value of SPHE was discussed by both RDOs and Co-ordinators. As noted previously, if the leadership within a school supports the SPHE programme, its implementation will be greatly facilitated. Support from the RDO in terms of assisting with timetabling issues was specifically raised by Principals, and support for the inclusion of SPHE within school plans should be provided in liaison with the School Development Plan Initiative.

d. Students

Consultation

In the two schools where the SPHE teachers discussed the content of the classes with their students and asked for them to list the issues they wanted to discuss, the students reported a greater value, commitment to and interest in the subject. Where related policies have been developed using a consultative process, the involvement of the students' council is seen as important.

Valuing the subject

In many of the schools SPHE was valued less highly than other more academic examination subjects. Yet it was found that even in schools with a strong attachment to examination performance, where SPHE had the support of the staff and so formed part of a whole school

approach, the students also took it seriously. If the students supported SPHE so then did their parents, who witnessed the practical value of the programme in the attitudes and behaviours of their children. If students are given a course notebook and/or folder in order to keep their notes in for future reference, the value they place on their SPHE classes can be enhanced.

6.2. Barriers to the implementation of SPHE

There appears to be little understanding of how the SPHE programme can, through its whole school implementation, create a healthier learning and working environment within the school. Lack of information may lead to ignorance of the intrinsic value of SPHE to the whole school as well as the students' educational experience. This in turn leads to the lack of status of SPHE within the school.

Principals
If Principals do not value SPHE they may not be willing to timetable SPHE to the most appropriate teachers and at appropriate time slots. For example, one school was planning to put SPHE in a lunch time period for the third years. Principals' unwillingness to release staff for in-service is another barrier. If Principals see the SPHE class time as one in which other things could be slotted, reflecting a lack of value in the subject, this attitude permeates to other members of the school community.

SPHE teachers
Without full in-service training the teachers may lack an overview of SPHE and so not fully value the programme. This may mean that SPHE teachers will more readily allow their classes to be used for other business. Teachers may not utilise the specific teaching methodologies advocated for SPHE delivery for fear of disrupting other classes, and perhaps incurring the wrath of other staff. The fact that the majority of SPHE teachers are female was noted as being an issue that could be detrimental in the long-term delivery of SPHE especially within all boys' schools.

Other staff
Teachers not involved in delivering SPHE often resent losing their classes to facilitate the inclusion of SPHE on the timetable. This antagonism towards the timetabling of SPHE was raised in all schools. The curriculum is over-burdened and teachers are trying to deliver as many examination class periods as possible in order to cover their courses, the 'imposition of yet another subject' adds to their frustration. Again this reflects a lack of knowledge as to the overriding value of SPHE implementation for all stakeholders in the school. The lack of shared information within the staff group in schools was mentioned by several teachers as an opportunity missed to enhance the learning in one class via reinforcement in other related classes.

Students

If not informed as to the aims nor consulted on the issues to be covered students may not value the SPHE programme and see SPHE classes rather, as an opportunity to relax or to be used to do other work. If their teachers are not confident or competent to teach SPHE the students may well not enjoy it. In all but one of the schools over 50% of the students stated that they found SPHE interesting, this percentage was as high as 90% in one school. The teachers in schools where SPHE was not valued were more likely to report that students did not like the subject, whereas the reverse was true in schools where SPHE had been embraced within a whole school approach.

Parents

The comments from the parents reflect their frustrations at the lack of information and consultation in regard to the SPHE programme. In all the schools the desire from parents to be kept informed about SPHE was evident. Many parents commented that if they knew which issues were being discussed in any week that they would endeavour to support that learning at home. Although it is not common practice that parents would be informed of other curriculum activities, this is one area where SPHE differs from more traditional school subjects; it must be recognised that parents have an important supportive role to play in the successful implementation of SPHE.

7. RECOMMENDATIONS

The following recommendations for the improvement of SPHE implementation in post-primary schools have been identified following consideration of the research findings. They are presented below in relation to the stakeholder groups to which they apply, though in many cases implementation will require cross-sectoral action.

7.1. Department of Education and Science Leadership

- The requirement for all schools to implement SPHE in the Junior Cycle needs to be reiterated. The Department of Education and Science Inspectorate in partnership with the SPHE Support Service must continue to ensure that schools are adopting SPHE for all three years of the Junior Cycle including through the implementation of whole-school evaluation and subject inspection.

- The SPHE Support Service works to help identify and offer support to schools that are having difficulties with either timetabling and/or inclusion of SPHE in planning processes. Having identified the schools in need of help in the implementation of the SPHE programme, supports such as that from the School Leadership Development Support Service and those identified below may be of extra benefit.

SPHE Policy development

- Through whole-school evaluation and subject inspection, the Department of Education and Science needs to continue to ensure that whole school plans are being developed in post-primary schools that incorporate SPHE policies and subject plans.

- The SPHE Policy development process being followed should adhere to the recommendations set out by the Department of Education and Science in relation to consultation with all stakeholders within a given school. Following such a consultative process the understanding, commitment and ownership by all stakeholders of the implementation and delivery of SPHE will be enhanced.

7.2. Department of Health and Children and the Health Services Executive

Leadership

- Both the Department of Education and Science and the Department of Health and Children provide support for SPHE, and such collaboration is important for the future of the initiative. The Department of Health and Children and the HSE have a responsibility to ensure that the policy and resource supports for SPHE are in place within the health sector and that the elements of health and social policy that refer to and rely on the full implementation of SPHE at school level are enacted.

- Both the Department of Health and Children and the HSE must work with the Department of Education and Science to ensure that the voice of the health sector continues to influence SPHE as it develops.

Communication

- The Health Service Executive in partnership with the Department of Education and Science is uniquely placed to communicate about and advocate for SPHE in schools at local and regional levels. This is particularly in relation to setting the community context for SPHE and assisting schools to link with their local communities.

- Both the Department of Health and Children and the HSE should engage with communities and in particular parents as to the role of SPHE in the education and health maximisation of young people.

Training and Resources

- The contribution of Health Promotion Officers for Schools, as members of the SPHE Support Service to the introduction, maintenance and improvement of SPHE implementation is substantial, and crucial to the continuance of the SPHE Support Service. In particular, the training provided in conjunction with the Regional Development Officers for SPHE, the development of resources for classroom teachers and their advocacy role for SPHE within the Health Service needs to be recognised and supported at both national and regional level by all those involved in the implementation of SPHE.

7.3. SPHE Support Service

Training

- More emphasis needs to be given to the value of whole school in-service training in order to create a whole school approach that will support the SPHE programme.

- The in-service training for teachers needs to deliver ideas and methodologies that can be transferred to the real life situations of most schools, where there can be large class groups, inappropriate rooms and problems with noise levels.

- The development and inclusion of a timetabled session dedicated to the discussion of best practice and teachers' experience in all training programmes is recommended.

- The specific training for both Principals and Co-ordinators which includes evidence-based examples of good practice and team-building, should continue to emphasise the benefits of such learning for the development of effective implementation.

- The possibility of accreditation for participants in the SPHE training programme could be explored with the Department of Education and Science and the Teaching Council as a means of validation of and support for SPHE teachers.

Resources

- SPHE teams within schools require the development of appropriate and relevant classroom resources that can be tailored to the specific needs of individual schools.

- Regional and local directories of potential outside experts/speakers who understand the SPHE programme and are willing to work within its policy framework, complementing, not replacing classroom teachers, would be helpful to schools.

Support

- Further supports for both planning and management of SPHE within schools is required and should be developed in conjunction with the School Development Planning Initiative and the School Leadership Development Support Service. Thus a co-ordinated approach involving all three initiatives is recommended.

- The development of an on-line forum where best practice can be shared and discussed by SPHE Coordinators and teachers is suggested.

- In line with the current activities of the SPHE Support Service, the continuation of on-going support for the whole school related to their perceived specific needs is advised.

- The vision of SPHE needs to be iterated alongside its value in relation to enhancing the learning experience of students as well as the working experience of staff. The Support service should review promotional aids to assist schools to clarify this for parents and communities.

Quality

- It is clear that the quality of SPHE implementation varies substantially across schools. The SPHE Support Service must consider the quality

assurance issues that arise from this and could investigate appropriate responses in conjunction with the Department of Education and Science Inspectorate.

7.4. Principals

Policy development

- The development of whole school planning is fundamental to the creation of a supportive whole school approach, and this process should include SPHE from the outset, assigning SPHE the same level of importance and attention as any other subject area.

- As laid down by the school planning process, such policy development should be as inclusive and consultative as possible. The school planning process should also ensure that once an SPHE policy or subject plan has been developed it needs to be implemented and reviewed regularly by all stakeholders in order to make it effective for the planning and delivery of SPHE. Such a policy should include issues of teacher training, support for the SPHE team within the school, communication with parents and the role of students in the development of SPHE at school level. It should also link closely with the school's RSE and substance use policies.

Staff recruitment

- The assignment of staff to SPHE needs to be conducted in consultation with the individual teachers and the SPHE Coordinator

- Ensuring continuity of SPHE teachers throughout the Junior and Senior Cycles, as far as is possible, will allow for the building of relationships based on trust and stability between staff and students.

- The provision of appropriate support and training for those appointed as SPHE Co-ordinators is crucial.

- There is a need to ensure a more even gender balance in relation to SPHE delivery.

Timetabling

- The development of an SPHE team is important and needs to be supported by the timetabling of team meetings.

- The release of staff for all of the SPHE in-service training will ensure a confident and effective teaching group. This will also create a pool of trained teachers within the school.

- Timetabling SPHE teachers to teach more than just SPHE to individual class groups will assist the full potential of the SPHE programme to contribute positively to more traditional educational outcomes.

- The timetabling of periods in which Coordinators can develop resources, attend training meetings with their team and plan for each term is also desirable.

- Principals should also work with the school community to develop smaller class sizes for SPHE wherever possible.

7.5. SPHE Coordinators

Effective team building

- The creation of a team of trained SPHE teachers who meet regularly for mutual support in terms of resources and discussion time as well as training information should be encouraged.

Continuation of SPHE into the Senior Cycle, including Transition Year

- The curriculum framework for SPHE at Senior Cycle makes provision for student consultation at individual school level, and this should be facilitated by SPHE Coordinators or teachers when the process of Senior Cycle implementation is being planned at school level.

Communication

- The development of a means of informing parents about the content of the SPHE programme on a termly basis is likely to engender more parental interest and support. Having SPHE on the report card would be part of on-going communication process with

parents, so too would be the inclusion, where applicable, of a specific SPHE table at parent teacher meetings.

- In many schools SPHE teachers also teach other subjects and talk to parents in relation to the latter. Their role as SPHE teachers needs to be flagged so that parents are encouraged to discuss SPHE as a subject as well.

- Ensuring that school staff are kept up to date in relation to the content of the SPHE programme being delivered is important. This could coincide with the creation of a forum where, as part of the whole school plan, a coherent and integrated teaching plan is developed.

7.6. SPHE Teachers

- The teachers need to ensure they attend all SPHE in-service training in sequence, as far as is practical.

- Teachers should also identify their specific training needs and seek support in order to meet them.

7.7. Students and Parents

- Within the context of the approved SPHE curriculum, students need to be actively consulted and heard in relation to the content of their SPHE classes; such processes could include

discussions on SPHE during school council meetings.

- Parents need to be kept informed on the SPHE policy and content of the programme. Such communications should be directly to the parents in clear and understandable formats for example via a school website and parent/teacher meetings.

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APPENDICES

Appendix 1: Summary of Procedures

The table below summarises the responses received by school. This includes whether either a parent or student refused consent to participate, the members of school staff interviewed during the school visit, the number of students involved and what class groups they were in, the number of parents' questionnaires distributed and returned, the numbers participating in the parental focus groups and whether the school had an SPHE Coordinator.

Table 1: Summary of response rates, by school and stakeholder group

School	A	B	C	D	E	F	G	H	I	J	K	L
Consent from Parents	✔	✔	16 returned for 2nd & 3rd years	✔	One parent refused	✔	✔	✔	✔	One Parent refused	✔	One parent refused
Consent from Students	One withdrew self	✔	✔	✔	✔	One withdrew self	✔	✔	✔	✔	✔	✔
Interviews	Principal 2 SPHE T RE T	Principal Co-ord 2 SPHE T	Principal Co-ord Guidance	Principal Co-ord SPHE T Home School	Principal Co-ord SPHE T Guidance	Principal Co-ord SPHE T Home School	Principal 2 SPHE T Chaplain	Principal Co-ord 2 SPHE T Guidance	Principal Co-ord 2 SPHE T Home School	Principal Co-ord 2 SPHE T	Principal Co-ord 2 SPHE T Chaplain	Principal Co-ord 2 SPHE T
No. of students	75	59	53	29	83	74	66	45	59	65	57	48
Year	2nd 3rd TY	1st 1st 2nd	1st 3rd 2nd 3rd	2nd 2nd 3rd	2nd 2nd 3rd	3rd TY TY	2nd 2nd TY	3rd 3rd 3rd	2nd 3rd 3rd	3rd 3rd 2nd	3rd 3rd 3rd 3rd 2nd	3rd 3rd 2nd
Parents (response %)	101/342 - 29.5%	69/352 - 19.6%	33/175 - 18.9%	12/49 - 24.5%	77/395 - 19.4%	198/360 - 55%	27/282 - 9.6%	89/215 - 41.4%	120/400 - 30%	40/260 - 15.4%	120/189 - 63.5%	25/370 - 6.8%
Parents focus group	No group 6	6	No group	3	12	7 - 4 worked in the school	No group	7	7	2 both worked in school	6 - 4 worked in school	7 - 3 worked in School
SPHE Coordinator	None	✔	✔	✔	✔	✔	None	✔	✔	✔	✔	✔

Total number of students = 713; Total number of parents = 911.

Appendix 2: Summary of Quantitative Findings

These tables are presented to aid an overall perspective on the schools included. There are important differences between the schools, in relation to size, gender, location and in terms of the characteristics of the students who responded within schools which are associated with the patterns of responding. Thus, it is not appropriate to directly compare rates of agreement across schools. Instead, these tables present the median school response alongside the minimum and maximum levels of agreement within schools and stakeholder groups.

Table 2.1: Views on the school in general: Percentages of students agreeing (strongly agree or agree) with these statements about their school

Perceptions of School	Median % (range of %s)
I like school (a bit or a lot)	79.5 (61-92)
There is an active student council	79.5 (0-99)
Our school is a nice place to be	54 (25-76)
Students can get extra help when they need it	46.5 (19-72)
Relationships between students are friendly and supportive	68 (51-89)
Teachers are friendly and supportive to students	58 (26-74)
There are lots of chances to talk to teachers one to one	39 (26-74)
My parents like coming to school to talk to teachers	55.5 (25-79)
In our school, students take part in making the rules	11 (4-31)
Our school makes it easy for first years to fit in	61 (29-78)
Our school celebrates our achievements	80.5 (71-96)
People come in to talk to us about different things	44.5 (15-64)
I find the physical environment welcoming	47.5 (23-72)
Our school is clean and tidy	50 (14-82)
I am told how to get help from people outside school if I need it	30 (11-53)
There are plenty of activities going on outside class time	56 (38-79)
n	*713*

Table 2.2: Percentages of students agreeing that they have personally experienced the following SPHE Modules

SPHE Modules experienced by students	Median % (range of %s)
Physical Health	84.5 (38-100)
Friendships	76.5 (51-93)
Substance Use	60.5 (30-92)
Communication Skills	60.5 (48-87)
Influences and Decisions	55.5 (35-92)
Relationships and Sexuality	54 (10-74)
Personal Safety	52 (22-78)
Emotional Health	40 (17-75)
Self-management	30 (18-45)
Belonging and Integrating	30 (14-52)
n	713

The percentages reported here are not necessarily good reflections of the extent of SPHE implementation in schools, given that the modules names as listed above may not be used with students in schools.

Table 2.3: Views on SPHE: Percentages of students agreeing (strongly agree or agree) with these statements about their school

Views on SPHE	Median % (range of %s)
I find SPHE interesting	61 (49-90)
The school has talked to my parents about SPHE	11 (0-40)
Students get to make suggestions about how SPHE is taught	31 (12-47)
Having SPHE makes my school a better place to learn	42 (27-61)
SPHE is an important part of what I learn in school	47 (31-83)
SPHE is just as important as any other subject	42 (20-66)
My teachers enjoy teaching SPHE	46 (28-86)
My parents know how I'm doing in SPHE	47.5 (29-62)
SPHE classes are not too long	72.5 (40-89)
SPHE helps me to get on with other students	50 (40-82)
SPHE teaches me that it is important to be healthy	80 (46-94)
SPHE teaches me how to stay healthy	75 (42-86)
SPHE teaches me skills to handle difficult situations	61 (44-75)
SPHE gives me the chance to think about things	68 (52-89)
SPHE gives me the chance to discuss things	73 (40-84)
Not only a few students really take part in SPHE	45.5 (35-63)
SPHE gives me ideas that help in other subjects	34.5 (14-48)
SPHE encourages me to exercise	45.5 (21-70)
SPHE will help me when I move up to TY or Senior Cycle	39.5 (21-58)
SPHE encourages me to eat healthy food	59 (21-81)
SPHE has influenced my decision on whether or not to smoke cigarettes	55 (22-74)
SPHE has influenced my decision on whether or not to drink alcohol	43.5 (27-69)
SPHE is not irrelevant to my future	35.5 (22-58)
SPHE makes my school a happier place to be	31.5 (19-62)
SPHE makes me feel more confident	39 (26-73)
n	*713*

Table 2.4: Percentages of students agreeing that their school has a clear policy on the following health related topics

Policy	Median % (range of %s)
Bullying	81 (51-100)
Healthy Eating	32 (19-80)
Drugs	61 (44-97)
n	*713*

Table 2.5: Views on the school in general: Percentages of parents agreeing (strongly agree or agree) with these statements about the school

Perceptions of school	Median % (range of %s)
My child likes school (a lot or a bit)	89.5 (50-97)
Teachers are friendly and supportive to students	79 (58-91)
School (does not) rarely sends me letters or newsletters	57 (25-82)
Relationships between students are friendly and supportive	77 (59-88)
The school is a nice place for my child to be	85.5 (60-96)
I find the school approachable when I make contact	84 (70-92)
I (don't) find it difficult to talk to the teachers in the school	77.5 (50-87)
I find the physical environment pleasant	79 (52-86)
I find the school is clean and tidy	88.5 (50-96)
Parents are involved in discussion regarding policy	56.5 (28-70)
The school meets the educational needs of my child	84 (65-91)
The school meets the social needs of my child	72 (58-78)
My child is learning skills to make responsible decisions	82 (52-87)
My child is learning skills to make informed decisions	78 (52-92)
The Parent's Association in the school is active	54 (10-82)
My child is told about local services and how to get help	42 (24-45)
The school really helped my child move from primary to post-primary school	75 (52-84)
n	*911*

Table 2.6: Views on SPHE: Percentages of parents agreeing (strongly agree or agree) with these statements about the school

Views on SPHE	Median % (range of %s)
I know that my child attends SPHE class	94 (80-100)
How much do you know about the content of SPHE (a little)	65.5 (46-85)
How much do you know about the content of SPHE (a lot)	11 (6-27)
Do you feel you know enough about SPHE	24.5 (10-60)
Did you receive an information leaflet or letter about SPHE	37.5 (12-61)
Do you and your child ever discuss SPHE	43 (34-83)
SPHE is an important part of the school	72.5 (59-83)
SPHE is just as important as other subjects	72.5 (67-92)
SPHE classes help my child in other subjects	52.5 (42-83)
SPHE complements the other classes my child is taking	52.5 (42-83)
My child finds SPHE classes interesting	59.5 (21-79)
The SPHE teachers in the school need more training (disagree)	29 (23-38)
SPHE helps my child to be more confident	62.5 (48-75)
SPHE helps my child to handle difficult situations	51 (42-61)
SPHE helps my child to get on with other students	62.5 (54-92)
SPHE teaches my child the importance of being healthy	84 (62-92)
SPHE will help my child in TY or Senior Cycle	47.5 (38-73)
SPHE teaches my child how to stay healthy	78 (61-87)
SPHE teaches my child to eat healthy food	70.5 (50-90)
SPHE teaches my child to be physically active	72.5 (47-87)
SPHE discourages my child from smoking cigarettes	76.5 (69-92)
SPHE discourages my child from drinking alcohol	72 (59-88)
There is enough consultation with parents	21 (10-40)
The school needs more support to deliver SPHE (disagree)	54.5 (31-67)

Table 2.7: Percentages of parents agreeing that the school has a clear policy on the following health related topics

Policy	Median % (range of %s)
The school has a clear policy on bullying	80.5 (64-100)
The school has a clear policy on drugs	83.5 (66-95)
The school has a clear policy on RSE	69 (50-94)
The school has a clear policy on healthy eating	59.5 (34-85)

Appendix 3:
Summary of Participatory Workshops with the Students

There were three distinct workshops within each school:

1. Data collection
The students were given coloured pieces of paper and asked to respond to two questions:

A.   *What is it about school that affects your health?*

B.   *If it were your job to improve health in the school what would you do?*

2. Data categorisation
The students were divided into four groups with two groups working on the data from question 1 and the other two groups on question 2. They played a type of snap game in order to gather all the similar answers together into piles and then decide upon the best example to represent that pile. They were asked to add any suggestions they had themselves in responses to the questions.

3. Data analysis
The students were again divided into four groups, with two groups working on each of the questions. Each group was given a large piece of coloured card and asked to create a pattern to represent how their school felt in response to the questions. Again they were asked to add to the responses already categorised to ensure that all of their views were represented.

The students were willing to give their time and energies to the process of data collection, collation and analysis but in so doing an expectation was apparent that their views would be heard and there would be a change in the way SPHE and its content was being delivered: *"otherwise what is the point of us doing all this with you"*.