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Testing, training and tensions: The expression of health within physical education curricula in secondary schools in England and Wales

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Abstract

This paper utilises critical discourse analysis to explore and discuss the expression of health within physical education (PE) curricula in secondary schools in England and Wales. The study adopted a case study approach, involving three state secondary schools in England and two in Wales. Data were drawn from interviews with PE teachers and health-related school documentation in the five schools, plus observation of a health-related unit of work in one of the schools. The expression of health in PE broadly reflected ideologies associated with promoting 'fitness for life' and 'fitness for performance'. The extent to which teachers could express their favoured discourses in policy and practice was partly determined by their position of power, relative to others within the department, although they could find ways of privileging their favoured discourse in their own lessons. Curiously, rhetorical 'fitness for life' discourses were commonly expressed through 'fitness for performance' practices in the form of testing and training activities. These were found to be the most common contexts for the delivery of health-related learning. In terms of Bernstein's location of discourses within contexts of educational systems, the findings suggest that recontextualisation of statutory PE curricula occurred at the site of the relocation of discourse (in this case, within physical education departments in secondary state schools), resulting in the privileging of discourses heavily influenced by sport and fitness-related ideologies. Improved awareness of the expression of health in secondary school PE curricula should help to better understand and address the complex tensions between health-related policies and practices in schools.

Keywords

Health; Physical Education; Discourse; Secondary; Schools

Introduction

The link between physical education (PE) and health has existed for well over a century, resurging in the 1980s with an interest in health-related fitness, fuelled by increases in hypokinetic conditions (in particular heart disease) amongst adults (Kirk, 1992). As a consequence of a growing evidence base for the health benefits of physical activity (Department of Health, 1992; World Health Organisation, 2002, 2007), the relationship between PE and health has attracted government attention in many countries, with key documents identifying PE and school sport as important in helping young people to become independently active for life (e.g. Department for Children, Schools and Families, 2008; Ministerial Council on Education, Employment, Training and Youth Affairs, 2008; U.S. Department of Health and Human Services, 1996, 2000). However, PE has not maximized its potential in terms of promoting active lifestyles (Cale & Harris, 2005; Trost, 2006), making this an important topic of study to better understand why this is. This paper represents a contribution to this understanding by reporting on a study focusing on the expression of health in secondary school PE curricula in England and Wales.

At the time of the study, a 'new' version of the National Curriculum for Physical Education (NCPE) had recently been introduced and, for the first time, this differed for state schools in England (Department for Education and Employment (DfEE)/Qualifications and Curriculum Authority (QCA), 1999) and Wales (Awdurdod Cwricwlwm Ac Asesu Cymry (ACAAC), 1999). The 1999 version of the NCPE in England required schools to develop pupils' 'knowledge and understanding of fitness and health' (DfEE/QCA, 1999). This involved teaching 11-14 year olds: how to prepare for and recover from activity; the effects of activities on specific aspects of fitness; the benefits of regular exercise and good hygiene; and how to go about

getting involved in activities that are good for their personal and social health and well being. Older pupils (14-16 year olds) were required to be taught: how preparation, training and fitness relate to and affect performance; how to design and carry out activity and training programmes that have specific purposes; the importance of exercise and activity to personal, social and mental health and well being; and how to monitor and develop their own training, exercise and activity programmes in and out of school (DfEE/QCA, 1999, p.23). This suggests a dual emphasis within the NCPE in England on the promotion of healthy, active lifestyles (signified by concepts associated with participation, independence, preferences and everyday life activities) and the development of performance-related fitness (evident through references to fitness, training and effects on performance). In addition, and for the first time, the NCPE in England (DfEE & QCA, 1999) permitted competitive games to be optional for older pupils, stating that they should be 'compulsory' for 5 to 14 year olds and 'provided' for 14-16 year olds. This clearly opened the doors to the possibility of a different and more varied PE provision for older pupils.

The 1999 version of the NCPE in Wales similarly demonstrated this dual approach but arguably placed greater emphasis on 'active lifestyles' and 'health and well-being' than on 'fitness' (ACAAC, 1999). This was demonstrated by the inclusion of 'health-related exercise' (HRE) as a distinct and compulsory area of activity (as opposed to a permeating 'strand' as in the English NCPE). Schools were required to teach HRE and four areas of activity to 11-14 year old pupils and to teach HRE and two practical activities (one of which was 'exercise activities') to 14-16 year old pupils (ACCAC, 1999). The HRE programme of study involved teaching 11-14 year olds about: the short and long-term effects of exercise on physical, social and psychological health; good posture; taking responsibility for planning and executing

warm-up and cool-down routines; training to improve fitness and performance; activity's role in healthy weight management; activity opportunities; and ways of incorporating exercise into lifestyles. Older pupils (14-16 year olds) were required to: plan, perform and evaluate their own HRE programme meeting personal needs and preferences over an extended period of time; apply the key principles of exercise programming and training; know how to overcome constraints to being active; and appreciate the risks involved with a sedentary lifestyle and with excessive forms and amounts of exercise.

Discourses of health within PE can be expressed at a number of levels; at national level in terms of standardised curricula (e.g. the NCPE in England and in Wales), at regional level in the form of guidance documentation from Local Authority (LA) personnel, and at local level in relation to schemes and units of work in school PE departments and individual PE teachers' practices. Research by Penney and Evans (1999) on the NCPE in England revealed that the privileging of certain discourses reflected the interests of those playing a part in its conception and revision, and demonstrated the relative degrees of power of different parties in influencing decisions about the NCPE. For example, in England, the Conservative government which produced the first versions of the NCPE had an interest in promoting traditional 'English' sports in schools, referred to as 'cultural restorationism' by Penney and Evans (1999) and, thus, a team games dominated PE curriculum was designed, as opposed to other possibilities such as a health-promoting PE curriculum.

Whilst it is recognised that recontextualisation of national curricula can occur at regional level when national policy undergoes a process of interpretation by, for example, local authority advisers and professional development providers, this

particular study focused on the process of recontextualisation which occurs in schools. Previous research in this area in the UK had focused mainly on the policy making process at macro and meso levels (Penney and Evans, 1999) or on teachers' accounts of how they approached the teaching of health within physical education (Harris, 1994, 1995, 1997). This study extended the UK-based research by further exploring the micro-level of individual PE teachers' health-related philosophies, policies and practices, incorporating data from a range of sources, including written documentation, interviews and lesson observations. Since the time of this study, further research in the UK has investigated English secondary PE teachers' experiences, views and understandings of health-related exercise and related CPD (Alfrey, Cale & Webb, 2012) and the monitoring of health, activity and fitness in PE curricula (Cale, Harris & Chen, 2012). In addition, there have been studies about health in PE conducted at a similar micro-level in other countries (Burrows & Wright, 2004; Burrows & McCormack, 2012; Cliff, 2012; McDermott, 2012; Wright & Burrows, 2004), all of which will be drawn upon when discussing the findings of the current study.

Research Method

The study was located within an interpretive paradigm and adopted a constructivist approach (Charmaz, 2000), viewing knowledge as a social product and assuming the existence of 'multiple constructed realities' (Denzin & Lincoln, 2003, p. 33). It drew upon the post-structuralist concept of discourse which has been used by other researchers in PE (see Rail, 2002; Wright, 1995, 2001; Webb, 2003; Rich, 2002) and views discourse as comprising of 'groups of related statements which cohere in some way to produce both meanings and effects in the real world' (Carabine, 2001,

p. 280). Carabine (2001) describes how discourses are regularly contested and interact with other dominant discourses to produce new conceptualisations of a topic which, over time, come to dictate what is acceptable (socially, morally and legally) in a given culture at a certain time. People 'position' themselves in relation to discursive practices which both constrain and enable possibilities for action (Wright, 2001). Discourses form the basis of the historical and cultural production of systems of knowledge and beliefs that regulate the behaviour of individuals in a culture, and discourse, knowledge and power are inextricably linked (Foucault, 1972). As summarised by Flintoff and Scraton (2001), meanings are made through discourse and power relations are maintained and changed through discourse. Bernstein (1990) located discourse within three fundamental contexts of educational systems: the site of the production of discourse (the primary context); the site of selective reproduction of discourse (the secondary context); and the site of the relocation of discourse (the recontextualising context) which regulates the circulation of texts between the primary and secondary contexts. In the interaction between these contexts, there is potential for 'slippage' (Ball, 1990), resulting in recontextualisation and reproduction which may lead to the privileging or silencing of competing discourses.

A case study approach allowed an in-depth focus on localised settings (in this case, state secondary schools) and provided data which were 'situated, contingent and partial' (Taylor, 2001, p. 205). Within each case study, multiple methods and techniques were employed (documentation analysis, interviews and lesson observations) to gain insight into the complexity of teaching and learning. The interview schedules were influenced by the conceptual framework of the study which focused on schools as a site of recontextualisation in terms of the expression of

health within PE curricula. A combination of reputational and convenience sampling was employed in the study. Two LAs were selected, one in Wales and one in England. The involvement of schools from both countries permitted examination of possible differences in policy and practice as a result of England and Wales having separate national curricula since 1999. Five case study schools were selected, three from the Local Authority (LA) in England (E1, E2, E3) and two from the LA in Wales (W1, W2). Two state secondary schools were selected from each LA, one with a PE department that was considered by the PE adviser in the LA to be 'forward thinking' in terms of health-related physical education (E2, W2), and the other with a department viewed as 'somewhat behind' in this area (E1, W1). PE advisers were asked to make these judgements, based on their familiarity with the policies and practices of the individual schools within their authorities. A Specialist Sports College from the LA in England was also included because of the government's commitment at the time to the concept of specialist schools. The purpose of the specialist schools programme was for schools to establish a distinctive identity, working to their strengths, delivering effective teaching and learning particularly in their area of expertise, and driving innovation (Department for Education and Skills, 2003). The three schools in the LA in England were mixed sex whilst the schools in the LA in Wales included one mixed school, one all girls' school and one all boys' school. Data on the socio-economic status of the school populations available at the time suggested that there were no notable social class differences between the schools. Two separate visits were made to each school, each lasting two to three days, the first during the spring term and the second during the autumn term of 2001.

Documentation analysis was undertaken of formal health-related policies, schemes and units of work, and associated pupil resources provided by the PE

department in each school. In addition, all the available PE staff at each school were interviewed, as well as, where possible, the individual responsible for co-ordinating the health curriculum area. The interviews were one-to-one, used a semi-structured schedule, lasted between forty and sixty minutes and were recorded, with the permission of the teachers.

Observations of a complete 'Fitness' unit of work (comprising five lessons, one per week over five weeks) taught to a mixed sex class of 12-13 year olds were undertaken in one of the case study schools in England (E2) during the spring term of 2001. The pupil workbook for the unit of work was also obtained for analysis. A detached observation approach was adopted and an audio recording of the teacher was made. The lesson observations permitted analysis of practice and provided a means of triangulating data from documentation and interviews.

Consistent with a subjective-constructionist perspective, data analysis sought the existence of multiple realities, a process which involved breaking down the data, grouping it together, and looking for emerging themes and patterns (Miles & Huberman, 2002). The interview transcripts, field notes and lesson transcripts were continually revisited and themes and categories were revised as new data were coded, and as categories became in need of further classification. The coding and re-coding of the data was considered complete when all significant data had been classified and all the categories were saturated. This led to the development of inferential 'pattern codes' and the identification of emergent themes (Miles & Huberman, 2002).

The study adhered to the University's ethical procedures. Written permission was sought from all teachers prior to their involvement in the study. Measures were

taken to limit disruption to teaching commitments (e.g. by scheduling interviews during non-contact time) and anonymity was assured in all reporting.

Discourses of Health in Physical Education

This study explored the expression of health in PE in five case study schools and identified associated discourses that were present, and absent, in PE policies and practices. These discourses are summarised and discussed under two key thematic headings: 'fitness for life' and 'fitness for performance'; and tensions between policy and practice.

'Fitness for life' and 'fitness for performance'

All the teachers expressed concerns about their pupils' health, fitness and diets and believed that their schools' provision of broad curricular and extra-curricular PE programmes and their approach to health within PE, which included monitoring pupils' fitness, were helping to improve pupils' states of health, activity and fitness. However, as found before this study (Harris, 1994, 1995) and since (Alfrey, Cale & Webb, 2012; Cale, Harris & Chen, 2012), a degree of conceptual confusion was evident in the teachers' understandings of 'health', 'activity' and 'fitness' and their perceptions of health in PE seemed somewhat limited, resulting in the health-related content of their PE programmes being restricted almost solely to 'physical' health. This is disappointing but perhaps not surprising given that, even in countries in which new syllabi prompt broader conceptualisations of health and encourage critical examination of the meaning of health as a social construct, young children's articulations of health tend to pay limited attention to social, cultural, economic or political factors (Burrows & Wright, 2004; Wright & Burrows, 2004).

In this study, four of the five schools adopted a similar approach to the expression of health in PE in the form of discrete units of work, all of which included fitness testing and training activities (e.g. circuit and/or weight training). In addition, PE staff in all five schools stated that they permeated 'health' through the PE programme, in particular, through the activity areas of athletics and games but also through gymnastics and swimming. The permeated content mainly focused on teaching about warming up, the effects of exercise, fitness components and training to improve performance, all of which aligned with the health-related requirements of the NCPE in England (DfEE & QCA, 1999) and Wales (ACAAC, 1999). Warming up was seemingly a standard component of PE lessons and, for many of the teachers, provided a context for informing pupils about knowledge associated with muscles and flexibility, and for increasing pupils' independence from the teacher (e.g. via pupils designing and/or leading warm ups). Pupils were usually fitness tested during health-related PE lessons using standardised tests (e.g. the Multi-Stage Fitness test and the 'sit and reach' test). In three schools (E1, E2, W1), 'test, train, re-test' procedures were employed. With respect to training type activities, all schools included circuit training in their health-related units of work or PE programme, and weight training was also included in both of the Welsh schools. One of the schools in England (E1) also included interval and continuous training and, in a few schools (E2, E3), pupils were involved in designing and undertaking personal training/exercise programmes.

The common use of fitness testing and circuit training as vehicles through which to teach health in PE in secondary schools in England had been found in a previous study (Harris, 1994, 1995, 1997) and also in later studies (Alfrey, Cale and Webb, 2012; Cale, Harris & Chen, 2012). However, these activities are not

particularly appealing for some young people (Hopple & Graham, 1995; Luke & Sinclair, 1991), especially the least active, fit and healthy who arguably are the very individuals who could benefit the most from being more active. In addition, fitness testing remains a controversial and contentious issue in school curricula and Cale and Harris (2009) consider that much of the fitness testing carried out in PE may well represent a misdirected effort in the promotion of healthy, active lifestyles. They have also raised specific concerns about the individualistic nature of, and performative culture reinforced through, fitness monitoring within PE curricula (Cale, Harris & Chen, 2012).

The discourses expressed in the case study schools broadly reflected ideologies associated with promoting 'fitness for life' and/or 'fitness for performance'. A 'fitness for life' discourse generally drew upon wider discourses from primary and public health and was articulated in terms of 'lifestyles' conducive to health. It was considered to be represented by reference to most or all of the following:

- the role of physical activity in maintaining/enhancing health
- a desire for pupils to be fit enough to undertake and enjoy every day activities
- the promotion of active lifestyles
- a focus on participation
- a broad PE curriculum, including lifetime activities
- allowing older pupils (14-16 year olds) to choose their activities
- helping pupils to become increasingly independent in terms of being active, both at school and beyond
- a focus on recreational activities in extra-curricular programmes

- activity monitoring associated with recommended levels of physical activity for young people.

In contrast, a ‘fitness for performance’ discourse generally drew upon wider discourses from sports science and biomedicine and was articulated in terms of enhancing sports performance. It was considered to be represented by reference to most or all of the following:

- the role of physical activity in increasing/developing fitness
- a desire for pupils to be fit for sports
- an emphasis on improving sports performance
- a limited PE curriculum, dominated by competitive games and fitness-related activities
- an emphasis on fitness testing and/or training/conditioning activities linked to sporting performance
- a focus on fitness components and their association with performance in specific sports
- pupils designing sports-related training programmes based on fitness components and training principles.

Table I summarises the basis of the expression of ‘fitness for life’ and ‘fitness for performance’ discourses evident in each of the case study schools (from documentation, interviews and lesson observations) and demonstrates that both discourses were expressed, to varying degrees, in all five schools.

Insert Table I

Tensions between policy and practice

Curiously, whilst the philosophy articulated by the teachers and expressed in policy documents in all the case study schools generally represented a 'fitness for life' discourse, practice generally reflected a 'fitness for performance' discourse. The latter discourse was particularly evident in two of the schools, one in England (E3) and the other in Wales (W1), in which practice was predominantly centred on the role of fitness and training on performance in competitive sport. This concurs with Harris' (2009) description of many health-related programmes in PE being orientated more towards 'fitness for sports performance' than 'fitness for healthy lifestyles'.

The apparent difference between what the teachers said they did (and was stated in formal documentation) and what they actually did led to the emergence of a theme associated with tensions between 'policy and practice' or 'rhetoric and reality'. Sparkes (1990, p. 19) has previously referred to teachers operating in two 'modes of consciousness', the 'discursive' and the 'practical'; the former is influenced by their philosophy and beliefs and expressed at the level of discourse during meetings/interviews whilst the latter is that demonstrated during lessons. In this study, all but one of the PE teachers articulated a 'rhetorical justification' (Sparkes, 1990, p.35) for PE, which was associated with helping pupils to discover activities they enjoy in order to encourage them to be active outside of, and after they have left, school. However, the findings from this study suggest that this 'fitness for life' philosophy was not necessarily expressed through the teachers' practices, as the health-related units of work and associated resources generally reflected a 'fitness for performance' discourse. Rhetorical justifications (that is, those which are not necessarily played out in practice) associated with the benefits of physical activity to health may be used to enhance status or power for the subject/profession and/or to

increase associated resources such as curriculum time and funding. It may even be that use of a 'strategic rhetoric' (Sparkes, 1990, p.38) by a department serves to perpetuate the 'official' department policy and philosophy and to mask practice from outsiders.

Interestingly, although it was found that rhetorical 'fitness for life' discourses were often expressed in the form of 'fitness for performance' practices, the lesson observations in one of the case study schools revealed that the discourses privileged in the department booklet for the unit of work were markedly different to those demonstrated in practice. The written documentation for the unit privileged a 'fitness for performance' discourse (evidenced by references to fitness testing, circuit training, fitness components, training principles and fitness programmes). However, the teacher delivering the lessons held a strong orientation towards a 'fitness for life' discourse and, in her delivery, she emphasised the need for pupils to increase routine, habitual activity in their lives and included a broad range of activities. In addition, during the introductions to and conclusions of the lessons, she discussed with pupils the benefits of an active lifestyle and the consequences of a sedentary lifestyle. Another example of inconsistencies between policy and practice was demonstrated in this unit in that the department policy was for pupils to independently warm up at the start of each PE lesson; however, 'warming up' did not feature in any of the lessons observed in the 'fitness' unit of work, due to the teacher's desire to get pupils started on the main activity as soon as possible.

The teacher admitted to not feeling 'comfortable' with the content of the fitness booklet and she was also very aware that her head of department, who had a sports science background and personal experience of fitness and training, would have taught the unit of work differently. All of this suggests that departmental policy

(as expressed in the formal booklet for the unit of work) may not be reflected in practice (as observed in the taught unit of work) and that teachers are able to find ways of expressing their own preferred ideologies and discourses in the practical context. This concurs with Sparkes' (1990, pp. 16-18) view that 'what is articulated at the level of school policy in curriculum documents and staffroom debates need bear little relationship to what actually happens in the classroom' and his belief that this is possible because of the 'structural looseness' within the organisation of schools and other 'obstructions' to ideal practice such as resources, teacher-pupil ratios and the nature of pupils.

It would seem then that flexibility inherent within the process of implementation of national curricula opens up possibilities for teachers to 'variously' deliver the requirements in line with their own values and philosophies. Indeed, gaps between policy and practice may not be accidental. There may be 'inbuilt slack in the system which allows for individual responsiveness, creativity and interpretation on the part of the teachers' (Sparkes, 1990, p. 19). This 'slippage' (Ball, 1990) in the interaction between the sites of production, reproduction and relocation of discourse (Bernstein, 1990) allows teachers to retain a degree of control and professional autonomy over what and how they teach, providing that their documented practice (e.g. the department policy) meets necessary requirements. This can result in an individual teacher's practice becoming somewhat divorced from departmental policy, as evidenced in the case study school in which the fitness unit of work was observed. The gap between policy and practice, or 'interactional space' can be used by teachers 'to promote a specific set of interests in the educational context while at the same time protecting a different set of interests in the classroom context' (Sparkes, 1990, p. 33). Teacher autonomy allows this interactional space to emerge

and permits slippage between department policy and individual teacher's practice. The flexibility provided by this space no doubt allows teachers to cope with the exigencies of classroom life. It also demonstrates the diverse ways in which teachers constitute their role as health and physical educators, with their pedagogies influenced by their experience, understanding and personal convictions about what constitutes a healthy lifestyle (Burrows & McCormack, 2012). Indeed, it is not just teachers who can exercise some freedom in terms of how they interact with a given programme; McDermott's (2012) classroom based study in Canada of a school-wide fitness-based PE initiative aimed at producing healthy children, highlights the regulatory, surveillant and performative nature of the programme and the children's attempts to usurp it with an embodied sense of pleasure and fun. Most of the children (aged 6-8 years) found the programme 'boring' and responded by either doing none of the tasks within the fitness 'stations', doing the tasks but not in the way intended, or only partially completing the tasks (McDermott, 2012, pp. 418-9). In this way, these young children found ways of circumventing the intent of the fitness practice, and by extension, its governmental underpinnings.

In the study reported in this paper, some teachers, such as heads of department, clearly had greater 'resources of authority and influence' to further their own interests (Sparkes, 1990, p. 11). This was exemplified by a PE HoD in one case study school in England (E3) who, by virtue of his authority and sole responsibility for curriculum planning, decided that the teaching of health in PE would be permeated through the activity areas. In contrast, his colleagues thought that much of what had, in previous years, been taught in health-related units of work was 'lost' when trying to integrate it within the usual PE lessons and they expressed their preference for a return to a more explicit approach in the form of discrete health-

related units of work. Another example of a HoD exerting authority occurred at one of the schools in Wales (W1) where the importance of personal training was emphasised, influenced by the HoD's vast personal knowledge of, and belief that, 'conditioning' was at the heart of sports performance. Indeed, in this school, it was possible to identify what could be described as a 'corporate' ideology as three of the four PE teachers held similarly strong 'fitness for sport' ideologies. However, a recent member of the department held a more lifestyle oriented perspective and did not agree with what she deemed to be the department's 'pre-occupation with fitness and training'. These examples reveal that more experienced teachers can be 'gate keepers' within the department (Sparkes, 1990, p. 127) and that departmental policy may not represent the views of all, or indeed most, of the teachers within that department.

In contrast, there was no clear ideology amongst the staff in the PE department at E3 and, although two members appeared to favour a 'fitness for life' orientation, their beliefs were not strongly expressed and they held little power within the department. At another case study school (E1), staff held different beliefs about the content of PE, with the older male teacher giving the impression that health-related learning should not be part of PE ('it's not at the top of my agenda...it's just a new little phase, isn't it?...the profession will move onto something else later on'). Thus, in each of the case study schools, teachers in the same department held varying views about 'subject paradigm' (the manner in which teachers view the content of PE) and 'subject pedagogy' (the system of ideas and organisation of learning (or method) (Sparkes, 1990, p. 13). Each PE department could, therefore, be viewed as an 'arena of struggle' (Evans, 1988 in Sparkes, 1990, p. 105) in which power is unevenly distributed between teachers and groups of staff, and ideological

differences and conflicts of interest co-exist. This led to some teachers, such as those in one case study school in England (E1), who played no part in departmental planning, adopting the attitude that they would simply 'do as they are told'. However, and in contrast, in a different case study school in England (E2) and one in Wales (W2), young male teachers were centrally involved in the planning of health-related content and produced resources for their department (e.g. a revised version of a pupil 'Fitness' booklet; work cards for circuit training lessons) which helped to influence and govern the approach to this area of work. It is possible that the emergence from the data of older 'sporting' staff (e.g. at E1, E2) and younger 'fitness' staff (males in particular) (e.g. at E2, W2) is representative of a broader gender-related theme associated with males and the reproduction of performance and sporting orientations, as reported by Brown (1999) and also detected by Harris and Penney (2000) and Domangue and Solmon (2012) in their descriptions of gendered versions of health and fitness practices within PE. A further theme of older PE teachers seeing themselves as having 'risky bodies', as found by Webb and Quennerstedt (2010), may also be in evidence. However, whilst these connections are suggested in this study, they require further study to make firmer comment on the possible effects of gender and age on the expression of health in PE.

In summary, within the PE department of each case study school, teachers held varying degrees of orientation to 'fitness for life' and 'fitness for performance' discourses, irrespective of the formal department policy/doctrine. The extent to which they could express their favoured discourses in policy and practice was partly determined by their position of power, relative to others within the department. However, as evidenced in the observed unit of work, teachers in varying positions of power, could find ways of privileging their favoured discourse in their own lessons.

Conclusion

This study analysed the expression of health within PE at secondary school level and found that PE staff in all five case study schools expressed, to varying degrees, both 'fitness for life' and 'fitness for performance' discourses. These discourses were evidenced in NCPE documentation but had been recontextualised, that is to say, received, interpreted and reconfigured, within the secondary field of educational practice in schools. Indeed, even though the school policies and teacher rhetoric in all the schools expressed 'fitness for life' discourses centred on the promotion of active lifestyles, none of the teachers held a particularly holistic view of health, and 'fitness for performance' practices in the form of testing and training activities were common. These practices, which are associated with the body-as-machine and with outcome and instrumental forms of assessment, may have been influenced by wider discourses impacting upon education associated with a performance culture (Ball, 2003) in which schools monitor and regulate the lives and bodies of children and young people (sometimes with negative effects) (Rich, 2012) and are expected to measure aspects of young people's performances (Cale, Harris & Chen, 2012).

Although previous research has revealed the dominance of a sporting ideology amongst PE teachers' philosophies (Green, 2002), most of the teachers in this study articulated a 'fitness for life' philosophy (albeit to varying degrees) which could suggest that PE teachers' philosophies are shifting. This may be due to the increasing prominence of fitness for life and lifestyle discourse in government documentation, the mass media and in recontextualised forms accessed by teachers, resulting in teachers' view of their role altering, from producers of competent sports performers towards promoters of active lifestyles. However, whilst

teachers' philosophies may be changing, this study suggests that there have been little more than surface level changes to practices as discourses associated with 'fitness for performance', rather than 'fitness for life' were evidenced in the practical context. This situation has persisted in the UK for almost two decades (Harris, 1994; Alfrey, Cale & Webb, 2012) and has served to resurrect debate within the PE profession about the role of PE in public health and the level of responsibility it is willing to accept for delivering health outcomes; it has also prompted a call for new evidence-based 'PE for health' pedagogies (Armour & Harris, in press). The lack of PE teacher engagement with health-related professional development has led Alfrey, Cale and Webb (2012, p. 486) to question the extent to which PE teachers are equipped to teach pupils about health and lifelong physical activity and to plea for professional development which challenges deep-rooted sport and fitness ideologies that have resulted in 'reductionist' expressions of health in PE. Wright and Burrows (2004) also question whether teachers are sufficiently prepared to challenge the certainty of the biomedical knowledge which dominates health-related approaches to PE. Alfrey, Cale and Webb (2012, p. 488) recognise that the provision of such professional development represents a challenge in itself and is further compounded by the 'misguided' confidence of PE teachers in delivering health-related aspects of PE, resulting in them not actively seeking or attending professional development associated with this topic. It is worth bearing in mind though the warnings expressed by Cothran and colleagues' (2006) following their study of PE teachers' reactions to a mandated public health curricular change in the US in which teachers felt overwhelmed with new knowledge and did not give the change a chance due to its perceived mismatch with their current understanding of PE and the context in which they were teaching. Similarly, Cliff's (2012) classroom-based study of curriculum

change in health and PE (HPE) in Australia led him to conclude that a sociocultural perspective on HPE can be implemented in practice but requires significant pedagogical, discursive and structural shifts.

Although schools from both England and Wales were involved in the study reported in this paper to permit examination of possible differences in policy and practice as a result of separate national curricula from 1999, it was found that there was little or no difference in health-related policy and practice in PE in the schools from the two countries. In addition, schools were selected from each LA based on whether the PE department was considered by the LA PE adviser to be 'forward thinking' or 'somewhat behind' in terms of their approach to health-related PE. However, few differences were detected between these categories of schools. A Specialist Sports College from the LA in England was also included because of the government's commitment at the time to the concept of specialist schools. The only significant difference in terms of the expression of health in PE from the non-specialist schools was that it was the only school which did not have discrete units of work associated with the area, although intended to introduce them in future years.

The findings of this study need to be considered in light of its methodological limitations. In particular, data were obtained from only five schools and thus cannot be considered representative of state secondary schools in the two respective countries; equally, the three schools in England and the two in Wales can not possibly represent the full range of state secondary schools in the respective countries. In addition, the study relied heavily on interview data which offered an account of what teachers say they think and do; however, this may contrast with their actual thoughts and behaviours. The observational data helped in this respect but was limited to only one of the five schools. Having said this, the study utilised a

range of data sources which permitted some degree of cross-checking and provided rich layers of data about the expression of health in curricula PE. It is this richness of data, especially that obtained at the micro-level from lesson observations, which allows this study to contribute to the international research community in this field.

The larger study from which these data were drawn (Leggett, 2008) also explored possible reasons why 'fitness for performance' practices in the form of testing and training activities were the most common contexts for the delivery of health-related learning. The following were detected as sources of influence: a belief that training and testing activities are unproblematic and lead to increased fitness and activity levels; the resolution of pragmatic issues associated with large groups, limited space and minimal equipment; the 'inheritance of tradition' and a desire by teachers to remain within their 'comfort zones' in terms of content and teaching approaches; limited awareness of appropriate 'fitness for life' pedagogies; and preparation for accredited courses in PE. These influences are discussed in a separate, forthcoming paper.

Recommendations emerging from this study are for further research on: the effect of class, gender and age on the expression of health in PE; the complex relationships and interconnections between the pedagogic and official recontextualising fields; and how pupils experience, interact with and learn about health within PE as a further layer of the recontextualisation process. This study has increased awareness of the expression of health in secondary school PE curricula which should help to better understand and address the complex tensions between health-related policies and practices in schools.

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Case Study School	'Fitness for Life'	'Fitness for Performance'
<p>E1 (England)</p> <p>3 PE teachers, (2 FT, 1 PT) interviewed</p>	<ul style="list-style-type: none"> • Philosophy: desire for pupils to be fit enough to lead active, healthy lifestyles and to be active post school • Options-based curriculum for 14-16 year olds • Recreational approach to extra-curricular programme • Developing community links with sports clubs including 'starter' sessions in gyms/clubs • Interest in increasing proportion of pupils who are active after they have left school 	<ul style="list-style-type: none"> • 'Health-related fitness' (also referred to as 'health-related exercise' and 'HRE and Outdoor Ed' and 'Fitness') units of work (12-14 years; mixed sex; 6-10 weeks) centred on fitness testing and training activities (e.g. continuous, interval training); plus associated cross-country units of work • Circuit-training and fitness options for 14-16 year olds • 'Health' permeated through activities in terms of types of fitness and warming up (particularly through athletics in the girls' curriculum and through games in the boys' curriculum)
<p>E2 (England)</p> <p>4 FT PE teachers interviewed</p>	<ul style="list-style-type: none"> • Philosophy: desire for pupils to do their best and to continue participation post school • Development of pupil independence (e.g. designing/performing own warm ups) • Broad PE curriculum to provide activities suitable for all pupils • Extensive extra-curricular programme including recreational activities 	<ul style="list-style-type: none"> • 'Fitness' (also referred to as 'health-related fitness') unit of work (12-13 years; mixed sex; 6 weeks) centred on understanding the importance of improving fitness via circuits and testing; plus associated cross-country running units of work for 12-14 year olds • Warm ups and training permeated through activities (athletics in particular), especially for 14-16 year olds • Older pupils involved in designing training programmes based on fitness components • Pupils' poor performance in competition beyond local level was considered to relate to lack of training • Elite performance and competitive sport prioritised

Case Study School	'Fitness for Life'	'Fitness for Performance'
E3 (England) Specialist Sports College 3 FT PE teachers interviewed	<ul style="list-style-type: none"> Philosophy: to generate an interest in lifelong participation PE staff emphasise the benefits of exercise to pupils to promote active lifestyles Pupils encouraged to be active outside of school and post school 	<ul style="list-style-type: none"> 'Health-related fitness' (also referred to as 'health-related exercise') units of work planned for following year for 11-14 years, centred on components of fitness and fitness training via fitness testing, circuits (for boys) and running activities (orienteeing for girls and cross-country for boys) In current year, 'fitness' was permeated in terms of the importance of training and knowledge about the components of fitness, mostly through games and athletics lessons, plus 6 week 'Personal Exercise Programme' unit of work introduced for 14-15 year olds focusing on designing and undertaking a fitness programme Strong reputation for success in local competitions and nationally in some sports (e.g. tennis); emphasis on competitive sporting success
W1 (Wales) 2 FT PE teachers	<ul style="list-style-type: none"> Philosophy: desire for pupils to maximise their potential and be active post school; 'healthy body, healthy mind' Pupils encouraged to be independently active Issue of 'body image' referred to in girls' PE curriculum 	<ul style="list-style-type: none"> 'Health-related fitness' (also referred to as 'health-related education', 'fitness' and 'conditioning') units of work for every year group (11-14 years; mixed sex; 2 x 6 weeks; streamed groups based on performance in 1 kilometre time trial during first HRE unit of work) centred on aerobic exercise such as running (for 11-14 year olds) and circuits (for 14-16 year olds), plus fitness testing for

		<p>all ages</p> <ul style="list-style-type: none"> • Circuit and weight training units for 14-16 year olds • Importance of warming up and development of fitness components (stamina, strength, suppleness, skill, speed) and conditioning to sports performance, permeated through PE activities (especially athletics, gymnastics and also swimming) • Emphasis on training to improve fitness and sports performance • Strong tradition in extra-curricular rugby and growing success in soccer
<p>W2 (Wales)</p> <p>3 PE teachers</p>	<ul style="list-style-type: none"> • Philosophy: desire for pupils to be active post school for physical/social development and to be aware of future participation opportunities • Concerns expressed about sedentary lifestyles and pupils' future health • Desire to teach pupils the importance of exercise to quality of life and life expectancy • Extra-curricular programme includes 'fun' activities such as roller hockey and mixed football (but recent reduction in lunch time to 45 minutes has had 'devastating' negative effect on lunchtime participation) • The school's Personal and Social Education programme included the topics of 'the importance of exercise/fitness' and 'how pupils use their leisure time' 	<ul style="list-style-type: none"> • 'Health-related fitness' (also referred to as 'health-related exercise' and 'fitness') units of work (11-13 years; mixed and single sex groups; 6 weeks) centred on fitness testing and training activities (e.g. circuits, weight training, relays) to improve sports performance • HRF permeated through other PE lessons, mostly in the form of warm ups (in girls' PE lessons) and fitness components such as speed and agility in games (in boys' PE lessons) • Fitness tests and circuits also utilised to cope with large numbers in limited indoor facilities during inclement weather • Strong reputation for extra-curricular success in netball and rugby

Table I: Discourses of Health in PE Curricula in Case Study Schools (Key: FT: full-time; PT: part-time)

