



## Presenter Abstracts

*Alphabetical by main presenter surname*

**Agnew, Shire** (University of Otago, shire.agnew@otago.ac.nz)

*"That's just silly, we're all going to get it": Students' engagement with alternative discursive construction of menstruation.*

A recently completed research project investigating what happens when teachers use critical literacy pedagogy to support students to analyse advertising texts in menstruation education provides important contributions to the small body of research located in New Zealand. It found that the discourse positioning menstruation as a shameful secret was still dominant in the teachers' construction of menstruation. Importantly, however, discourses of celebration and excitement were also identified within the ways students constructed their understanding. For the past 40 years, research literature around the experience of menstruation has reported the continuing dominance of discourses that construct menstruation as shameful and secret. Initially, teachers participated in workshops that explored the ways a critical literacy approach can examine the discursive construction of menstruation. I was, then, able to observe the classroom lessons and interview a small focus group of students from each observed class. From the transcripts of the audio-recorded workshops and interviews, and the field notes taken during the class lessons, I found that while teachers were still taking up the dominant discourse of shame and secrecy, the students were taking agentic opportunities to challenge this dominant discourse as well as explore alternative discourses to construct menstruation. Female students saw their experience of menstruation as providing them with special knowledge that enabled them to position themselves in powerful ways. And both male and female students talked about learning about menstruation as exciting, and considered the lessons interesting. Therefore, while I do not argue that the discourse of shame and secrecy is no longer dominant, it does appear the students in this research were actively engaging with alternative discursive constructions of menstruation. The research suggests it is important that teachers examine their own personal constructions of menstruation, and how this may (re)produce and reinforce the dominant discourse of shame and secrecy within their teaching of menstruation.

*Paper - 25 mins*

*Wednesday 30 May 2018, 2:30pm - 2:55pm, Conference Room III*

**Allen, Jean** (University of Auckland, jean.allen@auckland.ac.nz)

*Youth Activism in Health Education*

The deficit focus on the health of young people, or youth-at-risk (Wright, 2014) is nothing new and often dominates discussions regarding youth interventions that promote the 'safety' and 'healthiness' of young people (Kelly, 2014; Leahy, 2012; Petersen & Lupton, 1996). In New Zealand the Youth 2000 National Youth Health and Wellbeing survey series has drawn attention to youth perspectives and provides "the most comprehensive, accurate and up to date information about issues facing young people in Aotearoa, New Zealand" (Adolescent Health Research Group, n.d, para. 1). While this project has provided extensive information about the health of young people in New Zealand, it invokes traditional institutional roles of adults asking the questions and young people answering them. What would happen if youth were given space to develop their own questions, their own answers and focus on health issues that they were passionate about?

This presentation shares my interactions with senior health classes at Whakaehu High school; a school in South Auckland, New Zealand that is adopting '21st-century pedagogical practices'. These practices allow student agency to explore health issues that are important to them. Students developed a range of projects that confronted topics such as gender, rape culture, domestic violence, discrimination, mental health and youth as first responders. The development and results

of these projects were inspiring to see, and even though senior management of Whakaehu High School attempted to enforce boundaries on students and their projects, youth found ways to subvert these boundaries, working around them to carry out their activism. Focusing on specific examples, I present the possibilities of youth activism in health education, examining the learning and development that occurs when young people are given space to develop their own projects that meet their own needs.

*Paper - 25 mins*

*Friday 1 June 2018, 1:45pm - 2:10pm, Conference Room III*

**Atkins, Denise** (AUT University, [denise.atkins@aut.ac.nz](mailto:denise.atkins@aut.ac.nz))

*Re-contextualising health: the classroom-school-society nexus and body pedagogies*

Increasing attention from many agencies on children's health, a proliferation of health interventions in schools and a growing body of knowledge about body pedagogies has prompted research studies to be conducted from sociological and socio-critical perspectives. This presentation will consider the impact on children's understanding of health through examining how health knowledge is prescribed in one Aotearoa /New Zealand primary school. Discussion will focus on how teachers re-contextualise this knowledge using social-cultural constructs such as the interrelationship between the body, school and society. Environments where children learn about their bodies and their selves are not free from the politics and policy of obesity discourse. It is this environment and the interconnection between the body-school-society that can impact on the identities of students and their understandings of health, their bodies and their selves.

'Regimes of truth' and the socialisation effect on children's understanding of their bodies will be explored. Drawing on Bernstein's (1975) theorising of the relationship between schooling and social values, the exposure of the ways in which society reproduces difference and social status through the distribution of power, class relations, communication codes and the principles of control will be discussed. A hegemony evident in the pedagogical activity undertaken by a number of teachers through curriculum and assessment practices that reinforced a behaviourist perspective of health is exposed. Teachers inadvertently reinforced health practices that were biomedical and often delivered these with little critical thought. This re-contextualisation of health and body knowledge resulted in some children feeling privileged and others disadvantaged. Thus reinforcing that message systems in schooling collectively work to make education an arena of socialisation and allocation.

Bernstein, B. (1975). *Class codes and control, towards a theory of educational transmissions* (Vol 3). London, England, England: Routledge & Keegan Paul.

*Paper - 25 mins*

*Thursday 31 May 2018, 2:00pm - 2:25pm, Conference Room III*

**Barwood, Donna** (Edith Cowan University, [d.barwood@ecu.edu.au](mailto:d.barwood@ecu.edu.au))

*Understanding and challenging the dominant discourse in HPE at a teacher education institution in Australia*

This presentation centres on an investigation of the marginalised positioning of health education within the Bachelor of Education (Secondary) course for Health and Physical Education (HPE) at a teacher education institution in Australia. Insights from data collected in a previous study raised questions regarding the limited conceptualisation of HPE within the course and the capacity of the course to respond to the Australian Institute for Teaching and School Leadership (AITSL) standards for graduating teachers in the context of HPE. More particularly, the research revealed that through unit selection, students could follow a path to graduation that gave limited attention to Health Education, and that privileged Physical Education (PE) and/or Outdoor Education (OE). Based on these findings, this study has explored HPE curriculum leaders' understandings of the learning area in the context of pre-service teacher preparation and their beliefs regarding the preparedness of graduating HPE teachers. This presentation relates curriculum leaders' perspectives to the nationally endorsed perspective of HPE articulated in the Australian Curriculum for Health and Physical Education (AC: HPE) (Australian Curriculum, 2015) and the understandings of HPE that are expressed

in the state curriculum pertaining to this institution. Discussion pursues the opportunities and challenges associated with efforts to re-position Health Education within tertiary programs that have historically privileged other discourses.

*Paper - 25 mins*

*Thursday 31 May 2018, 2:00pm - 2:25pm, Conference Room II*

**Bower, Marlee** (Western Sydney University, marlee.bower@westernsydney.edu.au)

*How can we teach about social disadvantage, critically? Lessons from a qualitative study of loneliness in the Australian homeless population.*

Loneliness is a major public health concern associated with physical and health disorders, and with a mortality rate on par with severe alcoholism and obesity. One population, the homeless, have increased risk of loneliness due to high rates of mental disorder, relationship breakdown and trauma. Yet, loneliness can have particularly negative consequences for the homeless: exacerbating existing mental health issues and preventing them from successfully exiting homelessness by maintaining tenancies. The current study included in-depth interviews with 16 participants, who ranged in the type of homelessness they experienced, their age, indigenous status, gender identity and social background e.g., incarceration history. A thematic analysis of the data, conducted under a critical realist framework, identified that loneliness was experienced as how participants felt they were perceived by mainstream society. This experience was dichotomous: participants felt invisible to mainstream society, ignored in their interactions with them, but simultaneously extremely visible to society, through frequent victimisation, abuse, judgement and rejection due to their homeless identity. Further, participants experience of visibility, and therefore loneliness, differed according to their profile of identities and past experiences. Participant's accounts illustrated that their loneliness will likely persist if mainstream attitudes towards homelessness remain stigmatising and pathologising. How can we educate new generations of students to see homelessness and other forms of disadvantage, in a less homogeneous and judgemental light? It is argued that education programs would benefit from an intersectionality-informed critical pedagogy, emphasising the way that each individual's particular constellations of identities may overlap or intersect to foster multiple and varying levels of discrimination, oppression and reduced access to social participation. Programs should engage students to be reflexive around the diverse, complex and numerous pathways to disadvantage, and the negative consequences involved in stigmatising and marginalising others. Together, these programs may foster less stigmatising mainstream understandings of disadvantage.

*Paper - 25 mins*

*Thursday 31 May 2018, 12:00pm - 12:25pm, Conference Room II*

**Burns, Kellie** (University of Sydney, kellie.burns@sydney.edu.au)

*Contagious childhoods: A socio-historical analysis of smallpox inoculation*

This paper considers how the history of smallpox inoculation in Australia (1880-1917) is intimately interconnected with histories of childhood and public health. Smallpox inoculation spans the nineteenth and early twentieth centuries, inaugurating significant transitions in approaches to public health. The mid-nineteenth century marked a gradual shift away from quarantine laws to the advent of sanitary science, characterised by a preoccupation with sanitation. In the early twentieth century the focus turned to personal hygiene – the individual's bodily constitution, lifestyle and habits. Children became a principal target for pedagogies of personal hygiene, with schools identified as sites for the spread of contagious disease (Proctor & Burns, 2017). The main modes of smallpox prevention in Australia were mandatory quarantine and targeted inoculations, which entailed deliberately introducing contagious foreign matter into uninfected populations. Children often participated in arm-to-arm vaccination protocols, raising concerns in anti-vaccination campaigners about the transmission of infectious disease across lines of class, race and culture. Detailed genealogies of childhood transmission were central in the government of population health and colonialism (Bashford, 2004). This paper purposes that the bodies of children are thus integral to understanding smallpox infection and inoculation and the mediation of information about disease

transmission and prevention. The novel proposition here is that childhood vaccination against smallpox is more than a history of disease control and management, but rather a historical case study into how dominant models of public health, underpinned by the broader colonial project, produced and normalised constructions of the 'child' and childhood health.

Bashford, A. (2004). *Imperial hygiene: A critical history of colonialism, nationalism and public health*. New York: Palgrave Macmillan.

Proctor, H. & Burns, K. (2017). The connected histories of mass schooling and public health. *History of Education Review*, 46(2), pp. 1-7.

*Paper - 25 mins*

*Thursday 31 May 2018, 2:30pm - 2:55pm, Conference Room II*

**Chapman, Rachel** (RMIT University, rachel.chapman@rmit.edu.au)

*Exploring early childhood educators' understandings of gender development in the early years and the ways in which the national framework document helps or hinders this.*

I am a lecturer at RMIT University and am close to completing my PhD on gender development in children during Early Childhood. I conducted my Honours research by looking at the impact that educators' perceptions of gender can have on children's play, and a journal article about my Honours research was published in a peer-reviewed journal (<http://www.tandfonline.com/eprint/zIXf4M27jEfeNMt5kPcR/full>). My PhD research expands on this by looking at the complicated understanding that early childhood educators have of children's gender development and explores what this means for their practice.

My conference paper would focus on the findings of my research. These include perspectives from early childhood educators about their confusion surrounding gender, sex and sexuality. My research unpacks gender as a societal construct that is associated with a number of behavioural traits, and explores when 'gendered' behaviours develop as well as the impact of educators' pressures or biases on children. My paper would highlight the frequency with which the educators associated children who behave outside the 'gender norms' with homosexual and transgender identities. In addition, it would share findings from my interviews with two professionals involved in developing the National 'Early Years Learning Framework' (one academic and one policy maker). Both explained why there is a silence in this document surrounding gender identity and why they had to tread carefully when selecting content for the National Framework.

*Paper - 25 mins*

*Thursday 31 May 2018, 11:30am - 11:55am, Conference Room III*

**Clelland, Tracy** (University of Canterbury, tracy.clelland@canterbury.ac.nz)

*"Shame! So much shame, there shouldn't be any shame": New Zealand parents/caregivers understandings and experiences as sexuality educators*

What are the dominant discourses New Zealand parents/caregivers draw on when they engage or disengage from sexuality education? What knowledge is privileged or silenced? What affects are produced when parents/caregivers constitute themselves within certain discourses? This paper communicates preliminary findings of a qualitative research project (PhD thesis) that explores how New Zealand parents/caregivers of young people aged 11-14 understand and experience their role as sexuality educators in contemporary New Zealand. Findings suggest the need to explore the highly affective aspects of engaging in sexuality education, a topic imbued with historical and contemporary cultural and moral discourses (Ahmed, 2010). Focus group discussions exposed how adult engagement with sexuality education was discomfited by affective histories (Gilbert, 2014). The ubiquity of shame revealed by participants culminated in tears, sadness, abuse revelations, disappointment and inadequacy but also resistance and hope for a re-envisioning of sexuality education. The struggle to make sense of how participants subjectivities influenced the 'healthy positive sexuality' they wanted for their child in the future highlighted potential opportunities to explore subjugated knowledge and education practices. Through engaging with participants' narratives it is hoped that schools, families/whānau and broader society will critique the simplistic

home versus school sexuality education debate. Consequently opening up discussion about the multiple formal, informal, private and public spaces where learning occurs (Elliott, 2014).

Ahmed, S. (2010). Happy objects. In Gregg, M., & Seigworth, G. (Eds.). *The affect theory reader*. (pp. 29-51). Duke University Press.

Gilbert, J. (2014). *Sexuality in school: The limits of education*. University of Minnesota press. Minnesota.

Elliott, S. (2014). "Who's to blame?" Constructing the responsible sexual agent in neoliberal sex education. *Sexuality Research Social Policy*, 11:211-224.

*Paper - 25 mins*

*Thursday 31 May 2018, 11:00am - 11:25am, Conference Room III*

**Coll, Leanne** (Deakin University, leanne.coll@deakin.edu.au)

**Ollis, Debbie** (Deakin University, debbie.ollis@deakin.edu.au)

Non-presenting author: Briony O'Keeffe, Fitzroy High School, brionyo@fitzroyhs.vic.edu.au

*Labours of (Un)Learning: Transforming Sexuality Education with Young People*

Researchers have persistently highlighted the need for sexuality education to reorient itself to the priorities and perspectives of young people (Allen & Rasmussen 2017). Central to this, is the increased recognition of the importance of reconceptualising young people as agents who actively interpret, negotiate and interrogate discourses of sex-gender-sexuality that permeate their everyday lives and schooling experiences (McGlashan & Fitzpatrick 2017).

This paper is derived from a larger three-year Participatory Action Research project, funded by the Australian Research Council and undertaken in four secondary schools across Victoria and Western Australia, which engaged over 100 students as co-researchers (aged 15–19) in understanding, critiquing and transforming sexuality education. This paper will focus specifically on engagements with one of the projects urban secondary school's Feminist collective (Fem Co) who acted as critical friends for and pedagogical consultants on the larger project. The Fem Co consists of a group of 24 cisgender, queer, gender creative and transgender identified young people who participate in a school-based timetable elective focused on interrogating enduring gender-sexual injustices in their school and communities that matter most to them.

Taking inspiration from MacLure's (2013) notion of data "hot spots" and Ringrose & Renold's (2014) methodological processes of working with "affective intensities", this paper will slow down and expose the productive tensions inherent in working towards more queer, critical, inventive and ethical pedagogies for sexuality education with young people. This paper argues that working with these productive tensions is not only necessary but provides unique moments in which difference become a unique launching point for encountering sexuality education differently.

References

Allen, L., & Rasmussen, M. L. (2017). *The Palgrave handbook of sexuality education*. London, Buckingham: Palgrave Macmillan.

MacLure, M. (2013). Classification or wonder? Coding as an analytic practice in qualitative research. In B. Coleman & J. Ringrose (Eds.), *Deleuze and research methodologies* (pp. 164-183). Edinburgh, UK: Edinburgh University Press.

McGlashan, H., & Fitzpatrick, K. (2017). LGBTQ youth activism and school: challenging sexuality and gender norms. *Health Education*, 117(5), 485-497.

Ringrose, J., & Renold, E. (2014). "F\*\* k Rape!" Exploring Affective Intensities in a Feminist Research Assemblage. *Qualitative Inquiry*, 20(6), 772-780.

*Paper - 25 mins*

*Wednesday 30 May 2018, 10:45am - 11:10am, Conference Room II*

**Cotter, Tania** (Health Promotion Agency, t.cotter@hpa.org.nz)

*Spark critical conversations in your classroom*

Teens told us what they really needed was something to help them to 'learn how to do life now'.

Play Your Best Card –is a novel team-based card game for young people that aims to inspire critical thinking and encourage conversation about challenges that are going on for them right now, or that they might encounter in the future. It encourages them to explore practical ways of dealing with situations (both good and bad) as well as raising awareness of youth organisations that they can reach out to.

This game has been co-designed with young people and those working with young people so that the challenges and characters feel relatable and realistic.

Every time the game is played, the scenarios change, as young people are given the creative challenge of coming up with relatable stories based on the cards they are dealt. Scenarios that the young people might explore while playing the game could include identity, alcohol, anxiety, relationships, and peer pressure, for example.

Play Your Best Card is being distributed to secondary schools in May 2018 and will be available for youth services to order through the Health Promotion Agency.

The best way to learn about Play Your Best Card is to actually play it. In this session, put yourself in the shoes of young people or take on the role as facilitator. Explore the many ways to use this tool with teens. Hear out about the process we used to develop Play Your Best Card, what we found out about teens along the way, and how we all worked together to produce something to meet their needs.

*Workshop*

*Friday 1 June 2018, 11:30am - 12:25pm, Conference Room III*

**Davies, Cristyn** (University of Sydney, cristyn.davies@sydney.edu.au)

**Leahy, Deana** (Monash University, deana.leahy@monash.edu)

*HPV.edu: A curated virtual online exhibition about human papillomavirus and HPV vaccination for pre-service teachers*

HPV.edu is a virtual exhibition about human papillomavirus and HPV vaccination curated in HealthEd Lab. The exhibition aims to engage Masters of Teaching Health Education Methods students to learn about HPV vaccination and the pedagogical potential of virtual exhibition spaces. In this presentation, we discuss our aims, design concept and education intervention.

Genital human papillomavirus (HPV) is a common sexually transmitted infection in both males and females. HPV infection, if persistent, can cause cancers of the cervix, vulva, vagina, penis, anus and oropharynx. In Australia, students are primarily vaccinated en masse, on school grounds, after parental/ guardian consent is obtained. Students most often receive little, or no, education at school about HPV or HPV vaccination prior to immunisation. There is also some uncertainty about where young people can and should obtain reliable information about the vaccine. Currently, no research has been undertaken in Australia with pre-service teachers regarding their knowledge about and attitudes towards HPV and HPV vaccination. of school.

HealthEd Lab is an online virtual exhibition space that allows for virtual engagement with digital exhibits, allowing real time collaboration via online platforms. It is an innovative medium through which to teach students about health and medicine by re-positioning targeted educational resources as 'artefacts' in a virtual interactive environment. Key resources that will comprise the HPV exhibition were designed for an educational intervention delivered as part of a cluster randomized controlled trial funded by the National Health and Medical Research Council. Students will be invited to co-create and design additional resources and curricula in HealthEd Lab and reflect on their experiences of learning about HPV via a virtual exhibition. In this presentation, both authors will reflect on their experiences of curating a virtual exhibition and consider the innovative potential of HealthEd Lab as place of learning about health.

*Paper - 25 mins*

*Friday 1 June 2018, 11:30am - 11:55am, Conference Room II*

**Dixon, Rachael** (University of Otago, rachael.dixon@postgrad.otago.ac.nz)

*What can health education do? A diffractive analysis of secondary school health education experiences in Aotearoa New Zealand*

Health education (HEd) has existed as a formally assessed senior secondary school subject in Aotearoa NZ since the National Certificate of Educational Achievement (NCEA) began in 2002. At NCEA level, HEd teachers engage students critically in learning about a range of population health concepts (e.g. determinants of health, health promotion), which contrasts with the typical individualistic and risk-based approach reported as widespread in junior secondary HEd learning (Leahy, Burrows, McCuaig, Wright & Penney, 2016). This paper communicates preliminary findings of a qualitative investigation into the long-term learning outcomes of senior secondary HEd in Aotearoa NZ using interviews with people who have studied HEd to the final year of secondary school as the main data collection tool. I used a diffractive reading of interview transcripts to discover patterns of differences that make a difference (Barad, 2007) by drawing on affect (Deleuze, 1988) to ask 'what can health education do?' The paper traverses the different affects of health education that arose for people (and the health educated body) in relation to content and pedagogy, teacher attributes, and learning outcomes gained by studying the subject. Moreover, in keeping with a diffractive analysis, I highlight my own embodied entanglement with the data. Arising from the analysis, questions for reimagining health education are posed, in order to move beyond critique into a space where HEd can be revisioned creatively. I hope that this may (re)ignite ideas for "reconsider(ing) the promises and possibilities of health education in contemporary schooling" (Leahy et al., 2016, p.2).

References:

Barad, K. (2007). *Meeting the Universe Halfway: Quantum Physics and the Entanglement of Matter and Meaning*. Durham, NC: Duke University Press.

Deleuze, G. (1988). *Spinoza: Practical Philosophy*. San Francisco: City Lights.

Leahy, D., Burrows, L., McCuaig, L., Wright, J. & Penney, D. (2016). *School Health Education in Changing Times*. London: Routledge.

*Paper - 25 mins*

*Wednesday 30 May 2018, 4:10pm - 4:35pm, Conference Room II*

**Edge, Kiri** (University of Waikato, kiri.edge@waikato.ac.nz)

Non-presenting author: Linda Nikora, University of Auckland, l.nikora@auckland.ac.nz

*Sexual & Relational Ethics: Tikanga, Values and Virtues*

Relationships, particularly those of an intimate and sexual nature, are pivotal to our human experience and exert considerable influence upon individual, whānau and community wellbeing. The opportunity and capacity to engage in positive and healthy relationships is critical to our human flourishing, from contemporary realities to imagined futures. In the modern world, complexity, diversity and fluidity within and across intimate and sexual relationships brings both challenges to be encountered and potential opportunities available. What remains unclear, are the tikanga, value and virtue frameworks that might guide intimate and sexual relationships in ways that ultimately enhance social, emotional and collective wellbeing, regardless of sexual orientation. As part of the Ngā Pae o te Māramatanga, Mauri Ora Research Programme, a post-doctoral research project is currently exploring the wisdom that mid-life and adult generations (25-65+ years) acquire and apply whilst cycling into, through and out of intimate and sexual relationships. The research intends to develop a sexual and relational ethical framework informed by a Māori worldview. The project will contribute towards a much-needed dialogical space and one demanded by our complex and fluid contemporary world. Our orientation to the topic aligns with positive, proactive and preventative approaches to intimate and sexual relationships. Although specifically focussed upon adult relationships, the research may inform sexual and relational educative frameworks, through both formal and informal learning places and spaces. The project aspires to create opportunities to bridge

conversation gaps between generations. Drawing upon the Māori reciprocal educative model of the ako-akonga relationship, there remains the potential for traditional understandings, accumulated wisdom and the opportunities of the contemporary world to be shared and accessed cross-generationally. This paper outlines preliminary findings from the research and explores how these may support our engagement with relationships and the reciprocation of knowledge across generations.

*Paper - 25 mins*

*Wednesday 30 May 2018, 11:15am - 11:40am, Conference Room III*

**Enright, Eimear** (University of Queensland, e.enright@uq.edu.au)

**McCuaig, Louise** (University of Queensland, l.mccuaig@uq.edu.au)

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Doune Macdonald, University of Queensland, doune.macdonald@uq.edu.au

Rebecca Johnson, University of Queensland, r.garbett@uq.edu.au

*Reconfiguring health and physical education expertise through a neoliberal social imaginary*

While there is increasing scholarly interest in the outsourcing of Health and Physical Education, there is a dearth of rigorous empirical work and theoretical analysis that focuses on the boundaries that are blurred or troubled through outsourcing practices (Williams and Macdonald 2015). One such boundary is that between the knowledge and skills of experts and non-experts. Drawing on data from two Australian Research Council Discovery projects that examine teachers' work and policy in relation to health and globalisation, this paper considers how teachers, school leaders and external providers construct expertise and the implications of these constructions. Data for this paper were primarily generated through semi-structured interviews. These data were subjected to a thematic analysis which involved the co-authors reading and re-reading the data, identifying patterned meanings across the data set, and reviewing and sharing identified themes. We recruited the idea of the 'social imaginary' (Taylor, 2004) to explore the narratives through which notions of expertise were interpreted and carried. Findings suggest that participants' criteria of expertise converge around a particular concatenation of neoliberal ideas. For example, where external 'experts' came from, their celebrity status, networks, perceived 'value for money' and their potential to offer schools a market advantage often mattered more than the extent or form of their knowledge. Participants' constructions also revealed a problematic set of ideas about the nature and purpose of effective health education. In our discussion, we consider whether or not conventional understandings of expertise are redundant in the context of the neoliberal imaginary.

References

Taylor, C. 2004. *Modern Social Imaginaries*. Durham, Duke University Press.

Williams, B.J. and Macdonald, D., 2015. Explaining outsourcing in health, sport and physical education. *Sport, Education and Society*, 20(1), pp.57-72.

*Paper - 25 mins*

*Wednesday 30 May 2018, 5:10pm - 5:35pm, Conference Room II*

**Enright, Eimear** (University of Queensland, e.enright@uq.edu.au)

Non-presenting authors: Anna Hogan, University of Queensland, a.hogan1@uq.edu.au

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Erin Christensen, University of Queensland, e.christensen@uq.edu.au

*Healthy School Architecture: Towards participatory research, policy and design agendas*

A significant body of literature considers if and how various school policies, interventions and stakeholders can contribute towards the creation of a health-promoting school. However, the function of school architecture in the process receives far less attention. The limited research that has been undertaken on healthy school architecture usually focuses on either a single health issue or a single aspect of the environment. There is a dearth of research that adopts a holistic approach to health-promoting school architecture, by considering health in the broadest sense as being

constitutive of physical, mental and social well-being, and recognising the potential role of all school spaces on student health.

While empirical work in the area is lacking there is growing scholarly enthusiasm for refining and growing the evidence base for more holistic health-promoting school architecture that prioritises student health. This literature is consistent in its advocacy for a local, partnership approach to successful, health-promoting school design.

In this paper, we take public school design in Queensland (Australia) as a case and critically engage with some of the complex reasons why this advocacy has not yet translated into practice.

Our policy analysis revealed that while Queensland 'Design Standards for DET Facilities' do name 'health' as an explicit focus and are suggestive of a policy context that is supportive of health-promoting school design, problematic decisions have been made around the responsibility for building public schools. Key amongst these is the outsourcing of the design, construction and maintenance of new schools to an international infrastructure business, who advertise 'common design themes across each school, and standardisation of buildings and efficiencies in construction'.

In this context, we ask whether local, participatory, health-promoting school designs can be economically viable, and consider the 'softer' health costs and inequities associated with public-private partnerships in school design.

*Paper - 25 mins*

*Friday 1 June 2018, 11:00am - 11:25am, Conference Room III*

**Erueti, Bevan** (Massey University, B.Erueti@massey.ac.nz)

*"What's with all the singing and dancing?": Implementing mātauranga Māori through Hauora in a mainstream University degree programme.*

Mainstream tertiary education in Aotearoa New Zealand continues to create and supply 'the world' or 'the real' in the image of westernised perspectives of knowledge, science and 'regimes of truth' (Smith, 1999). This presentation outlines the pedagogy (teaching and learning) and assessment of mātauranga Māori (Māori knowledge and cultural practices) specifically the elements of kapahaka (Māori traditional performing arts), mihimihi/pepeha (tribal expressions) and toi whakaari (performing arts) and their application within the context of Emeritus Professor Sir Mason Durie's Whare Tapa Wha model (see Durie, 1994, 1998).

Utilising a personal reflexivity approach as one of the course constructors, teachers and assessors, I provide a descriptive analysis of my experiences, understandings and interpretations of two Hauora courses that a colleague and I developed for a Sport, Exercise (Science - and Nutrition) degree programme. The first course was developed for third year undergraduate Physical Education major students. The second, a postgraduate course. A definition and examination of the contemporary significance of mātauranga Māori is supplied, highlighting in particular the juxtaposition and convergences between the implementation of the examples of mātauranga Māori aforementioned and the Whare Tapa Wha model and its specific components.

A summary of the challenges is presented, but I argue that the inclusion of these specific Hauora courses can create an environment and opportunity for both Māori and non-Māori students to develop their notions of biculturalism and cultural competency. I conclude that even though mainstream tertiary education has built its own ideologies, creating margins that can be used to justify inequality and to defend privilege it also has the potential to be a tool for cultural regeneration and prepare young people, both Māori and non-Maori in contributing to the bicultural aspirations of 21st century citizenship in the context of Sport and Exercise.

*Paper - 25 mins*

*Wednesday 30 May 2018, 10:45am - 11:10am, Conference Room III*

**Etheredge, Linette** (Monash University, linette.etheredge@monash.edu)

*"It was a good experiment, I actually liked it a lot. Cause I can like express my feelings and sort everything out". (female 14 yrs)*

Risk and harm mitigation tropes continue to dominate sex and relationship education (SRE) discourses in most Australian classroom contexts (Dobson & Ringrose, 2015). These binary conversations stifle critical thinking by deficit framing young people and the many digital practices they engage in to explore their intimate lives (Albury, 2015).

In this paper, I discuss findings from a recent study that challenges the negative framing of young people and their digital practices. The study design employed queer theory (Gilbert, 2014) and creative filmmaking as research method (Ivinson & Renold, 2016). Data were obtained from 12 young people aged 11-14, who produced short films documenting their experiences exploring intimate relationships in digital spaces and beyond.

Findings obtained through a diffractive analysis process (Barad, 2007) suggest that, when self-directed creative filmmaking is employed as pedagogical practice, young people will critically consider aspects of intimate relationships that have relevance to them. I content that self-directed filmmaking offers SRE teachers opportunities to include innovative digital learning practices that engage and entertain young people as they critically explore ideas around intimate relationships.

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*Paper - 25 mins*

*Wednesday 30 May 2018, 3:00pm - 3:25pm, Conference Room III*

**Faustino, Maria João** (University of Auckland, mjcpfaustino@hotmail.com)

*From taboo to trendy: anal sex in women's magazines*

Anal sex is a long stigmatized sexual practice (Gilbert, 1981; McBride & Fortenberry, 2010); however, recent empirical studies suggest an increase prevalence in the practice of anal sex among heterosexual couples (Herbenick et al, 2010; McBride & Fortenberry, 2010). At the same time, anal sex is the object of an unparalleled media attention (Gill, 2007, 193). This shift in western sexual norms and behaviours raise important questions concerning gender, sexual violence and sexual education.

Women's magazines are important cultural resources. Intending to map the representations concerning anal sex in these media sources, I selected *Cosmopolitan* and *Women's Health*. I analysed the articles available in their main websites and present the main themes underpinning the analysed discourses.

Firstly, anal sex is presented as mainstream and a new cultural obsession, synthesized in the formulation 'the anal revolution' (*Cosmopolitan*, 4 March 2015). The magazines' approach is pervasively presented as neutral, often embracing medical discourse and commonly presenting 'facts' and 'information'. Secondly, this 'anal revolution' is not presented as gender-neutral, but as structurally gendered: men are persistently portrayed as 'obsessed', while women are addressed a set of technics and prescriptions concerning hygiene, consumption and sexual safety. The discourses

globally tend to naturalize male aggression, perpetuating stereotypes that support the gendered dynamics of sexual violence.

Gilbert, A. N. (1981). Conceptions of homosexuality and sodomy in Western history. *Journal of Homosexuality*, 6(1-2), 57-68.

Gill, R. (2007). *Gender and the Media*. Polity.

Herbenick, D., Reece, M., Schick, V., Sanders, S. A., Dodge, B., & Fortenberry, J. D. (2010). Sexual behaviour in the United States: results from a national probability sample of men and women ages 14–94. *The journal of sexual medicine*, 7(s5), 255-265.

McBride, K. R., & Fortenberry, J. D. (2010). Heterosexual anal sexuality and anal sex behaviours: a review. *Journal of sex research*, 47(2-3), 123-136.

*Paper - 25 mins*

*Friday 1 June 2018, 11:30am - 11:55am, Conference Room III*

**Fenaughty, John** (University of Auckland, j.fenaughty@auckland.ac.nz)

*Subverting the subversive: Lessons learned in designing and evaluating a pedagogy for deconstructing cisheteronormativity in schools and youth organisations.*

The Inside Out - We all Belong project was a set of lesson resources, including videos, designed to reduce cisheteronormativity, and associated harassment and violence, in schools in Aotearoa New Zealand. This presentation briefly introduces the resources and discusses their construction, noting key considerations from an extensive co-design development process. A key aspect of the design was the pedagogical framework that underpinned the resources. The paper explores the construction of this pedagogy, which drew on a critical pedagogy (e.g., Darder, Baltodano, & Torres, 2003), anti-oppressive education approach infused with aspects of queer theory (e.g., Kumashiro, 2002) and second-order theories of bullying (e.g., Kousholt & Fisker, 2015). Having discussed the rationale for the pedagogy the paper moves to explore the lessons learned from an evaluation.

The paper draws on thematic findings (as per Braun & Clarke, 2013) from interviews with 19 educators who had used the resources in the first year of their release. These educators discussed what they liked and disliked about the resources, as well as their ideas for what might improve the efficacy of the resources. The findings indicate important learnings that may affect the efficacy of such resources to effect change and promote quality learning. The advantages of the resources included the ability to foster learning about oppression, and critical reflection about hegemony, norms and normalcy. Disadvantages were also identified; in particular the [ironic] subversion of the subversive aspects of a critical, anti-oppressive, queer pedagogy. For instance, some educators focussed on terminology and “content knowledge”, ironically re-inscribing a focus on fixed understandings of sex-, gender- and sexuality-diversity. Such a focus on “objective” facts, enabling easier assessment, nonetheless obfuscates the desired focus on social norms and their role in oppression, power and hegemony. Concluding comments consider the implications for educator professional learning requirements, dispositions, and readiness.

*Paper - 25 mins*

*Thursday 31 May 2018, 10:15am - 10:40am, Conference Room I*

**Fitzpatrick, Katie** (University of Auckland, k.fitzpatrick@auckland.ac.nz)

**Wells, Kat** (NZHEA, kwells@lynfield.school.nz)

**Riedel, Rachel**, (University of Auckland, rachel.russell@auckland.ac.nz)

**Webber, Melinda** (University of Auckland, m.webber@auckland.ac.nz)

*Mental health education and hauora: Producing a resource to combine resilience, positive psychology and critical education.*

This presentation shares the results of a collaborative project to produce a resource combining the fields of critical health education, positive psychology, wellbeing education and work in related areas such as resilience, Maori education and hauora. The resulting book -a resource for teachers in schools – will be published by the New Zealand Council for education Research (NZCER) in 2018. In

this session we share the thinking behind this resource and the challenges of combining such diverse fields.

*Paper - 25 mins*

*Friday 1 June 2018, 1:15pm - 2:10pm, Conference Room I*

**Fleming, Teresa** (Victoria University of Wellington, terry.fleming@vuw.ac.nz)

**Stasiak, Karolina** (University of Auckland, k.stasiak@auckland.ac.nz)

Non-presenting author: Katrina Mathers, University of Auckland; k.mathers@auckland.ac.nz

*Supporting students mental health and wellbeing using online approaches: Current practices and developing opportunities*

This will be an interactive, creative workshop exploring current online tools for student's mental health and wellbeing and creating opportunities.

1. Participants will be introduced to evidence, challenges and evolving directions in digital tools for mental health and how these have been used to date in education settings locally and internationally.
2. Participants will be invited to test New Zealand digital health tools from TheLowdown.co.nz and SPARX.org.nz and participate in processes to explore how these tools are and could be used or improved for health education.
3. Participants will be introduced to a working prototype from E Tipu e Rea, the Better Start National Science Challenge. This is a large new project which aims to improve the mental health of Year 9 & 10 students via digital approaches. We will use social innovation strategies and discussion to critically consider how this prototype could be used or improved to fit health and education studies and students priorities.

Participants can expect to be introduced to a range of world leading online mental health and wellbeing tools which can be utilised in health education processes and to contribute to discussion which will inform new research and development projects. Networking and ongoing connections will be enabled.

Participants are encouraged to BYOD and open curious minds!

*Masterclass*

*Thursday 31 May 2018, 11:00am - 11:55am, Conference Room I*

**Fudge, Daniel** (University of Western Sydney, 18238990@student.westernsydney.edu.au)

**Pang, Bonnie** (University of Western Sydney, b.pang@westernsydney.edu.au)

Non-presenting author: Emma George, School of Science and Health, University of Western Sydney

*Young male's perceptions of body image and their body-building practice within a gym setting*

The purpose of this study is to examine young male's perceptions of body image and their body-building practice within a gym setting. Research on male's body image has indicated that more young men are turning towards negative health behaviours such as consuming diet pills, and are internalising unrealistic media representations of an ideal male's body (Edwards, Tod, Molnar, & Markland, 2016). There is also an increasing concern that more young men are experiencing body dissatisfaction, and are using anabolic steroids in body building practices which could develop depression and eating disorders (Griffiths, Henshaw, McKay, & Dunn, 2017). Body dissatisfaction has been linked to negative health conditions (Grogan & Richards, 2002). Recent studies (Andsager, 2014; Perloff, 2014; DeFeciani, 2016) have explored these negative health conditions, however research has focused mainly on females' body image and eating disorders while undermining young male's experiences. Using an ethnographic research method approach (i.e. interviews, observations and field notes), this study aims to explore 12 young male's perceptions of body image and their body-building practice within a gym setting. Drawing on Bourdieu's concepts of capital, this study also seeks to understand how young males invest and accumulate their cultural, social, economic and symbolic capital in their body building practice within a gym setting. Implications for developing positive young male's body image and satisfaction and in relation to a critical inquiry approach to youth health will be discussed.

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*Paper - 25 mins*

*Thursday 31 May 2018, 1:30pm - 1:55pm, Conference Room III*

**Futter-Puati, Debi** (Monash University, [debi.futter-puati@monash.edu](mailto:debi.futter-puati@monash.edu))

*Sexuality and Relationships Education in the Cook Islands*

The objective of this research project was to investigate sex, sexuality and sexual relationships through the voices of young people in the Cook Islands (a small independent nation in the Pacific), to develop a contextually appropriate, needs-led, sexuality and relationships educational resource which would be implemented by educators in the Cook Islands. The research sample consisted of 672 Cook Islanders aged between 15 and 24 years of age who answered 35 questions in a questionnaire, and 97 young people who participated in six focus groups. Participants were drawn from all population settlements in the Cook Islands and encompass more than 20% of the youth population.

Contribution is made to the literature on sexuality by documenting young Cook Islanders sexual subjectivities and how these are shaped by dominant discourses that circulate in the Cook Islands. The research methods were designed to empower youth by using their knowledge and experiences of sex and sexuality education and to identify their perceived needs in these areas. In an attempt to resist dominant medicalised approaches to sexuality education a sex positive resource for educators was developed from the findings that incorporated poststructural and cultural theoretical concepts to support young people to critique dominant discourses.

This paper shares the findings associated with young Cook Islanders' conceptualisations of their sexual knowledge and sexual experiences and reveals that non-monogamy, sexual violence and heteronormativity strongly feature in young Cook Islanders lives. This research therefore has implications for the health and wellbeing of young Pacific people and the ways that they enact gender, sex, sexuality and relationships in their lives.

*Paper - 25 mins*

*Wednesday 30 May 2018, 11:45am - 12:10pm, Conference Room III*

**Gibson, Alexandra** (University of New South Wales, [a.gibson@unsw.edu.au](mailto:a.gibson@unsw.edu.au))

Non-presenting author: Emilie Auton, University of New South Wales, [e.auton@unsw.edu.au](mailto:e.auton@unsw.edu.au)

*A matter of lifestyle? Medical students' perceptions of choosing a speciality*

Selecting a specialisation to practice in medicine is a choice that can appear to be a relatively personal decision based on junior doctors' own preferences. Starting in medical school, previous research has shown that students draw on a range of factors to justify their perceptions of choosing

a speciality, associating particular specialities with certain character traits or lifestyle choices. As a result, certain specialities can appear to be more appealing – or, indeed, accessible – to some medical students and junior doctors than to others. Here we present the findings from a qualitative study we are conducting with fifth- and sixth-year medical students at the University of New South Wales. The aim of this study is to explore medical students' perceptions of choosing a speciality, using a story completion task. This involves participants writing a short story in response to a hypothetical scenario (story stem) about a junior doctor choosing a medical speciality. Each stem offers a slightly modified version of the same story. The focus in this study is on exploring the intersection of gender and associated perceptions of character or life circumstances. The stories therefore differ in terms of how gender intersects with an attribute (ambition) and life circumstance (having children). Using a social constructionist approach to thematic analysis, we critically examine the broader understandings and sets of meaning that participants draw on to narrate and explain this decision. We argue that medical students' perceptions of choosing a speciality are shaped by socially available scripts of choices that are permitted within the confines of normative gender constructions. These broader scripts need to be critically examined, to consider the implications for medical education, and in making different specialities more accessible to a greater range of doctors in training.

*Paper - 25 mins*

*Wednesday 30 May 2018, 2:30pm - 2:55pm, Conference Room II*

**Gustafson, Diana L.** (Memorial University, [diana.gustafson@med.mun.ca](mailto:diana.gustafson@med.mun.ca))

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Lyle Wetsch, Memorial Un

*Toward a critical understanding of professionals' workplace use of digital, social and mobile technologies to address self-directed learning needs*

The use of digital, social and mobile technologies is increasing among health and social services professionals. These technologies offer new avenues for self-directed learning (SDL), an informal form of learning. Research on adult learners' experiences with using these technologies when undertaking SDL is relatively undertheorized.<sup>1</sup>

This four-phase, mixed methods case study explored factors that influenced professionals' SDL perceptions, experiences and use of digital, social and mobile technologies. This paper will examine some practical, professional and ethical concerns expressed by health and social service professionals using digital, social and mobile technologies to engage in SDL in the workplace.

Guided interviews were conducted with 9 physicians, 20 nurses, 4 pharmacists and 22 social workers. Interviews were transcribed verbatim and imported into NVivo. First-level coding by independent coders resulted in a 6-node structure, including two focused on factors influencing the use of digital, social and mobile technologies. Preliminary results of second-level coding of those nodes provide insight into professionals' perceptions and experiences with using digital, social and mobile tools/platforms to address personal, client and institutionally-driven learning needs.

Some practical issues are ease of use, digital literacy, level of satisfaction, credibility and accessibility of information, and institutional and collegial support for using technologies in the workplace. Of particular interest are concerns about professionalism and ethical practices and how the use of technology is perceived by clients and colleagues.

Adult health learning theory 2 is a critical approach to informal learning and will be used to theorize issues of power and resistance revealed in professionals' lived experiences using digital, social and mobile technologies to engage in SDL in the workplace. Such framing has the potential to identify those generative mechanisms that facilitate or impede self-directed learning for health and social service professionals working in the ever-changing digital environment.

1 Merriam, S.B., & Bierema, L.L. (2014). *Adult learning: Linking theory and practice*. San Francisco: Jossey-Bass.

2 English, L.M. (2015). *Adult health learning*. In O. Mejiuni, P. Cranton, O. Táiwò (Eds.). *Measuring and analyzing informal learning in the digital age* (pp. 169-179). IGI Global. DOI: 10.4018/978-1-4666-8265-8.ch012

*Paper - 25 mins*

*Wednesday 30 May 2018, 3:00pm - 3:25pm, Conference Room II*

**Hartung, Catherine** (University of Otago, catherine.hartung@otago.ac.nz)

**Hendry, Natalie** (Deakin University, natalie.hendry@deakin.edu.au)

**Welch, Rosie**, (Monash University, rosie.welch@monash.edu)

*Ashy Bines and getting fit online: expanding the conversation around young women's engagement with fitspo*

The last decade has seen an overwhelming rise in the popularity of online health and fitness education and inspiration—commonly described as ‘fitspo’, ‘thinspo’, or ‘thinspiration’—via social media sites such as Instagram, Facebook, and Pinterest. Recent academic engagement with this online phenomenon has primarily focused on the potential harms to young women’s body image, as well as its role in exacerbating issues for those with eating disorders (see, for example, Cobb, 2017; Depper & Howe, 2017; Simpson & Mazzeo, 2017; Jong & Drummond, 2016; Hefner et al, 2016; Knobloch-Westerwick, 2015). Mimicking long-held criticisms of the impact of women’s print media, the criticisms of fitspo see young women at risk of unfairly comparing themselves to the seemingly unrealistic (buffed and filtered) ‘skinny’ and ‘fit’ bodies and highly curated lifestyles that are promoted and circulated online. While these critiques are important, they also present a fairly narrow reading of what are very complex online cultures and communities. In this paper we seek to expand beyond this criticism to consider the multifaceted ways in which fitspo, in particular the fitspo produced by young entrepreneurs like Gold Coast ‘fitness guru’ Ashy Bines and her Australian peers, works in contemporary contexts. We examine online presence of these Aussie fitness gurus on multiple social media platforms through three analytical angles. The first angle examines how Bines’ entrepreneurial background and brand of fitspo is produced within and contributes to the trillion-dollar wellness industry that competes with and can even replace institutionally-established forms of nutrition, health, and fitness education. The second angle examines how Bines’ ‘expertise’ is made possible via the creation of intimacy with her followers and thus authenticity, especially through her online documentary series ‘Ashy Bines Raw’. The third angle examines how Bines, as a social media ‘influencer’, is situated within a distinct Australian vernacular related to class and culture. To conclude we bring these three analyses together to explore the implications for critical health education.

*Paper - 25 mins*

*Friday 1 June 2018, 10:30am – 10:55am, Conference Room III*

**Haynes, Nalini** (University of Canberra, Nalini.Haynes@canberra.edu.au)

*Building resilience into ‘outsider’ teenagers via young adult literature*

Representations of people with disabilities in popular culture can contribute to their stigmatisation and marginalisation, positioning them as Other. My thesis research is directed at identifying and critiquing the portrayal of people with albinism in speculative fiction.

In fiction stories and especially speculative fiction, there is a tendency for albinism to be used as shorthand for evil and for misunderstandings about albinism to be rendered as people with albinism being ‘creatures of the night’ or assassins, while often misrepresenting the medical condition by omitting visual impairment that is linked to significant hypopigmentation. This leads to increased marginalisation, misunderstandings and even prejudice against teenagers with albinism at a crucial developmental time.

Young Adult literature (YA) has been used overtly and incidentally to help build resilience in teenagers as well as educating or reinforcing the prejudice. Some YA has sought to represent

albinism positively with side characters and even protagonists being assigned the 'albino' label. However, these representations tend to be somewhat mixed due to misunderstandings of the condition and a tendency to comply with David Bolt's (2005) occularcentric social aesthetic and Paul Darke's (1998) normality drama tropes.

Using illustrations from YA literature including Nnedi Okorafor's *Akata Witch* (2017) and Anna Smaill's *The Chimes* (2015), I will discuss the pros and cons of this new wave of literature, how it can help and how it can hinder the outsider child or teen's self-image, resilience and healthy integration into his or her community.

Bolt, D. (2005). From blindness to visual impairment: terminological typology and the Social Model of Disability. *Disability & Society*, 20(5), 539-552. doi:10.1080/09687590500156246

Darke, P. (1998). Understanding cinematic representations of disability. *The disability reader: Social science perspectives*, 181-197.

Okorafor, N. (2017). *Akata Witch*: Penguin.

Smaill, A. (2015). *The Chimes*. Sydney: Hodder & Stoughton.

*Paper - 25 mins*

*Wednesday 30 May 2018, 5:10pm - 5:35pm, Conference Room III*

**Ireland-Smith, Therese** (Cognition Education, TIreland-Smith@cognitioneducation.com)

**Davey, Annie** (Ministry of Health, annie\_davey@moh.govt.nz)

**Wynd, Donna**, (Health and Wellbeing for Learning (HPS), Cognition Education, DWynd@cognitioneducation.com)

*Voices from New Zealand primary schools. "Are we doing more for these kids – yes. Are we doing enough – no."*

This session is particularly relevant for teacher educators providing professional learning and support to school staff, and for health and wellbeing services operating in schools and the community.

Health Promoting Schools (HPS) Health and wellbeing for learning supports school communities to identify and determine their own health needs and develop and implement strategies to address them. The Ministry of Health funds the (HPS) health and wellbeing for learning initiative that is delivered to schools by DHBs throughout New Zealand. This session reports on the voices gathered by independent researchers contracted by the national leadership and co-ordination service (NLCS) for HPS, a survey and our response to their needs.

Feedback from school communities

In March -May 2018 feedback was sought from school leaders, school staff, children and whānau to help understand what is important for children's health and well-being.

The researchers spoke with students, whānau, teachers/teacher aides and school leaders/board of trustee members and staff in 27 schools. They also had conversations with education, social service and health specialists in schools. Students were spoken to using simple questioning, projective and creative techniques that were appropriate for their age.

The qualitative feedback indicated that many stakeholders are experiencing frustrations with the system of support and resources for students with complex and challenging needs. This included schools themselves and the organisations providing the support.

Health and wellbeing for learning (HPS) also conducted a national survey of school leaders to quantify the scale and range of issues schools are facing with regards to supporting students with complex and challenging needs.

The combined voices from around the country and survey painted a complex picture. This included the need to put in place resources/programmes enabling school staff and leaders to nurture their own wellbeing and opportunities to upskill in effective techniques for managing students with complex and challenging needs.

Nationally HPS has used the qualitative and quantitative evidence to co-design better coordination of services with schools and agencies and staff that will:

- improve responsiveness of agencies
- remove obstacles
- develop ways to use resources more wisely
- improve staff wellbeing

*Paper - 25 mins*

*Wednesday 30 May 2018, 5:10pm - 5:35pm, Conference Room I*

**Ireland-Smith, Therese** (Cognition Education, TIreland-Smith@cognitioneducation.com)

**Davey, Annie** (Ministry of Health, annie\_davey@moh.govt.nz)

*Health and wellbeing for learning: Shifting power and outcomes for all*

This session aims to share the theory for improvement underlying New Zealand's health and wellbeing for learning (Health Promoting Schools) approach, the research, tools and significant evidence of positive impact on outcomes for students, their whānau families and staff in schools. Health and wellbeing for learning is based on long standing international and New Zealand-based educational research about the factors that influence student outcomes. Evidence and school community case studies will demonstrate that students achieve the best educational outcomes when their health and wellbeing is nurtured by the school, whānau (family) and wider community. Shifting and sharing power to enable school communities to identify and resolve their own health priorities at local, regional and national level is challenging; we are still on a journey. We will describe the evidence, tools and significant quantitative and qualitative evidence that have enabled us to respond to and demonstrate the impact of health and wellbeing for learning.

*Paper - 25 mins*

*Thursday 31 May 2018, 3:00pm - 3:25pm, Conference Room III*

**Kruger, Debra** (University of Toronto, debra.kruger@utoronto.ca)

*Cruel healthism: Making sense of embodied risk*

Crawford (1980) states that "the loss of control over health is eased by its endless pursuit" (p383). We do not have control over our health outcomes, but the illusion of having control through 'healthy choices' brings us comfort and order. If our bodies are not in immediate ill health, they are always at risk of becoming unhealthy. Risk which requires each of us to be able to identify discrete 'before's and 'after's and identify what it is that occurred in between (Luhmann, 1993), and which requires us to make sense of incredibly chaotic information that makes up biopedagogies.

Thirteen participants sculpted and life-lined, an innovative method, to share their stories of what health risk means to them; how ideas of luck and chance, or control and fate play into 'health'; and how folks end up with non-communicable diseases.

Many participants grappled with ideas of routine and habit, and many mentioned a kind of 'shadow life' (borrowed from Phillips, 2012) that ran tandem to their own and influenced their experiences; life that was promised to them if they followed health rules, but one which never arrives, akin to Berlant's (2011) strife for the good life. This presentation gives an overview of how participants expressed their ideas of the past, present, and future body's relationship to health by compiling their thoughts on routine, luck, fate, control, time, and health.

References:

Berlant, L (2011). *Cruel Optimism*. USA: Duke University Press.

Crawford, R. (1980). Healthism and the medicalization of everyday life. *International Journal of Health Services*, 10(3), 365-388.

Luhmann, N (1993). *Risk: A Sociological Theory*. New York, USA: Walter de Gruyter, Inc.

Phillips, A (2012). *Missing Out: In Praise of the Unlived Life*. New York, USA: Picador Philosophy.

*Roundtable*

*Thursday 31 May 2018, 9:45am - 10:40am, Conference Room III*

**Kruger, Debra** (University of Toronto, [debra.kruger@utoronto.ca](mailto:debra.kruger@utoronto.ca))

*What's playdough got to do with it? Sculpting and life-lining as method for critical health research*

"Bodies touch at language's sensual limits" (Manning, 2006, pg 85).

There are many ways of researching and knowing. Touch is an important sensual knowledge difficult to implement as a research method, but with great ontological and epistemological potential.

During this methodological workshop, you will engage with my original methods of sculpting and life-lining, inspired by Gastaldo, Magalhaes, Carrasco & Davy (2012)'s body-maps, Bagnoli's (2009) timelines, and Longhurst's (2000) life maps. We will explore how and why the methods harness four cornerstones of (1) tactility/embodiment, (2) imagination, (3) absurdity, and (4) creativity to offer new, exciting ways of knowing to critical health research projects.

Sculpting and life-lining were originally used to explore embodied uncertainty, time, and health risk. This workshop will invite participants to sculpt and life-line (get ready to play!) to reflect on their own embodied understandings while showcasing the theory behind the methods' strengths, sharing some research results and experiences, and opening methodological discussions.

My introduction of these methods has been well received by public health practitioners and critical qualitative health researchers and scholars in Canadian fora, and there is growing interest in and use of them as both a research and pedagogical tool.

References:

Bagnoli, A (2009). Beyond the standard interview: The use of graphic elicitation and arts-based methods. *Qualitative Research*. 9: 547-570.

Gastaldo, D, Magalhaes, L, Carrasco, C, & Davy, C (2012). Body-map Storytelling as Research: Methodological considerations for telling the stories of undocumented workers through body mapping. Retrieved from <http://www.migrationhealth.ca/undocumented-workers-ontario/body-mapping>

Longhurst, R (2000). *Bodies: Exploring Fluid Boundaries*. London, UK: Routledge.

Manning, E. (2006). Engenderings: Gender, Politics, Individuation (pp 84–109). In Manning, E. (2006) *Politics of Touch: Sense, Movement, Sovereignty*. USA: University of Minnesota Press.

*Workshop*

*Thursday 31 May 2018, 3:40pm - 5:10pm, Conference Room II*

**Land, Nicole** (University of Victoria, [nland@uvic.ca](mailto:nland@uvic.ca))

*Doing post-developmental fat(s) in early childhood education*

Responding to Euro-Western conceptions of childhood obesity that understand fat within developmental narratives, as biochemically consequential, and as a marker of individualized responsibility, this paper articulates 'post-developmental fat(s)' as fat(s) that trouble the logics, practices, and relationships required to understand fat as obesity. Drawing in multiple fat(s) generated in a pedagogical inquiry with early childhood educators and children in Canada, I take seriously how fat(s) matter momentarily amid intentional, speculative, and deeply politicized pedagogical practices oriented toward doing fat(s) differently. I integrate feminist science studies (Haraway, 2016; Willey, 2016) with post-developmental pedagogies (Blaise 2014; Rautio & Jokinen, 2015) to trace how post-developmental fat(s) demand active, ongoing, intentional, and uncertain practices capable of critically thinking with fat(s).

As post-developmental pedagogies are constantly negotiated, intentional, demanding endeavours (Pacini-Ketchabaw et al., 2016), I emphasize the ongoing work of making post-developmental fat(s). I make visible how, with children and educators, situated methods of valuing fat(s) produced questions of fitting fat(s) and how modes of tending fat(s) generated specific possibilities for counting fat(s). Foregrounding questions of how fat(s) happen and what fat(s) can do in early childhood education, I forward post-developmental fat(s) as a verb, as a labour with fat(s), as a practice of actively making and relating with fat(s).

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*Paper - 25 mins*

*Thursday 31 May 2018, 12:00pm - 12:25pm, Conference Room III*

**Leahy, Deana** (Monash University, deana.leahy@monash.edu)

**Wright, Jan** (University of Wollongong, jwright@uow.edu.au)

**Burrows, Lisette**, (University of Waikato, lisette.burrows@otago.ac.nz)

*Cruel optimism? Socially critical research and obesity in schools*

Childhood overweight and obesity concerns are relentlessly shaping what goes on in the name of Health Education in Australia and New Zealand (Burrows, 2010; Leahy & Pike, 2015). Drawing on well-worn assumptions that knowledge about 'good' food and physical activity can breed healthier (and lighter) selves, Health Education as a field promises much (Leahy et al, 2016). As Gard and Pluim (2014) suggest, however these aspirations are rarely lived out in schools. Indeed, following Berlant (2011), the repetition of promises about the benefits of health education can be regarded as an act of 'cruel optimism' that may actually impede its flourishing (Leahy et al, 2016). Socially critical scholars in Health and Physical Education have been raising questions about the ethical, moral and social consequences of charging schools with the burden of ameliorating an 'obesity' problem for years, yet there is little sign of any substantial shift in the thinking that drives obesity strategies and policies in and around schools. In this chapter, we map the key streams of socially critical research that have endeavored to disrupt normative assumptions about health education's role in obesity prevention. Have these projects been helpful in generating alternate understandings about education, health, obesity and children? Has decades of critique made any difference to how teachers and students think and do their work? Drawing on exemplars from our own and others' practice, we interrogate the extent to which socially critical obesity work, and post-structural work, in particular, can yield social change. Can our own repetitive aspirations to disrupt dominant discourses be regarded as yet another exemplar of 'cruel optimism' or can a flourishing body of critical enquiry actually do something in and for Health Education and the young people at its center?

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*Paper - 25 mins*

*Thursday 31 May 2018, 3:00pm - 3:25pm, Conference Room III*

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Hurimoana Dennis, Te Puea Memorial Marae, hudee@xtra.co.nz

*A kaupapa Māori response to homelessness: Te Puea Memorial Marae*

This paper presents a kaupapa Maori response to homelessness, based on the cultural concept of manaakitanga (care and hospitality) as enacted by Te Puea Memorial Marae (TPMM) in provision of homeless in New Zealand. Articulated as a radical indigenous innovation because of its disruptive nature to the public homeless and housing discourses in New Zealand, the work of TPMM has been recognised and supported by two-year research project by the New Zealand National Science Challenge 'Building better homes towns and cities: Kainga Tahī, kainga rua'. In this paper the leader and Chairperson of the marae and researchers present the highlights of the marae-led programme and initial research findings in a effort to share insights into successful strategies that promote health and well-being for our most vulnerable whānau.

Te Puea Marae is located in Auckland, the largest urban city in New Zealand, and the city with the most critical housing shortage and overheated house prices. Auckland is the least affordable place for Māori in New Zealand, but home to the largest Māori population of any region (25% of all Māori), with the expectation that this number will grow 60% by 2038 (Te Puni Kokiri, 2016). Currently, 58% of homeless people in Tāmaki are Māori (Housing First, 2017).

In the legacy of a great Maori woman leader, Te Puea Herangi, in 2016 TPMM answered the call of homeless people and families by voluntarily opening their doors to those seeking emergency housing. In doing so, TPMM completely disrupted the dominant Auckland housing discourse, by making visible and naming the 'crisis' for our most vulnerable families. More importantly, TPMM demonstrated that Māori can be an integral part of urban housing and social solutions. Within the cultural framework of manaakitanga, TPMM provided an indigenous innovative intervention that successfully assisted 130 family members into long-term housing solutions and is involved in a second phase this year.

Manaakitanga, on which the model is based, is an ancient Maori tradition and a core function of a marae. Beyond the provision of physical shelter, the marae (as cultural bastions and safe havens in urban settings) was able to support whānau (extended family) transformation in a way that was fundamentally different to the conventional practices of local and government agencies.

Manaakitanga ensures a holistic approach to caring for people that goes beyond providing a 'roof over your head'. The practice of manaakitanga at marae includes social, cultural, spiritual, educational and economic support that builds resilience and ensures families are prepared to assume long term secure housing tenures. Underscored by Māori philosophies, values and beliefs, the social investment of marae that enabled whānau to be self-determining, secure, participatory, and proactive caretakers of each other and the world around them, the TPMM initiative has been a game changer in New Zealand.

*Paper - 25 mins*

*Thursday 31 May 2018, 11:30am - 11:55am, Conference Room II*

**Levy, Gary** (Deakin University, glevy@deakin.edu.au)

*No 'body' or 'mind' to speak of: seeking and refin(d)ing the open whole*

Language typically employed to reference our apparent physiology, anatomy, health, movements, physicality and ontology almost invariably falls into the trap of reproducing 'mind-body' duality, even when seeking to bridge, or overcome, such division. This problem might be as much to do with the limitations of existing vocabulary available to describe what we experience and come to know of/in/through ourselves. F.M. Alexander (1932/1985) pioneered a way of assisting people to organise and operate themselves in ways that can enhance and maintain their 'psycho-physical integrity' and indivisibility. We can benefit from being reminded how that psycho-physical integrity manifests and works for us, and what it feels like (Dewey, 1928). Alexander also recognised the limitations of language in this regard, and began using his hands to instruct his pupils.

In this workshop, participants will be guided through a series of experiential, hands-on activities based on the principles of the Alexander Technique (Alexander, 1932/1985; Jones, 1975). We will work from the premise that there is nothing useful or beneficial in thinking about ourselves as 'a body' separate from 'the mind'. From this subversive premise, we will become more aware of the non-sense of any non-unitary conception of the self. One of the problems with the 'bodily' and 'discursive' turns in the social sciences and education (Foucault, 1977, 1980; Grosz, 1994) is the way they either perpetuated false dichotomies, or reversed the dominant hierarchy (reordering 'body' over 'mind'). More recent work in philosophy (Frost, 2016; Grosz, 2017), critical theory (Colebrook 2014; Massumi, 2015), educational theory (O'Donnell, 2017; Roth, 2017) and physical culture studies (Fullager, 2017) has produced promising ruptures and punctures, opening up new possibilities and different potentialities. Even if we don't create any new words in the workshop, we still might be able to shake loose certain misconceptions and unwanted habits, the better to glimpse some fresh and alluring ways of be(com)ing, thinking/knowing, expressing, connecting, and relating.

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#### *Workshop*

*Thursday 31 May 2018, 3:40pm - 5:10pm, Conference Room III*

**lisahunter** (Monash University, lisahunteracademic@gmail.com)

#### *Sensing, difference, health and movement: the taste for a queer ontological project?*

Responding to calls for a diverse critical health education with explicit political intents such as addressing identity diversity (eg Fitzpatrick & Burrows, 2017; Leahy & Simovska, 2017; Leahy, Wright & Penney, 2017; Azzarito, Simon & Marttinen, 2017) this paper offers a set of suggestions for praxis after an attempt at sensorily emplaced work designed to challenge ontological assumptions of students. I argue for health education to consider the role of offering alternative social and cultural sensory communities (Vannini et al, 2012) to explore the multisensory nature of human experience and learning (Fors, Bäckström, & Pink, 2013; lisahunter & emerald, 2016) and the connectedness within and between humans, things and spacetime. It is an attempt to continue to explicitly question

the premises and assumptions used to legitimate particular practices (from policy to learning moments) in health education, physical education and attempts to integrate/connect the two, within normative and queer projects.

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*Paper - 25 mins*

*Wednesday 30 May 2018, 4:40pm - 5:05pm, Conference Room III*

**Martinson, Marty** (San Francisco State University, [martym@sfsu.edu](mailto:martym@sfsu.edu))

Non-presenting author: John Elia, San Francisco State University, [jpelia@sfsu.edu](mailto:jpelia@sfsu.edu)

*Ecological and political economy lenses for school health education: A critical pedagogy shift*

This conceptual paper critically examines the limitations and potential harms of school health education in the U.S. and presents alternative approaches for more critical and just health education. U.S. schools have been tasked with providing health education that is primarily rooted in individualistic approaches – approaches that are often ineffective, unrealistic and victim-blaming. Missing from this type of health education is recognition of the social and structural determinants of health that greatly influence one's ability to practice the health behaviors that are so often promoted in schools. This raises pedagogical and ethical concerns, which can be addressed by teaching health education that is grounded in ecological and political economy understandings of health and in critical pedagogies that allow students to more comprehensively and accurately understand health, how their worlds influence health, and their agency within those worlds. This paper offers justification for a critical model of school health education and for the professional preparation of school health educators. It complements other research on critical health education by adding explicit integration of the ecological model and political economy theory within critical pedagogies.

*Roundtable*

*Thursday 31 May 2018, 9:45am - 10:40am, Conference Room III*

**Mather, Zane** (Education Review Office, [zane.mather@ero.govt.nz](mailto:zane.mather@ero.govt.nz))

Non-presenting author: Rebecca Bjarnesen, Education Review Office, [rebecca.bjarnesen@ero.govt.nz](mailto:rebecca.bjarnesen@ero.govt.nz)

*"We did a lot on sex education – not so much on sexuality education": Evaluating sexuality education in New Zealand schools*

In Terms 2 and 3, 2017, the Education Review Office (ERO), as part of its ongoing focus on student wellbeing, conducted an evaluation of sexuality education in primary and secondary schools across New Zealand. ERO's previous (2007) evaluation of sexuality education found that the majority of programmes were failing to meet the wellbeing and mental health needs of diverse groups of learners, including sexuality- and gender-diverse students, Māori and Pacific students, and students

with additional learning needs. The 2017 evaluation, therefore, had a particular focus on the effectiveness of sexuality education for diverse learners.

To ensure that diverse stakeholder perspectives were included, evaluators engaged a wide range of stakeholders in the development of the evaluation framework and the co-construction of indicators of effective practice in sexuality education. These stakeholders included the Ministries of Education, Health, and Social Development, the University of Auckland, and non-governmental organisations supporting:

- Māori sexuality education
- Pacific sexuality education
- General sexual health promotion
- Sexuality- and gender-diverse learners

Evaluators privileged student voice in the data collection process, in particular the voices of sexuality- and gender-diverse students as well as feminist and peer support groups.

Evaluation findings showed that insufficient progress had been made nationally to ensure diverse groups of learners receive the inclusive and comprehensive sexuality education to which they are entitled.

Even relatively well performing schools do not pay sufficient attention to the relevance of their health curriculum for sexuality- and gender-diverse students.

The findings related to effective practice in a small number of schools provide insight into how schools can better meet the needs of their sexuality- and gender-diverse students. In these schools, leaders supported student leadership, nurtured diverse students' agency and provided opportunities for students to have input into both the formal curriculum and the promotion of an inclusive school culture.

*Paper - 25 mins*

*Thursday 31 May 2018, 9:45am - 10:10am, Conference Room I*

**McCuaig, Louise** (The University of Queensland, l.mccuaig@uq.edu.au)

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Anthony Rossi, Western Sydney University

Doone Macdonald, The University of Queensland, d.macdonald@uq.edu.au

*Teachers Health Work Spectrum*

Against an international background of concern about the health of children and the implications for shaping productive young people, schools have been increasingly co-opted into national public health agendas. Consequently, we argue there is a need to understand the 'health work' undertaken by teachers in schools. Australian researchers undertook an investigation of this complex dimension of teachers' work. A classification tool that captures and defines the nature and scope of teacher's health work will be presented in this paper. The Teachers Health Work Spectrum was constructed according to interview, observation and time-use diary data gathered within the context of the Teachers as Health Workers project. Initial development of the spectrum adopted a grounded theory approach, with further clarification provided by the Health Promoting Schools Model (WHO, 1998) and Genealogy of Subjectification concepts (Rose, 2000).

The resulting spectrum comprises of six domains that include: Classroom based Health Education; Enacting Safe and Healthy Curriculum; Incidental Health work: Health orientated caring teaching; Formal Health Policy: Within School; Formal Health related policy: Sector level; Multi-sectoral Health and welfare intervention. Case studies from each domain will be presented in this paper. This presentation will then focus attention on the critical potential of Rose's (2000) Regimes of Personhood concepts to reveal the person and institutional costs of health oriented caring teaching. In conclusion, we argue that in the increasingly complex and performative role of contemporary school teaching, the Teachers' Health Work Spectrum provides education and health personnel a useful tool for clarifying and critically evaluating the amount and nature of health work undertaken by schools and their teachers.

*Paper - 25 mins*

*Wednesday 30 May 2018, 3:40pm - 4:05pm, Conference Room II*

**McGlashan, Hayley** (University of Auckland, h.mcglashan@auckland.ac.nz)

*Queer teachers in schools: Exploring the complexities of teachers in a school Queer Straight Alliance.*

This presentation reports on a critical ethnographic study with queer youth in a co-educational secondary school in Auckland, New Zealand. The focus of this research was to explore how LGBTQ students actively negotiate their queer identities within the performative space of the schooling environment.

The primary space of observation was the schools Queer Straight Alliance (QSA). Gay-Straight Alliance (GSA) or Queer- Straight Alliance (QSA) (Quinlivan, 2015; Quinlivan, 2013) groups have been around for some time. They vary considerably in their makeup and intention (See Quinlivan, 2015; Quinlivan, 2013; Talburt and Rasmussen 2010; Kosciw et al 2010; Youdell 2011; Mayo 2009) but are commonly extracurricular, student-centred groups where (LGBTQ) students, along with their heterosexual and questioning allies, gather for conversation, learning activities, and mutual support (Mayo Jr., 2013).

The QSA at this school has been running for over five years however, in 2016 the number of teachers who regularly attended the group increased from one to seven. In this presentation, I will explore the phenomenon of the increased numbers of teachers who attended the weekly QSA meetings and the complexities which arose as a result of these changing dynamics.

Drawing on Foucault's conceptualisation of power and knowledge I will discuss questions such as; Why were the teachers joining the group? What effect did their presence have on the workings of the group and the students? How did the teacher's involvement in the group impact their own sex, gender and sexual identity? And, how did the power relations within the group change because of the growing number of teachers attending?

*Paper - 25 mins*

*Wednesday 30 May 2018, 11:45am - 12:10pm, Conference Room II*

**Miller, Margaret** (Edith Cowan University, m.miller@ecu.edu.au)

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*What motivates and supports primary school teachers to teacher nutrition?*

Nutrition education is critical to children developing knowledge, attitudes and skills to support a healthy lifestyle. Nutrition forms only a small part of the primary health curriculum, yet it could be incorporated in many learning areas in a cross-curriculum approach to increasing student nutrition literacy. The choice of what and how to teach nutrition in primary schools rests largely with the classroom teacher. Our research seeks to understand factors that motivate and support primary teachers to include nutrition in their teaching, using a motivation model first applied in the alcohol and drug field<sup>1</sup>. The model suggests that non-expert health educator motivation is influenced by constructs of role adequacy and role legitimacy; in turn influenced by role support, experience and content education. This paper will present the results of formative interviews with 20 West Australian pre-service and practicing primary teachers, and an online survey of an additional 200 designed to assess the model for teachers. The interviews helped to identify contextual items for a standard questionnaire related to the model as well as provide examples of the model constructs in practice. The survey has highlighted the importance of teacher experience in determining feelings of role adequacy and of role support in feelings of role legitimacy to teach nutrition. The results of structural equation modelling now underway to identify the relative impact of each construct on motivation to teach nutrition will be reported for pre-service and practicing teachers. By identifying the relative importance of these constructs for each group, our research will help to identify the professional support needed to build motivation of teachers to teach nutrition.

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*Paper - 25 mins*

*Thursday 31 May 2018, 2:30pm - 2:55pm, Conference Room III*

**Miller, Margaret** (Edith Cowan University, m.miller@ecu.edu.au)

Non-presenting authors: Samantha Baker, Edith Cowan University, samantha.baker@ecu.edu.au

Amanda Devine, Edith Cowan University, a.devine@ecu.edu.au

*Development of a food and nutrition curriculum framework for Australian schools*

Recent introduction of the Australian Curriculum to schools provided a new opportunity to integrate teaching of food, nutrition and healthy eating in a range of learning areas to increase nutrition literacy of school children. This paper describes development of a K-10 Food and Nutrition Curriculum Framework to underpin this teaching; with specific objectives to define the key themes, messages and content needed to develop appropriate attitudes, knowledge, understanding, skills and critical analysis as children move from kindergarten to year 10.

An international literature review was undertaken to identify descriptive, empirical and theoretical studies which addressed these objectives. The outcome was a draft scope and sequence of key content across four themes and five developmental stages. To refine and validate this draft framework for the Australian context, 29 experts in nutrition and education participated in a two-round Delphi process and stakeholder workshop. They also helped to identify 1-2 key messages for each theme in each of the five developmental phases to guide lesson development.

Presentation of this paper will describe and justify the four themes (food and drink source, choice, experience and health) and five developmental stages defined in terms of school year levels. It will provide examples of food and nutrition content and key messages at each developmental stage; and how these have been applied to guide development of Refresh.ED, a suite of online teaching and learning materials which use food and nutrition to address content descriptions in the Health and other learning areas of the Australian Curriculum.

Overall, the project provided scaffolding needed to build nutrition literacy as children move through schooling. The framework has been applied in an Australian context yet its foundation in child development, nutrition education theory and pedagogy provides potential for its application in other settings and cultural contexts.

*Paper - 25 mins*

*Friday 1 June 2018, 2:15pm - 2:40pm, Conference Room II*

**Mulholland, Monique** (Flinders University, monique.mulholland@flinders.edu.au)

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Enaam Oudih, Manager PEACE Multi-cultural services, Relationships Australia (SA), e.oudih@rasa.org.au

*What works?: Sexuality, Intergenerational Conflict and Culturally Diverse Communities*

The role of parent-child communication about issues of sex and sexuality began to receive attention in the late 1990's, arguing that open dialogue plays a vital role in Sex Education and Sexual Relationship Education. However, the insights gained from this literature have been under-researched in CALD families, and very few large-scale empirical studies have been undertaken in Australia or internationally. Research tells us that family relationships in CALD families are often troubled by intergenerational conflict - however, there are currently no resources for CALD communities and practitioners, nor is there a body of research to theorise solutions. As such, this paper provides exploratory insights from a pilot study currently underway in South Australia in

collaboration with Relationships Australia. This study will form the basis of an Australia wide project exploring the following research question: What role does sex and sexuality play in intergenerational conflict in different ways, in different communities? Across a fascinating set of reflections from workshops with CALD mothers, fathers and young people, this paper reflects on tensions, conflicts and misunderstandings which emerge about issues of sex and sexuality, as well as exploring community-based strategies to overcome the tensions.

*Paper - 25 mins*

*Wednesday 30 May 2018, 12:15pm - 12:40pm, Conference Room II*

**Neary, Aoife** (University of Limerick, aoife.neary@ul.ie)

*Teaching about Gender and Sexuality in Higher Education: A Question of Empathy?*

Empathy — understood as the ability to understand and share the feelings of another — has long been recognised as a crucial learning objective in teaching about diversity and difference in education. It has also been advocated as a pedagogical method; a strategic empathy that has the potential to interrupt privilege and promote socially just perspectives (Zembylas 2012). Inspired by an interrogation of the limits of queer pedagogy (Allen 2015), I explore the limits of empathy as a pedagogical method, specifically, in educating teachers about gender and sexuality. In order to think through how empathy functions and its discursive effects, I draw on a selection of accounts from three qualitative projects that focus on gender and sexuality in education in Ireland. The first project explored the perspectives of ten pre-service teachers as well as my reflections on the gender and sexuality component of a Diversity in Education module taught by me in 2015. The second investigated how 46 parents, teachers and principals understood homophobia and transphobia in primary school settings (2016). And, the third inquired into how gender identity and gender norms in primary schools were understood from the perspectives of teachers, principals and the parents of trans\* children (2017). Illustrative moments from these accounts alongside some personally catalytic observations facilitate a discussion of the discourse of empathy; its place in teaching about gender and sexuality in higher education and the ways in which its reliance on identification with and knowledge of individual subjects has potentially de-politicising effects.

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*Paper - 25 mins*

*Thursday 31 May 2018, 1:30pm - 1:55pm, Conference Room II*

**Newman, Christy** (UNSW Sydney, c.newman@unsw.edu.au)

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Peter Aggleton, Centre for Social Research in Health, UNSW Sydney, p.aggleton@unsw.edu.au

*Accounting for memories of belonging among two generations of queer school kids*

This presentation will explore how memories of belonging figured in interviews with two generations of gender and sexual minority youth in Australia. It draws on findings from the 'Queer Generations' study, the first to document accounts of growing up LGBTIQ in regional and metropolitan Australia, among those born in either the 1970s or 1990s. The study provides a unique opportunity to better understand the political, social and cultural conditions, including different systems and contexts of support that have shaped possibilities for belonging among queer young people at these times. Fieldwork took place in three Australian states, but this analysis focuses in detail on data collected in New South Wales, where 32 participants took part in focus group or individual interviews between August 2016 and April 2017. Participants identified with a wide range of sexual and gender identities, especially in the younger generation, and represented a diverse range of cultural/ethnic identities. Interviews explored participants' experiences of and views on

health, kinship, schooling/education, communication technologies, work, and sex. This presentation will focus on accounts of 'belonging' within and across these different conceptual lenses, with a particular focus on schooling and education. Understanding modes of belonging among gender and sexual minority youth demands a socially and historically situated reading of the factors that have shaped sexual citizenship at the time young people transition into adult life. Our analysis highlights some of the implications for modes of health and wellbeing education that are responsive both to the diversity of queer young people's experience and the opportunities that exist within and beyond schools.

*Paper - 25 mins*

*Wednesday 30 May 2018, 4:10pm - 4:35pm, Conference Room III*

**Ollis, Debbie** (Deakin University, [debbie.ollis@deakin.edu.au](mailto:debbie.ollis@deakin.edu.au))

*The importance of feminist pedagogies in health education. 'Fake news' and the challenge for respectful relationships education in schools.*

In the early 1980's Victoria, Australia had a well-established and comprehensive approach to gender equity. Every government school had a gender equity officer; every region had between one and three school support Centre's which housed gender equity consultants who worked directly with schools on gender equity policy, gender inclusivity and dealing with gender based violence, particularly sexual harassment. Between 1992 and 1999 the then premier Jeff Kennett dismantled the entire system as neoliberalism took hold.

Nearly 20 years later it has taken a Royal Commission into Family Violence (2015) in Victoria to see the implementation and funding of a \$ 21.8 million project to rebuild this workforce and implement whole school approaches to 'Respectful Relationships' in schools. A key element of this approach is a secondary school curriculum 'Stepping Out Against Gender Based Violence' (2014), developed for the Victorian Education department. The curriculum draws heavily on critical health literacy and post structural feminist theories.

This paper is designed to give some background and detail of the Victorian Education Department's proposed approach, and analyse how and why it became possible in the context of the current conservative backlash taking place in Victoria in relation to Safe Schools and Respectful Relationships Education. This 'moral panic' has called into question the appropriateness of the gender equity framework on which the project is based, and hence raises questions about the role of school based health education curriculum in tackling what is perceived as 'political' agendas. The paper concludes by examining the potential challenges that 'fake news' and 'moral panic' present for schools undertaking this critical health education.

*Paper - 25 mins*

*Wednesday 30 May 2018, 11:15am - 11:40am, Conference Room II*

**Pang, Bonnie** (Western Sydney University, [b.pang@westernsydney.edu.au](mailto:b.pang@westernsydney.edu.au))

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*Health and Physical Education Students and their Relationships with Digital Technologies in Health and Physical Activity*

Digital technologies are becoming increasingly important in shaping people's engagement in health and physical activity. Recent debates have discussed how the use of digital technologies to track health and fitness may exacerbate the problematic understanding of the body and health that is underpinned by Western health discourses (e.g. Gard et al., 2014; Rich & Miah, 2017). Other studies have shown the increased use of digital technologies in teaching Health and Physical Education (HPE) and as a means to enhance health and increase physical activity (e.g. Lupton, 2014). More recently, Goodyear, Kerner, and Quennerstedt (2017) provided empirical evidence that students in school expressed resistance to using Fitbit devices to monitor their health and physical activity. Despite the opportunities and risks that are presented through these studies, there is little knowledge about how pre-service HPE students make choices, negotiate, and resist the digitalisation of health and

physical activity. Following Goodyear et al. (2017), this paper also believes that the risk of this gap in research is that we may continue to view technology as either 'the solution' (a deterministic approach) or something to completely avoid in relation to promoting young people's health and physical activity. This study examines HPE students' perceptions of and experiences with using digital technologies in relation to their health and physical activity. The results showed their nuanced perceptions and experiences may bear a potential impact on how they contribute to the positive and negative influences on their students' understanding of healthy behaviours in HPE/schooling. The results will provide significant evidence that has implications for developing instruction for students in HPE teacher education units related to learning about embodiment and technology in health and physical activity.

*Paper - 25 mins*

*Friday 1 June 2018, 1:45pm - 2:10pm, Conference Room II*

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*The Self and Soft(ware) Governance of Health: Opening and Unpacking the Fitnessgram® Black Box*

FitnessGram® (FG®) is a web-based fitness assessment tool that has been rolled out in schools across the United States (US). According to FG® the product is, "used annually in tens of thousands of schools," and reaches over, "10 million children across the United States" (Cooper Institute, 2017). The FG® software provides physical educators a visual report card on individual students that is designed to educate children and their parents about individual health risks related to obesity, activity level, and muscle strength. FG® uses a reporting system to obtain an aggregated reading of student fitness levels for institutional testing, evaluation, and comparison. The product was developed by the non-profit Cooper Institute, an organization that maintains the nation's largest fitness-based database in the US. The Cooper Institute is funded by various corporate entities including General Mills, the National Football League, and US Games (the leading sport manufacture in the US). FG® was recently chosen to be the assessment instrument of the President's Youth Fitness Test, an initiative of the United States' President's Council on Fitness, Sports & Nutrition. Drawing upon theoretical and methodological insights from the fields of Science, Technology and Society (STS) studies, and Governmentality Studies, our aim is to identify and articulate the political coalitions, ethical calculations, and professional practices that coalesce within, and through, this emergent form of 'soft(ware) governance' (Williamson, 2016). This paper is part of a larger and on-going project wherein we critically contextualize the creation of FG®, and examine its enactment in physical education classrooms.

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*Paper - 25 mins*

*Friday 1 June 2018, 1:15pm - 1:40pm, Conference Room II*

**Powell, Darren** (University of Auckland, d.powell@auckland.ac.nz)

*Critical pedagogies of 'healthy' consumption*

A number of scholars have demonstrated how the increasingly blurred boundaries between business and education are 'dangerous' to public education (Ball, 2012) and act as a type of masking agent to conceal the business interests of the private sector (Boyles, 2005). In current times, food and beverage corporations' anxieties about being blamed for childhood obesity have resulted in a proliferation of health education programmes in schools. These include an array of resources and curricula that are funded, devised and even implemented by private sector players (e.g. McDonald's) with the expressed aim to 'improve' children's health, bodies, behaviours and lives. Although there

have been some calls to ban these corporate-friendly resources, or for teachers to simply ignore them, corporatised health education programmes continue to infiltrate schools. Drawing on a critical ethnography of three primary schools, I discuss the potential for critical pedagogies of consumption (Sandlin & McLaren, 2009) to both challenge and exploit this new 'brand' of health education and healthy corporations. By considering techniques such as pranking, détournement, culture jamming and beyond (Delaure & Fink, 2017) as critical pedagogy, there is an opportunity to develop students and teachers as counter-political agents: those that contest anti-politics, create new truths, unmask corporate interests, and 'unsettle' the health education assemblage (Youdell, 2011).

*Paper - 25 mins*

*Friday 1 June 2018, 10:30am - 10:55am, Conference Room II*

**Quinlivan, Kathleen** (University of Canterbury, kathleen.quinlivan@canterbury.ac.nz)

*Working with Theories As Practices In the Sexuality Education Classroom*

Theories As Practices In the Sexuality Education Classroom

In this paper I consider the affordances that Deleuzo-Guattarian theory offers in reconceptualising theories as practices in the high school sexuality education classroom, and the extent to which it could be helpful in enabling teachers to foreground young peoples' lived experiences of raced and classed sexuality and gender politics (Gilbert, 2014; Ivinson & Renold, 2013). Bringing together teacher practical knowledge scholarship with contemporary social science theories (Rosiek & Gleason, 2017). I explore the affordances of engaging with teachers' 'knowing in being' in the sexuality education classroom and what that produces. I suggest that such an approach may hold possibilities for making explicit the intertwined operation of theories and practices in the classroom, and their effects (Lenz- Taguchi, 2009). I also consider possibilities for experimenting with other theories in practices and their affordances.

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*Paper - 25 mins*

*Wednesday 30 May 2018, 1:30pm - 1:55pm, Conference Room III*

**Reweti, Angelique** (Knowledge and Education, A.Reweti@massey.ac.nz)

*Poor Māori or Pomare? Reclaiming, developing and normalising Māori culture, knowledge, language and practices in our teaching.*

Health in Aotearoa New Zealand privileges Western ways of knowing with a biomedical perspective dominating our health curriculum and services (Broughton & McBreen, 2015; Reid & Robson, 2006). While curriculum about Māori health is abundant in Aotearoa New Zealand, teachings are often focused on poor Māori health as told through the lenses of deficit based data that normalises western understandings of health and disease (Reid & Robson, 2006). The social determinants of ill-health help to explain disparities but still lack exploration into the determinants of wellbeing, particularly from a Māori perspective (King, Smith, & Gracey, 2009). What is missing is an in-depth exploration of Māori health concepts and the underpinning values that might lead to healthier futures for Māori.

This presentation draws from a student perspective of learning about deficit Māori health outcomes as an undergraduate in health sciences that did not reflect contemporary realities or personal aspirations for wellbeing. Involvement in the redevelopment of the hauora curriculum at Te Pūtahi a Toi: School of Māori Arts, Knowledge and Education, Massey University has enabled opportunities to explore Māori understandings of hauora. Working through a variety of methods, staff at Te Pūtahi a Toi are dedicated to improving the health outcomes of their whānau, hapū and iwi by working within a framework of traditional Māori values and beliefs which in turn recognises and promotes the significance and strength of Māori ontology and epistemology. Changing the dialogue from 'what's the matter with Māori' to 'what matters to Māori' can be achieved by remembering who we are as tangata whenua, through engaging with te reo Māori, tikanga and pūrākau, and by looking to our inspirational health leaders, both past and present as we navigate the future.

#### References

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*Paper - 25 mins*

*Thursday 31 May 2018, 11:00am - 11:25am, Conference Room II*

**Riedel, Rachel** (University of Auckland, rachel.russell@auckland.ac.nz)

*Calling for criticality in positive psychology and education.*

Positive psychology is a relatively new discipline that branched off from traditional forms of psychology that aimed to treat those who experienced mental health difficulties and illnesses (Seligman, 2011). Positive psychology has a primary focus on enhancing an individual's ability to flourish (Seligman, 2011). To flourish means to "live within an optimal range of human functioning, one that connotes goodness, generativity, growth and resilience" (Fredrickson & Losada, 2005, p.678). The positive psychology discipline is embedded within a biomedical discourse. Indeed, one of the founders of the field - Martin Seligman - highlights a key strength of positive psychology is its scientific grounding in empirical evidence of what specific, measurable factors can promote flourishing (Seligman, 2011). While this empirical evidence is valuable, it can also serve to promote linear, individualised approaches to well-being promotion, where an individual gains a prescribed set of knowledge and skills and, as a result, they experience an optimal range of flourishing. Indeed, a key tenant of the positive psychology field is that only 10% of an individual's well-being is attributed to context, and the remainder is attributed to skills (40%) and genetics (50%) (Lyubomirsky, 2009). Increasingly, the positive psychology field has been applied to education settings; it is used to inform mental health and well-being content in Health Education, as well as a theoretical framework for well-being promotion in schools (Dulagil, Green & Spence, 2016; Oades, Robinson, Green & Spence, 2011). This paper presents an argument for a critical approach to the integration of positive psychology in education settings. While the field can provide insight into the scientific study of well-being, and a range of well-being skills, it also minimises the importance of socio-ecological influences on well-being.

*Paper - 25 mins*

*Friday 1 June 2018, 2:15pm - 2:40pm, Conference Room III*

**Robertson, Jenny** (The University of Auckland, jd.robertson@auckland.ac.nz)

*Designing a health education qualification pathway for senior secondary school*

In 2002, New Zealand introduced the NCEA (National Certificate of Educational Achievement), a standards-based assessment system, as its national secondary school qualification. Health education (HEd) is one of over 40 subjects that have a matrix of NCEA achievement standards covering three

levels, which map onto the three highest levels of the HPE learning area in The New Zealand Curriculum (NZC). These standards, each with a unique performance criterion, needed to assess the 'big ideas' of the subject, increase in conceptual complexity with each subsequent level, and recognise three levels of performance quality within each standard. The standards could not prescribe a body of knowledge that had only to be reproduced, but instead needed to assess the learning of knowledge that was constructed by the learner across a selection of relevant contexts. Key considerations for designing the matrix of HEd achievement standards will be discussed. This includes an explanation of the way the underlying concepts of the HPE learning area are used to construct HEd knowledge, as well as provide a way to show increasing complexity of knowledge. The ways these concepts are applied to learning contexts, drawn from the key areas of learning (sexuality education, mental health, and food and nutrition), will also be described.

Although the HEd community has achieved some successes in the 15 years since NCEA was introduced, a range of challenges are still being experienced by teachers implementing senior secondary learning programmes that make a valued contribution to 21st century learner pathways. It will be argued that the need at this time is the development of theoretical and research questions leading to investigations which aim to better understand ways to build teacher capabilities for designing, planning, delivering and assessing high quality HEd programmes. These questions are also in anticipation of future curriculum and standards review.

*Paper - 25 mins*

*Wednesday 30 May 2018, 4:40pm - 5:05pm, Conference Room II*

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*Gender identity, social transition, medical interventions and decision-making of transgender and gender diverse children and their families*

This presentation is based on an Australian qualitative pilot study with gender diverse and transgender children and their parents. We discuss the findings of the focus groups with the children, aged 7-12, which explored their understandings, perceptions and negotiation of gender and gender identity, experiences of social/medical transition, and perceptions of their future lives, including reproductive health. This pilot research included 5 transgender children (3 trans girls and two trans boys) and one gender diverse child. Seven parents were involved in a focus group.

Children viewed gender as a 'mental' aspect of identity, rather than determined by biology. Despite seeing gender norms as 'oppressive' and in need of subversion, transgender children had a strong adherence to binary gender norms as part of their gender expression. Although they did not have the language to describe how they felt, children knew they were transgender or gender diverse from around the age of 3. They experienced serious gender dysphoria prior to social transition, with some children engaging in self-harm, with suicide ideation also common. Families had adverse experiences at primary healthcare and psychological services prior to accessing care through a gender clinic. Access to medical interventions, such as puberty blockers, was considered a 'life and death' matter by the children. The older age group were concerned about their reproductive futures. Children had adverse experiences at school, impacting on their mental health and wellbeing.

We discuss the implications of these findings for educators, school nurses, and other health professionals, especially those in primary care and mental health. Educators and health professionals require suitable training about gender, gender identity and diversity, transgender identities and gender dysphoria in young children so that children and their families can receive equitable education and appropriate care.

*Paper - 25 mins*

*Wednesday 30 May 2018, 2:00pm - 2:25pm, Conference Room III*

**Scholz, Brett** (University of Canberra, [brett.scholz@canberra.edu.au](mailto:brett.scholz@canberra.edu.au))

*Co-produced mental health nursing education: Overseeing and liaising between consumer academics and other academics*

Contemporary mental health policy requires that consumers be involved actively in mental health service planning and delivery (Scholz et al., 2017). The extent to which consumers are meaningfully involved varies widely, and one of the barriers to non-tokenistic participation is stigma and power imbalances. The provision of education and training by consumers has led to more positive attitudes and lower levels of stigma towards consumers among other mental health professionals (Happell & Roper, 2003). In 2017, a team universities from Iceland, Ireland, the Netherlands, Norway, Finland, and Australia received funding to deliver mental health nursing courses that would be collaboratively delivered by consumer academics and nursing academics.

Drawing on principles of autoethnography (Adams et al., 2014), I focus on my experiences in liaising between consumer academics and nursing academics in the Australian university. I am a mental health researcher – neither a consumer academic nor a nursing academic – who focuses on consumer leadership in mental health and who routinely works towards better co-production in my own work. It was my role to oversee the co-facilitation of teaching of the course.

This study is particularly concerned with three related dimensions of the co-production of the course: power dynamics, negotiations, and allyship.

My analysis of the power dynamics of co-production relate to changes in the relationships between the members of the teaching team. Over the period that the course was delivered, the relationships could be characterized at different times as paternalistic, deferential, collaborative, and chaotic.

In terms of negotiations, I highlight some of the practices that were successful and some that were less so.

Last, I reflect on my experience of trying to enact allyship to the consumer academic on the team. In doing so, I occupied a complex position of challenging the system from within, but also being constrained by the system.

*Paper - 25 mins*

*Wednesday 30 May 2018, 2:00pm - 2:25pm, Conference Room II*

**Seaman, Kristen** (Curtin University, [16174069@student.curtin.edu.au](mailto:16174069@student.curtin.edu.au))

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*The Illusion of Choice: Women's Constructions of Participants and Non-Participants of Screening Mammography*

Fields such as bioethics urge research to consider disease screening as a social activity (Østerlie et al., 2008; Rychetnik et al., 2013) yet screening may also be viewed as a moral and social obligation in which the 'good' healthcare consumer feels compelled to engage (Lau & Jaye, 2009). We adopted a Foucauldian perspective to explore discourses which may 'compel' women to engage in breast screening and influence perceptions of choice. Between April to August 2017, 16 one-on-one interviews were conducted with women aged 46-75. Five discourses were identified – Surveillance, Paternalistic, Compliance, Responsibility, and Resistance. Screening was constructed as a choice; however, women were compelled to engage via mechanisms of governmentality (i.e. normalisation, responsabilisation, and healthism). Furthermore, women felt their actions were under surveillance from institutional powers. Such surveillance was perceived as paternalistic and evoked mixed receptions e.g. some women expressed gratitude for being part of a system of care while others felt positioned as a child. Some women resisted the dominate discourse by rejecting institutional paternalism and idealising alternate means of 'good' health, however, were constructed as irresponsible by women who engaged in screening. These discourses highlight the complexity of a

universal definition of informed consent. For some women, screening decisions are influenced by the discourses/mechanisms, while for others, decisions are driven by an understanding of benefits/harms. Imposing a universal definition of informed consent violates women's autonomy to be driven by social mechanisms, however neglecting endeavours to assist women in accurately understanding benefits/harms violates ethics of practice. Recognition of the inherent subjectivity of informed consent may prompt health policy education to form a negotiated definition of informed consent and encourage much needed change of the social construction of screening as an unequivocal beneficial procedure to one that imposes both risks and harms.

*Paper - 25 mins*

*Wednesday 30 May 2018, 1:30pm - 1:55pm, Conference Room II*

**Shelley, Karen** (University of Queensland, k.shelley@uq.edu.au)

**McCuaig, Louise** (University of Queensland, l.mccuaig@uq.edu.au)

*Socio-critical lenses and threshold concepts in health, sport and physical teacher education*

Since the latter part of the 1990's, moves toward a sociocultural Health and Physical Education (HPE) Curriculum for Australian and New Zealand schools, have been reliant on teachers' understanding of, and commitment to, socio-critical knowledges and skills. Yet, these shifts away from individualistic, behavioural and biomedical notions of health have been problematic for HPE teachers and teacher educators alike. Recently, O'Connor, Jeanes and Alfrey (2016) confirmed that HPE teachers in their study lacked the necessary knowledge to teach the subject and employ the associated critical inquiry pedagogical approaches. These findings reveal persistent and on-going issues for the profession that result in a disjuncture between the intended and enacted HPE curriculum.

In this paper, we draw on the notion of threshold concepts (Meyer, Land, & Baillie, 2010), to offer new insights into students' struggle with socio-critical approaches. We propose that understanding a socio-critical approach to health is a threshold concept for students in HPE teacher education more broadly, and more specifically, the Health Education components of these programs. We first review the characteristic features and states of a threshold concept (Cousin, 2006), and then employ these analytic tools on data collected in a recent Health Education teacher education doctoral study. Following this, we pose some modest implications for the future professional preparation of Health and Physical Education teachers. These include the importance of professional experience, understanding the notion of the socio-critical as a lens through which to view health, and the importance of integrated, consistent socio-critical messages across undergraduate programs.

*Paper - 25 mins*

*Friday 1 June 2018, 11:00am - 11:25am, Conference Room II*

**Treharne, Gareth** (University of Otago, gtreharne@psy.otago.ac.nz)

**Blakey, Althea** (University of Otago, althea.blakey@otago.ac.nz)

*I'm not an expert: Medical teaching staff and transgender people's perspectives on why transgender healthcare is overlooked in medical education*

Transgender people experience considerable health inequalities and are often inappropriately asked to educate health professionals about being transgender during processes of care. A major contributor to these inequalities is a lack of medical student education. Our research explored the discursive resources drawn on by medical teaching staff and transgender community members when discussing medical student education about transgender healthcare. Data are drawn from a focus group study exploring the possibility of involving transgender community members in health professional training programmes. Three focus groups were held with transgender community members alone and five with medical teaching staff and transgender community 'ambassadors'. Teaching staff drew on a dominant discourse of a lack of expertise on transgender healthcare. Surprisingly, this was unrelated to not being transgender but instead recognised as a need for formal staff development. At the same time, teaching staff positioned themselves as expert teachers in relation to facilitation of small group discussions involving 'difficult conversations.' On this basis, teaching staff argued the potential benefits of collaboration with transgender individuals, as they currently do with other communities/agencies. Transgender participants also drew on a dominant

discourse of a lack of expertise on transgender healthcare by arguing they are an expert on their own experiences but acknowledging that teaching would need to cover the diversity of transgender identities and healthcare experiences. Transgender participants also outlined ways they provide support to others within the community and displayed eagerness to contribute to formal healthcare education. Our findings provide important insight into casual acceptance of a lack of expertise on transgender healthcare among medical teaching staff which may contribute to the lack of attention in medical education. Such a lack would not be tolerated for other health inequalities. However, both transgender community members and medical teaching staff are willing to contribute to transgender healthcare education.

*Paper - 25 mins*

*Wednesday 30 May 2018, 3:40pm - 4:05pm, Conference Room III*

**Velardo, Stefania** (Flinders University, stefania.velardo@flinders.edu.au)

*A pedagogical framework for advancing the social determinants of health*

Reducing health inequities requires a complex set of skills that empower individuals to take part in social and political activities to address the underlying determinants of health. Drawing on social determinants and civic orientation, there is clear potential for universities to act as vehicles for social change by supporting the development of active, engaged and skilled graduates who are geared to respond to future challenges. This undoubtedly demands a shift in teaching towards more interactive pedagogies. In this paper, I describe components of a first-year undergraduate course titled 'Social Determinants of Health', offered at a public Australian university, geared to prepare pre-service teachers as future health educators. In 2016 significant revisions were made to the curriculum and modification of teaching methodology, with the aim of encouraging greater social awareness and students' capacity for social change. Here I reflect on the process of revising the original content-laden course by describing various teaching strategies that were employed, with a particular emphasis on fostering critically health literate graduates who are empowered to create healthy, just societies. Strategies included the facilitation of discussions to ignite empathy, integrating problem-solving activities and building health advocacy competencies. A collaborative, learner-directed approach is considered as a way forward for other university educators, as a way of disrupting previous pedagogic work that over-emphasises knowing 'about' the existence of health problems rather than analysing them in depth and learning ways to act on them.

*Paper - 25 mins*

*Friday 1 June 2018, 1:15pm - 1:40pm, Conference Room III*