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Summary report of key findings for Tasmanian Department of Education, Educational Performance Services - How are primary education health and physical education (HPE) teachers best prepared?

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SUMMARY REPORT OF KEY FINDINGS

How are Primary Education Health & Physical Education (HPE) teachers' best prepared?

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The Context of the Research

This project investigated Primary School Principal's perceptions of a University Preservice Teacher Education course where the graduate teacher is qualified as a generalist primary classroom teacher and a Health and Physical Education specialist. Health and Physical Education (HPE) as an Australian curriculum learning area is associated with holistic lifelong health and wellbeing.

Research suggests that the optimum time for children to learn and refine their motor skills and to be introduced to positive HPE experiences is during preschool and early primary school years. This project investigates such research through the perceptions of Principals within the context of Tasmania.

The overarching research question is:

1. What are Primary School Principals' perceptions of a Bachelor Primary Education (Health and Physical Education) course and testamur? (A course where graduate teachers are generalist primary teachers and specialist Health and Physical Education teachers).

Supplementary research questions that generated data included:

- 1. Who teaches HPE in Primary schools?
- 2. If a HPE teacher is employed, do they have HPE specific qualifications?
- 3. Do Principals prefer to have a HPE specialist teacher to teach HPE?
- 4. Would a testamur/ certificate that read "Bachelor of Primary Education (Health and Physical Education)" course assist Principals with the employment of staff?
- 5. Do Principals find a course that qualifies teachers to be generalist classroom teachers and HPE specialists of value?



Significance of Research

The Victorian Department of Education and Early Childhood Development (DEECD) key responsibilities inform outcomes that the Department strives to achieve within its birth-to-adulthood learning and development agenda. The first listed outcome for Children 0-8 years is:

 Children have the best start to life to achieve optimal health, development and wellbeing (http://www.education.vic.gov.au/about/department/Pages/default.aspx)

This outcome sits within and directly relates to the Health and Physical Education learning area:

In Health and Physical Education students develop the knowledge, understanding and skills to support them to be resilient, to develop a strong sense of self, to build and maintain satisfying relationships, to make health-enhancing decisions in relation to their health and physical activity participation, and to develop health literacy competencies in order to enhance their own and others' health and wellbeing. (Australian Curriculum, Assessment and Reporting Authority, 2012, p. 2).

Health and Physical Education (HPE) as a learning area in Australia is embedded in phase three of the current national curriculum reform. There is potential for the national framework currently being developed and successful implementation, to enable curriculum change and quality HPE for all children across our geographically large country. This research investigates Principals' perceptions of a structural change within university pre-service primary teacher courses. Such a structural change would involve for the first time in Australia's history, primary education preservice teachers being given the opportunity within their university courses to specialise in developmentally appropriate Health and Physical Education.

Principals' experiences and insights matter. "We know that school leadership must be at the centre of our reform effort. In our decentralised system where principals have a high degree of autonomy it is they who have the power to improve the quality of teaching." (DEECD, 2012, p. 3). Furthermore, such a course would be timely as there has been growing concern for universities improved preparation of teachers for the school environment (DEECD, 2012). A survey conducted by McKenzie, Rowley, Weldon and Murphy (2011) found that less than 30 per cent of principals felt that graduate teachers had acquired important skills for effective teaching and learning. It is pertinent that Principals are considered and opinions valued.



Literature Review

The Australian Curriculum Assessment and Reporting Authority (ACARA) draft shape paper for HPE, espouses quality experiences for children and the importance of having these from the very beginnings of schooling. What is being accentuated within this shape paper is one particular aspect of quality HPE; that it is 'developmentally appropriate'. The priority for Health and Physical Education is:

to provide ongoing, developmentally appropriate opportunities for students to practise and apply the knowledge, understanding and skills necessary to maintain and enhance their own and others' health and wellbeing. (ACARA, 2012, p. 4).

In the late 1980s and early 1990s, the HPE school curriculum within Australian schools was considered to have been in crisis (Tinning, Kirk, Evans and Glover, 1994; Dinan-Thompson, 2009). Curriculum research indicates that the 'crisis' was experienced at an international level also (Dinan-Thompson, 2009, p. 4). 'In-house' discussions of crisis at HPE conferences and in journals led to a Senate Inquiry (Commonwealth of Australia, 1992) into the state of HPE within Australian Education systems. The findings in the report by the Senate Standing Committee on Environment, Recreation and the Arts (Commonwealth of Australia, 1992) confirmed the 'in-house' discussions of crisis (Dinan-Thompson, 2009), findings included that there was in fact a decline in the opportunities for quality HPE in Australian schools although paradoxically there was unanimous support for the learning area. The problems were mainly with resources and the time allocation to the key learning area which resulted in a drastic decline in children's skill levels and physical fitness (Tinning, Kirk, Evans, and Glover, 1994). Another major problem was that "suitably qualified physical education teachers are not being employed to teach physical education and school sport to all children" (Commonwealth of Australia, 1992, p. xiv). There was also no required accreditation or formal training in physical or sport education as a condition of employment for graduating primary school teachers (Moore, 1994). Webster (2001, p. 1) recommended that "pre-service education of primary school teachers include mandatory units directly related to the content strands of the syllabus, with further opportunities for teachers to specialize in PE courses".

These issues, according to ACHPER (2011) still exist today. "It is true that some schools struggle to provide quality PE and sport, in particular in primary schools". Furthermore, some graduate teachers are to this day completing teaching degrees without studying any units in Health and Physical Education and are then responsible for implementing this learning area in schools. Health and Physical Education primary specialist teachers are only employed sporadically within primary schools across Australia with, according to Dinan-Thompson (2009, p. 48) questions often raised about "who is teaching HPE, and who is deemed competent to teach HPE in schools". Hence, the recommendations of a Senate Inquiry made 20 years ago appear to not have been achieved.

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A study released recently (March, 2013), 'The wellbeing of young Australians', conducted by Australian Research Alliance for Children & Youth (ARACY) involved over 3700 people. This study evidenced that Australian children and youth are not doing as well as they should. Australia ranked in the top third of OECD countries for around one-quarter of the indicators (12 out of 46). Areas of concern where Australia was ranked in the bottom third included "jobless families, infant mortality, incidence of diabetes and asthma, young people in education, 3-5 year olds in preschool and carbon dioxide emissions" (ARACY, 2013, p. 4). Despite the rhetoric about children wellbeing and social justice, this report indicates that there has been no improvement in the majority of areas from the previous report in 2008. The report summary states:

if we want to change – to improve – we need to measure and report on the things we believe are most important for a successful Australian society. Few would disagree that one of the most important of these are the environments we can influence to help parents and others endure our children have the opportunity to be healthy and to develop well. (ARACY, 2013, p. 26).

It is axiomatic that primary schools' play a key role in children's health and wellbeing. Hence, Health and Physical Education teachers (specialist or generalist classroom) need to be able to deliver quality Health and Physical Education lessons across all strands, which include Physical activity, Health and Personal/Social Development. This involves the teacher having the knowledge and understanding of the various pedagogies that exist in HPE and the awareness to choose the most appropriate for each particular learning experience (Tinning, 1999). This often involves choosing critical, socially just pedagogies rather than the traditional dominant science and performance-based pedagogies for HPE. Critical socially just pedagogies will necessitate teachers being trained and educated in this mode of teaching (Tinning, 2004).

Physical Education (PE) courses specifically tailoring to children in the 3-11 age range, where teachers are qualified generalist classroom teachers with a specialism in PE are offered in the United Kingdom. What is sometimes offered in Australia are quasi HPE courses where pre-service primary teachers may be able to choose electives in general sport often relating to industry or secondary physical education. While these offer opportunities for enthusiasts to study areas of interest, ideal candidates for primary HPE specialists, unfortunately they lack the 'developmentally appropriate' key aspect that the draft paper emphasises. Hence, specialist HPE teachers working within primary schools are often not qualified generalist classroom primary teachers (often secondary trained), and may not have had opportunities to develop pedagogy specifically for teaching children in the Primary school sector, or they are generalist classroom teachers with no HPE specialisation.



Summary Report

Principals surveyed represented schools from seven Tasmanian regions and schools of various enrolment sizes (Table 1).

Table 1 Tasmanian regions represented by school principals surveyed

Tasmanian Region	Size of school enrolment					
	Small schools (less 100)	Medium (100-300)	Large (300 – 600)	Very large (more 600)	Total	
Queenstown	1	0	0	0	1	
Devonport	0	2	1	0	3	
Central	1	0	0	0	1	
South	0	0	1	0	1	
Hobart	0	3	1	0	4	
South East	0	0	1	0	1	
East	0	0	0	0	0	
Launceston	0	2	0	0	2	
Total	2	7	4	0	13	

• 92.3% of principals surveyed (12 out of 13) preferred to have HPE specialist teachers in their school.

Within small and medium sized schools Principals stated that it was not always possible or financially viable to have HPE specialists due to their size and staffing. Hence, the only Principal to answer 'no' to this question was from a small school.

The comments supporting HPE specialists in primary schools were many and suggested that quality was provided through expertise, knowledge of the learning area, skill development and a range of physical activities that are 'developmentally appropriate' for the primary school HPE (and wellbeing) program. Some older classroom teachers' age was not suited to taking children for HPE physical activities and classroom teachers often did not have the knowledge and expertise required.



 92.3% of principals believed a course that qualifies teachers to be generalist classroom teachers and HPE specialists would be or would probably be valuable. Not one Principal thought that this course would not be valuable

No	0	
Maybe	1	(7.7%)
Probably	2	(15.4%)
Yes	10	(76.9%)

 92.3% of principals believed a testamur/ certificate that read "Bachelor of Primary Education (Health and Physical Education)" would assist or probably assist them with the employment of staff. Not one Principal stated that it would not assist.

No	0	
Maybe	1	(7.7%)
Probably	6	(46.2%)
Yes	6	(46.2%)

• There were 10 schools (76.9%) where a HPE specialist teacher was responsible for part or all of the implementation of the learning area

This included:

Specialist HPE teacher	6	(46.2%)
Classroom & HPE specialist	3	(23.1%)
A generalist classroom relief teacher in HPE role	1	(7.6%)
Classroom teacher	3	(23.1%)

- 9 principals (69.2%) stated that their HPE specialist teacher was a qualified specialist and 4 did not answer the question.
- When employing staff, 10 principals (76.9%) indicated that they look at the university degree certificate/ testamur of potential staff and 3 (23.1%) stated that they did not.
- When employing staff, 10 principals (76.9%) said they do not peruse university transcripts.

This is problematic when transcripts are needed to evidence Health and Physical Education units successfully completed under the current courses offered.



 Principals' commented on key attributes of a good HPE teacher. The top seven responses were:

HPE curriculum knowledge & dev appropriate pedagogy	17 (mentions)
Planning/ assessment and flexibility (organised)	11
Rapport/ communication and management skills	8
Team player/ team work/ collaboration	4
Introduce a variety of physical activities/skills	3
Passion/ interest/ enthusiasm	3
Relationship building	3

• 12 schools gave no details of HPE being outsourced (92.3%)

The only school to give details of HPE being outsourced included Active Kids Program, Swimming and Sport clinics.

• Principals' thoughts on quality HPE for children in schools

Within small schools (less than 100 children) Principal comments included that physical activities and sport has decreased due to the busyness of family life and technology.

Principals of medium sized schools (100-300 children) shared that Health and Wellbeing was often the responsibility of classroom teachers due to the time limitations that Specialist HPE teachers have. Also, that the linking between the physical education and health strands is important. Another Principal stated that school sport suffered in Tasmania when it became the responsibility of parents on Saturday mornings. The problems identified related to transport and costs involved.

Principals of large schools (300-600 children) stressed the need for all schools to have HPE specialists and for the Federal Government to assist with the provision of 2-3 hours of Specialist primary HPE each week.

Recommendations

It is recommended that pre-service primary teachers have the opportunity to specialise in HPE, specifically 'developmentally appropriate' for children in primary schools. Having opportunities for pre-service teachers to become generalist classroom teachers and specialise in HPE is supported by a high majority of principals surveyed. Such a course enables teachers who want to specifically teach primary aged children, have a developmentally appropriate pedagogy and holistic health understanding, and are passionate in Health and Physical Education, to be employed in schools throughout the state of Tasmania. This would be a directional step towards the DEECD outcome 'children having the best start to life to achieve optimal health, development and wellbeing'.



Furthermore, this would enable smaller schools, often in rural, regional and remote Tasmania to have an HPE specialist teacher and thus have the same opportunities as larger metropolitan schools, which is currently not the case. This directly relates to the Melbourne Declaration on Educational Goals for Young Australians (MCEETYA, 2008) and the recommendations of the Gonski Report (ABC, 2012).

It is alarming the number of principals who do not check for evidence of HPE units successfully completed. However, it is understandable as it could be assumed that all pre-service teachers are prepared for teaching across all learning areas. A Bachelor of Primary Education (Health and Physical Education) course and testamur would assist in improving this situation and is the second recommendation.

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