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Community participation in rural Ecuador’s school feeding programme
A health promoting school perspective

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Abstract
Purpose – The purpose of this paper is to contribute to the debate concerning community participation in school-based health education and health promotion, with regard to food and nutrition.
Design/methodology/approach – Based on empirical data generated over the course of one year of fieldwork in three rural communities and schools in Ecuador, the study examines community participation related to the implementation of the school feeding programme (SFP) in rural schools in Ecuador. The conceptual framework for the study is shaped by the concepts of student and community participation within the health promoting school (HPS) paradigm.
Findings – The findings help identify and portray different forms of community participation, ranging from a total absence of meaningful participation, though very limited, to consequential participation determined as community influence on the SFP practices to meet the community needs, priorities and systems of meanings.
Research limitations/implications – The study shows that the meaningful participation of the parents and community members in small rural schools in a low- to middle-income country such as Ecuador can be linked to an empowered stance towards the SFP so that it is better tuned to local conditions, priorities and systems of meaning. School leadership, geographical characteristics and internal community organization seem to influence how participation is valued and enacted. Challenges remain in the interpretations of community participation, including counter- and non-participation of members.
Originality/value – The study contributes to an understanding of policy implementation and the implications of a HPS approach to health education and health promotion in small rural schools.

Keywords: Developing countries, Rural areas, Health promoting schools, Participation, Nutrition, Community

Introduction
Persistent malnutrition and the increase in overweight and obesity are a source of concern in rural areas of Ecuador, where the poverty rate reaches 43 per cent (INEC, 2015). Schools are considered an important site for interventions addressing these issues, and also a site where children can learn about health in general and healthy eating in particular. The global WHO’s health promoting school (HPS) initiative (World Health Organization, 1998) has shown promising results when it comes to capitalizing on synergies between health and education with a view to improving both health and education outcomes (Langford et al., 2014; Macnab et al., 2014b; Wang and Stewart, 2013). The HPS initiative is based on a theory which defines health promotion as a dynamic and inextricably interconnected interplay between healthy public policy and health education (Green and Tones, 2010). A HPS is determined as a school that combines health education curriculum, whole-school environment (e.g. school’s policy, psycho-social and
physical environment and values) and community action to improve health status as well as health-related learning and competence development of students. Within this paradigm, the school feeding programme (SFP), which is in the focus of this study, can be seen as an important policy with a potential to contribute to health promotion and health education at school.

In the fight against malnutrition in developing countries, in 1980 the World Food Programme created the first SFP in Ecuador. The WFP and the United Nations Development Programme funded and managed the programme as it changed through time, until it was gradually handed over to the Ecuadorian Government. Today, the programme delivers foodstuffs with the provision that they must be eaten as breakfast at the beginning of the school day (Ecuadorian Ministry of Education, 2012). In 2009, the state assumed full responsibility for the implementation of the SFP and excluded lunch, which, apparently, contributed to a decline in community participation (World Food Programme, 2012). Since then, the foods for small rural schools have been the same with minor alterations over the years: a flavoured drink mix to be served hot, and a package of industrial cookies or granola bar.

Within a critical health education and HPS perspective, the community is considered an important dimension which interacts with students’ health and well-being, as well as with their learning about health (Crawford, 1980, 2006; Fitzpatrick, 2014; Nutbeam, 2000, 2008). The community surrounding the schools, including the parents and extended families, are considered important partners in the development of a school that attempts to constantly develop its capacity for healthy learning, working and living (Green and Tones, 2010; Konu and Rimpelä, 2002; Macnab et al., 2014; Simovska and McNamara, 2015; Sormunen, 2012; Tang et al., 2009; Tones, 2005; World Health Organization, 1998).

The HPS concept has not been sufficiently researched in low and middle income countries (e.g. Langford et al., 2014; Vince Whitman and Aldinger, 2009; Wang and Stewart, 2013). Additionally, there is limited research on health education in connection with SFPs (Bundy et al., 2009, 2013), health education in small rural schools (Aksoy, 2008; Kaloja and Pietarinen, 2009; McEwan, 2008; World Bank, 2000; Åberg-Bengtsson, 2009) and community participation in school-based health education and promotion (Deslandes, 2006; Michael et al., 2007; Stewart et al., 2004).
About 1,452 small rural schools serve peripheral, dispersed populations in Ecuador, accounting for 16 per cent of all schools. Rural communities in Ecuador have a long history of collaboration and civic engagement leading to the improvement of people’s lives, particularly in the Andean region, where this study took place (Bebbington, 2001). In Ecuador, small rural schools are located in hard-to-reach communities with relatively high poverty levels, in areas with less public services than urban areas (e.g. running and potable water are an issue). The schools in these areas are normally small, which is why the government views them as costly and economically inefficient as calculated per student; therefore, it is gradually closing a number of them. The schools are located in relative proximity to where the students live.

According to the Organic Law of Education (Ecuadorian Government, 2011; hereafter Education Law), parents are co-responsible with schools for children’s development. While the Education Law does not explicitly use the concept of community participation, it emphasizes the value of the engagement of the community and the parents in the work of the schools (Torres, 2016). At the same time, closer analyses of the policy discourses, including the Education Law, have shown that national policies explicitly and implicitly establish forms of keeping close control over and regulation of parental input (Torres, 2016).

Against this background this study aims to contribute to the debate relating to health education and health promotion in schools by examining community participation in the implementation of the SFP, as an element of health promotion, in rural schools in Ecuador. In the following, we first outline the conceptual framing of the study, the study design and methods. Then we present and discuss the findings and close the paper with a few dilemmas and implications for further research.

**Conceptual framework**

This study draws on the HPS conceptualization connecting health and education initiatives with a view to improving both educational and health outcomes (Green and Tones, 2010; Macnab et al., 2014; World Health Organization, 1998). The aims and expected outcomes transcend the narrowly defined health or education agenda focussed on, respectively, health status and school achievement. The critical HPS approach emphasizes the importance of the development of action competence or critical health literacy, that is, the ability to reflect, act upon and influence the wider determinants of health rather
than solely change one’s individual lifestyle (Clift and Jensen, 2005; Mannix-McNamara and Simovska, 2015; Simovska, 2007; Sykes et al., 2013; Tang et al., 2009). The focus of the critical HPS model is on participation through democratic deliberation and collaborative action related to health and well-being.

Simovska (2007, 2008), building on Hart’s (1997, 2008) distinction between token and genuine participation of children in community development, defines students’ participation in a HPS as: concentrating efforts on the individual-in-context rather than individual behaviour regulation; focussing on the learning process, personal meaning making and social collaboration rather than solely propositional knowledge; and producing divergent, rather than pre-determined outcomes related to health status and/or educational achievement. Simovska suggests a continuum of participation ranging from token or symbolic participation to genuine or consequential participation, which involves a sense of ownership and influence. Although this conceptualization has been developed in relation to student participation in HPS, it can also be used to analyse community participation.

The HPS model is holistic, rooted in socio-ecological theory; consequently, it views the school as embedded in, and working across, the wider local community (Macnab et al., 2014; Simovska and Carlsson, 2012; Sormunen et al., 2011, 2013a). However, it can be argued that the HPS approach is primarily oriented towards the school and centred on the students. Consequently, the relationship between the school and the local community is one of the collaboration focussing on the school agenda. Parents and other community members are typically expected to contribute, rather than define or substantially change the agenda; their opinion is heard mainly through their democratic representation in decision-making processes. It can be argued that this is not fully suitable for small, underdeveloped rural schools in low and middle income countries such as Ecuador, where the community surrounding the school is closely intertwined with the school, also in social matters that transcend the school agenda, and where many of the community members are parents or extended family members of students in the school. Health education and health promotion in such schools can treat the whole community as the target and agent of change.

Although community and community participation are considered to be
crucial in health promotion and health education theory, these concepts have not been clearly defined within the field (Carvalho, 2004; Castiel, 2004; Laverack and Keshavarz Mohammadi, 2011; Sykes et al., 2013). To understand what the participation of the whole community could look like at school, it is worthwhile to resort to critical education theory. According to Giroux (1992), community participation entails that schools work in close collaboration with parents and other inhabitants, prompting or promoting democratic interactions, while taking into consideration the ways in which community members interact, as well as their values and interests. As a consequence, teachers or school principals do not necessarily determine the decision-making processes, and the local community has the power to influence the school agenda.

According to sociocultural theorist Rogoff et al. (2001), members of a school’s extended community share links in and out of the school that have developed throughout time. In order to keep on functioning as a community, members may adapt and maintain certain ways of doing things. In Rogoff’s view, the members of the extended school community support each other and are actively concerned with the well-being and future of the entire community, not only the school. As a consequence, parents bring themselves into the world of the school, but also bring about or catalyse change at the school.

Similarly, educational researcher Carolan-Silva (2011) views community participation as consisting of the parents acting as members of the wider school community to address the needs of the collective group of students rather than concentrating on their own children. She stresses that, as community members, parents may choose not to participate in initiatives and policy implementation processes at school if they do not have a sense of ownership and influence. According to Carolan-Silva, community participation entails that parents and other community members can decline to participate, or even join against the school as an institution if their identified interests, priorities or values clash with the ones of the school.

The perspective of Rifkin et al. (1988) on what constitutes community participation in the area of public health belongs to the similar democratic and empowerment discourse. Rifkin et al. point to three key features of community participation: first, participation is active; second, participation involves choice; and third, choice must be potentially effective.
Historically, small rural schools have been a vital component of the local community and have even served as a centre of community integration (Hargreaves et al., 2009; Åberg-Bengtsson, 2009). When they are oriented towards the community, small rural schools can create a culture of participation to fulfil the needs and demands of the community as well as of the school (Colbert et al., 1993; Kalaoja and Pietarinen, 2009; Kline, 2002; Kvalsund and Hargreaves, 2009). In small rural schools, the community is geographically local, largely composed of parents but also including other inhabitants as well as local authorities and members of local organizations who interact with the children in spatial, social and cultural everyday life (Carolan-Silva, 2011; Kline, 2002). In HPSs, parents in rural areas may be more likely than urban parents to consider that health education is a shared responsibility (Sormunen et al., 2013b).

Using the standards proposed by Bundy et al. (2009), a study on Ecuador’s SFP argued that community participation at lunchtime was crucial to its success in the 2000s, because it enhanced the menu’s variety and quality, and linked it with school gardens, while encouraging teacher involvement (World Food Programme, 2012). In contrast, increased focus of the government on the food supplies, and the reduction of the SFP to breakfast, distinctively diminished community and teacher participation (World Food Programme, 2012).

The concept of community participation has been criticized for becoming ritualized and reaffirming social injustice by failing to recognize inequalities in power and skills within a decision-making community, and by focussing on creating agreements and reaching goals rather than recognizing multiple visions of a particular problem and solution possibilities (Cooke and Kothari, 2001). More specifically, in education (Fitzsimons, 2006) and studies on HPSs in the field of food and nutrition (Carlsson and Williams, 2008), emphasizing participation is viewed as a form of shifting responsibility from the state to the community.

Nevertheless, the fundamental assumption in this study is that in the case of the SFP in Ecuador and in a HPS perspective, particularly in small rural schools in low and medium income countries, community participation could prove to be both necessary and important, despite the inherent tensions and challenges. Although a number of typologies of community and citizen participation exist in the literature (e.g. Arnstein, 1969; Brager and Sprecht, 1973; Cornwall, 1996) in this study
we employ Simovska’s concept of participation (Simovska, 2007), which was developed for school students, building on Hart’s (1997, 2008) typology of children’s participation. We do this because Simovska’s model is one of a continuum rather than hierarchical, and sometimes perhaps linear “degrees” of participation, and because it has been developed within the paradigm of the health promotion schools, which is also the approach taken in this study. Applying Hart’s and Simovska’s continuum of child or student participation to the community level requires analysing how the school regards or implements policy guidelines from the educational authorities, and, consequently, how the school health and education agendas are interpreted, negotiated and decided, with a particular view on the position of the parents and the broader community in this respect.

**Study design and methods**

This study is part of a wider research on school-based health education and promotion in connection with the SFP, in three farming hamlets of Ecuador with high poverty and malnutrition levels. These hamlets are mainly dedicated to agriculture; they belong to parishes of maximum 5,451 inhabitants, with 58.2 to 85.4 per cent living below the poverty line (INEC, 2010). No household has potable water, which is one of the main basic needs variable which is used as a measure of poverty in Ecuador (Feres and Mancero, 2001).

The study, embedded within the interpretative research paradigm (Denzin and Lincoln, 2011), is based on one year of qualitative fieldwork in three small schools (with one to three teachers and a maximum of 31 students). The hamlets and the schools were selected following the principles of purposeful sampling (Patton, 2002), aiming to ensure rich information concerning the research focus. Although the three hamlets belonged to disadvantaged rural communities and were part of the SFP, they differed in their geographical placement, proximity to the school and the composition of the community, which allowed in-depth insight into the research questions. The main research question for this part of the study is:

**RQ1.** What are the possibilities and obstacles of, and the tensions and ambiguities related to, community participation, including parents, in the SFP in rural schools in Ecuador?

**Data generation and management**

The data generation methods used over one year of fieldwork were:
documentation analysis of secondary sources, three community mapping workshops, participatory observations of 11 community meetings, 24 whole day school observations, and 37 semi-structured interviews with 48 parents and seven teachers. Parents were interviewed one time, individually or as a couple, following a pre-established interview guide. Informal conversations were also held with parents, teachers and community members during school observations or community meetings and registered as data records.

Data were generated in two phases. In the first phase, a total of 54 people took part in community mapping workshops where members described the most important characteristics of, and identified the most salient issues, in the community (demographic, geographic, agricultural, nutritional and educational). The data obtained were complemented by initial observations and secondary sources such as statistical reports, in order to contextually characterize each community. In the second phase, observations, and semi-structured interviews with parents and teachers, were conducted at home and school. The focus was on: perceptions of the parents and the teachers related to general living and schooling conditions; organization of the SFP; the views of parents and teachers on education in general, and more specifically on food, nutrition and health, in relation to the SFP; and the participation of the local community, including parents, in the implementation of the SFP.

Fieldwork log, observation notes and recordings of the interviews were done manually. The decision to take manual notes for the study, instead of digital recording, was based on Hatch (2002), who argues that audio recording may influence the responses or cause additional reactions in research participants. For example, in initial observations, the attention of parents and teachers was diverted to digital devices. Horsdal (2012), who also finds equipment distracting for the interviewee, argues that writing by hand has additional advantages such as making the researcher “extremely observant[,] attentive and present” (p. 79). The method also allows to make silent pauses during which the interviewee can make reflections and articulate further responses. All the field notes were categorized and filed as data records.

**Analytical strategy**
The first level of analysis consisted of inductive coding of data derived from the community mapping workshops, interviews and conversations with parents and teachers, and observations at school and the wider community following the research questions. At a second level,
categories were organized with a focus on how the school agenda was established, and on the roles and responsibilities that were explicitly or tacitly ascribed to parents and other members of the extended community. At a third level, findings were thematically synthesized following the conceptual framework, to answer the research questions, and subsequently translated from Spanish into English.

**Ethical considerations**
The study adhered to the principles and guidelines of the American Anthropological Association (2009) Code of Ethics, and was approved by the ethics committee of Facultad Latinoamericana de Ciencias Sociales (Latin American School of Social Sciences) Ecuador. The education authorities signed permission letters, upon which schools agreed to join the study. A parent representing each family signed a consent form which guaranteed anonymity, and pseudonyms are used for the school to maintain confidentiality. At all times teachers, children, parents and other research participants were advised about the nature of the inquiries, and that they should say if they did not agree with the researcher’s presence or questions. As a form of “giving back” to the community the researcher assisted in daily activities of schools and homes, as required by teachers and parents.

**Findings and discussion**
The three communities which took part in the study are similar in size and number of households, but are moderately different in their poverty level and school organization. Table I presents the basic information about the communities and the schools involved in the study. (To guarantee anonymity, communities are labelled as Community H, S or M, and, accordingly, schools are also labelled as School H, S or M.)

Families in these hamlets were patrilineal and the division of work was gendered, although women, men and children were occasionally observed helping in areas that were not habitual to them. Different groups of households were interrelated through marriage in each hamlet and were observed helping each other in farming activities. Most of the inhabitants were mestizos, with a group of families having relocated to Community S from an indigenous community. Christian congregations were not found in the area; Catholic services were not frequently attended by inhabitants and only the most important Catholic dates were celebrated.
Table I. Community and school data

| Community       | Description                                                                 |
|-----------------|                                                                            |
| Community H     | 1-teacher school 50 households; 58.2% under the poverty line in the parish; 17 students between 5 and 12 years of age; 1 female teacher. |
| Community S     | 3-teacher school 86 households; 85.4% under the poverty line in the parish; 31 students between 5 and 12 years of age; 2 male teachers, 1 female teacher. |
| Community M     | 3-teacher school 61 households; 73.8% under the poverty line in the parish; 24 students between 5 and 12 years of age; 3 female teachers and 1 female staff. |

Note: Income per capita of approximately USD 69 in 2010 and USD 89 in 2015.
Source: Based on INEC (2010), community mapping workshops and interviews with teachers

Thinking and working as a community
In Community H the women’s savings group served both members and non-members, and channelled external projects, from animal vaccination to research studies such as this one. The observations of the association’s meetings allowed to get insight into the diverse functions that this organization served in the community; members discussed topics such as how the association did not favour members over non-members, or the progress of their collective enterprises. The meetings were also a space to share information sent by private and public institutions, but also personal stories, some humorous, some more serious-minded. Each meeting seemed to build on the previous meeting and previously established bonds and conversations between members.

In an individual interview, one of the eldest members of the women’s savings group, who was also a parent at School H synthesized her experience as member of the association as follows:

I get entertained and we can learn something. We also share and laugh a lot [...] I get along very well with the women from the association, and my daughter is also a member (Interview with member of savings group, Community H, 9 September 2011).

The excerpt emphasizes the social and intergenerational aspects as well as possibilities to learn and develop through the engagement with the association. Additionally, when asked in a small group about the reasons for their participation at meetings and other activities,
members of the association agreed that they worked together because: “We want what is best for our community” (Community observation, 18 April 2012), indicating shared visions and agency.

It seemed that the association in Community H created strong social links between members and non-members, particularly based on the financial loans they gave to inhabitants, but also because the meetings were a space to socialize, discuss or solve problems. Especially, members seemed to rely on each other and on non-members, including spouses, relatives, neighbours and other inhabitants, to build forward. All members of the association had their children or grandchildren in the local school, in contrast to other inhabitants who sent the children to the bigger school in the nearest village.

In comparison, the community mapping, the observations and the interviews showed that Community S did not have such a community-wide organization; it was composed of three distinct neighbourhoods which were distinctly separated by geography. The farthest neighbourhood, for example, could be reached traversing a long trail up a steep hill which was periodically cut off from the rest of the community and the school by a recurrently growing river.

In the individual interviews, the research participants from School S often referred to conflicts or problems that they or the neighbourhoods in which they lived had with each other, and it seems that these tensions prevented them from engaging substantively in school matters. The interview excerpts below, from three individual interviews (two with parents and one with the headmaster) in School S, are illustrative of this:

We do not really get along well with the rest of the community. They are very selfish. They are all very selfish (Interview with parent, School S, 21 April 2012).

It’s impossible to do things here with the community (Interview with parent, School S, 13 April 2012).

There are difficult feelings in the community, there are some negative feelings (Interview with the headmaster, School S, 16 August 2011).

It seems that, given the lack of a cohesive social organization, and the
physical-geographical barriers, the community did not find participatory ground across the neighbourhoods or a common space to engage with a view of giving or finding support, and working together in favour of the collective, including the schools and children within.
The data records show that the third community, Community M, seemed to stand between the two positions of communities H and S. Although the research participants did not report conflicts frequently, their accounts as well as the observations and interviews demonstrate that community-wide activities were seldom organized, and only by external institutions such as the Ministry of Agriculture. Additionally, data records indicate that the sole organization in Community M only partially represented inhabitants; and, a majority of this organization’s members sent their children to the bigger school in the nearest village, instead of the local school.

In interviews, research participants in Community M conveyed that they were not used to joining efforts. The reasons that members of the community gave for not becoming involved are exemplified in the following excerpts:

People don’t participate because […] they don’t want to become informed (Interview with member of Community M, 30 October 2011).

I haven’t heard about people organizing a meeting (Interview with member of Community M, 11 January 2012).

I am a very busy person. I can’t go to meetings (Interview with member of Community M, 18 February 2012).

This could help to understand why, in community observations, when members expressed a shared concern, such as water distribution, they did not propose to discuss and solve issues in a participatory manner.

The question of who drives change
In Ecuador, the Education Law has established strict rules on how parents should participate at school, and does not explicitly allow for the participation or even involvement of the wider local community (Torres, 2016). Accordingly, the SFP framings regarding the content and schedule of the meal are centrally determined and expected to be implemented as prescribed, that is, in a top-down manner.

Simovska (2007, 2008) interprets genuine participation as involvement
in common decision making and exerting some degree of influence concerning matters that affect the participants. In consequence, the participation of the community in the implementation of the SFP would need to entail some form of contextual adaptation of the programme through a collaborative effort emphasizing the links between diet and health, and between the school and home meals. Additionally, such community participation would involve adaptation of the SFP to consider the cultural norms, everyday experiences and local systems of meaning related to food, meals and health.

In the following, this conceptual framework is used to discuss the findings of the study, shedding light on the different tensions and ambiguities, forms and qualities, of community participation related to the SFP in the three schools participating in the study.

*Limited room for influence.* While a similar tendency of the headmaster taking the lead was apparent in all the three schools, the data show that especially in one of the schools, School M, decisions concerning what could be changed about the SFP, and how, were mostly made by the headmaster alone. In School M, the headmaster followed the guidelines from the Ministry of Education almost literally, which did not allow much room for community influence. The interview and conversation excerpts below are illustrative for this point:

> Here, we strictly abide to what the Ministry of Education tells us (Interview with the headmaster, School M, 29 September 2011).

> We follow the rules as strictly as possible, of course, depending on the given conditions, if the resources are available (Conversation with the headmaster, School M, 1 March 2012).

These accounts might be seen as a form in which the headmaster showed she was doing her job. But they could also be seen as indicative for a non-participatory leadership style that delimits critical reflection and modification of the prescribed guidelines. The wording, e.g., “strictly” and “abide”, is particularly indicative of such a style, but also the way in which resources or conditions are described as given, and not as modifiable through intended action.

This was further corroborated in the observations of school meetings;
as the observation data reiteratively show, the meetings with parents had a function of disseminating information and encouraging compliance with the SFP, rather than discussion and joint decision making. On the continuum of participation as suggested by Simovska (2007, 2008) this can be characterized as nearer to token or symbolic participation, where parents and community members are taking part at the meetings, they are informed, but they have no substantial possibility of real influence; the expected outcomes are convergent and pre-determined.

Additionally, the data show that while the teachers at School M complied with the SFP guidelines, they were somewhat critical of it. During school day and school meal observations and the informal conversations, teachers commented on the children being bored of the school food because it had not changed throughout many years, or that the children did not like the food. However, according to school observations the menu remained unchanged.

Moreover, the observation notes point to a sense of urgency and lack of time allocated for the meal at School M. This is illustrated by the excerpt from the observation notes below:

*The porridge is prepared in a rush, without being completely mixed before cooking; the lumps are just strained before serving. The food is served too hot to eat, but the teachers repeatedly request that the children finish eating quickly (Observation of the school meal, School M, 1 March 2012)._*

Both parents and teachers in school M seemed to share the vision that lunch was better than breakfast because it satisfied specific needs of the community. The following excerpt of an interview with one of the teachers exemplifies how they compared the present and past SFPs:

*It was much better when there was the school lunch. The children were not used to vegetables, they would put them in their pockets so as not to eat them, but we pressured them and got the children used to eat them. We would prepare tasty salads with radish, with beet; they were not used to that. Those kids were much better fed, not like these kids. But there are still some kids that are well taken care off (Interview with the teacher of students*
According to this account, lunch was more community-oriented and encouraged greater commitment from the teachers to the children’s nutrition, taste, well-being and potential for learning than the school breakfast.

Thus, the analysis of the empirical material demonstrates that parents and teachers at School M were critically engaged and shared ideas about possible modifications that could be made to the SFP so it better meets the needs of the community. However, the room provided for meaningful participation and influence (Simovska, 2007, 2008) of community members and parents in School M was predominantly limited, seemingly due to the leadership style employed at the school. As a consequence, the opportunity for consequential community and parent participation and modification of the SFP implementation according to critical reflection and the community-identified priorities was largely missed in this school.

Following the community lead. In contrast, School H seemed to invite parents and community members for democratic deliberation relating to the SFP and create space for community’s influence regarding the schedule, content and serving of the foodstuffs. Like in School M, parents and the teacher of School H also expressed in interviews and conversations that the children were tired of the repetitive menu, and did not like the food that much. Notably, as the following excerpt demonstrates, providing lunch involved acknowledging the real needs and ways of organizing of the community:

In the countryside, parents go to work and the children manage on their own. Ms. Fanny’s children, the siblings take care of the youngest; they feed her, bring her to school, and pick her up from pre-school. The school lunch was an advantage, parents trusted that the children were nourished; each family had its turn. Now, there isn’t that. Parents used to go in peace to work for the day. What can a child do? Sometimes he prepares food himself, which is not always good (Interview with Teacher, School H, 7 September 2011).

School observations confirmed that opened packages of cookies and unopened granola bars were left uneaten until they went bad or expired,
even if the teacher may had encouraged the children to eat them. For the same reasons mentioned in School M, parents and the teacher in School H reported they preferred that lunch rather than breakfast were served at the school. But, they expected the authorities to provide the main foodstuffs; they viewed the community in a supporting role, but not carrying the majority of the burden:

If the state is going to send the food, it has to send food for lunch. When the children had lunch at school, it used to send lentils, tuna or rice, and we would add the vegetables that we grew. Even the school garden was working back then for this purpose (Parent’s comment in an informal conversation during school observation, School H, 3 May 2012).

Such community participation could be interpreted in a twofold way. On the one side, it could be argued that the parents’ and community’s emphasis on the quality of food supplies, and on the state’s responsibility in this respect, was attributing responsibility and hence control to the SFP as a centrally prescribed policy. On the other side, it could be seen as a form of resistance against allowing central authorities to shift responsibility for the quality of the school meals to the community under the guise of participation. The latter can be characterized as genuine or consequential participation (Simovska, 2008). Additional data support this categorization; for instance, the empirical material shows that School H modified the SFP’s rules and guidelines by involving the parents:

Meal is served a few hours after the start of the school day, instead of in the early morning. The mothers, who take turns to prepare the porridge mix at the school, add ingredients such as potatoes or sardines, which are typically served at home for lunch but not for breakfast (Observation notes, 18 April 2012).

The way in which members of Community H changed the meal seemed to derive from the community’s ingrained sense of responsibility for the collective good that was made evident, for example, in the discussions and activities of the savings group. But, the school seemed to play an important role as well by engaging with the community and creating room for meaningful participation. The excerpt from the observation notes below highlights this point:
At the meeting to discuss the school meal, the teacher invited parents to talk and reach agreements with wordings such as: “I wanted to know what you think”; “how is it going to be like?”; “there are other options”.

The parents, mostly mothers and some grandmothers, exchanged opinions, offered solutions, and even shared some frustration about how sometimes what they agreed on was not adequately fulfilled by some:

I get mad when the other [mothers] miss their day, I am going to stop coming if the others do. They are a lot of children […] they should wash their own cup, that’s how it is in [another school]
(Excerpts from observation notes, School H, 7 September 2011).

This kind of a dialogue highlights the intention of the teacher to create an inclusive and open participatory room where different opinions can come into play and decisions are made collectively.

Furthermore, the data show that Community H demonstrated genuine participation in the form of expressing their dissatisfaction with a previous teacher at the school and taking collective action to have her replaced. The citation below illustrates this point:

The teacher was very bad, so much that we needed to go several times to [the nearest city] to request that they change her. We really fought hard, we got organized, and really fought for it, and they finally fired her (Individual interview with parent, School H, 31 October 2011).

It seems that the members of Community H had established ways of working together to be critical, become empowered and undertake action, which echoes the democratic framework and the two-way collaboration between school and community, including parents, within the HPS theoretical framework (Clift and Jensen, 2005; Green and Tones, 2010; Simovska and McNamara, 2015; Simovska et al., 2006; Tones and Tilford, 2001; World Health Organization, 1998).

Absence of participation. As previously noted, the notions of bonding
and collaborating in Community S seemed to be especially weak. Not only inhabitants had conflicts and limited interaction with each other; during school and community observations, parents were seldom seen at the school or talking to teachers. Apart from the geographical barriers that could have prevented many of them from going, School S was also the only of the three that closed or locked the gate, and teachers did not hold office hours. School S was also the only school that during the time of the study did not register any print communication sent to the parents. Additionally, in observation of school meetings the headmaster restricted to transmitting information such as “breakfast will continue to be served at the beginning of the school day, as always, because as you know that is best” (Observation notes, School S, 6 October 2011). This illustrates how School S failed to provide windows of opportunity for community participation and engagement.

The lack of opportunity for meaningful participation could have been the reason behind the most common remark by the research participants from the farthest neighbourhood of Community S: parents wished that these children could attend the school at the village located in the other direction, farther away from the local school. As described by a member of Community S during an interview:

The school, we don’t like it up here in [our neighbourhood]. They are not that concerned with our children. We wish we could send our children to [a school in a different town]. If we could, we would. It is also far away, and when the river grows we can’t send the children to school and we cannot go either when there are meetings (Interview with parent, Community S, 21 April 2012).

This absence of community participation may have been the reason behind a lack of information about, or apparent disinterest in, how the SFP was implemented at School S. As a parent declared in an interview: “we do not know what they eat at school” (Interview with parent, Community S, 22 May 2012).

At the same time, the school and the parents were willing to take advantage of the SFP, as synthesized by one of the fathers in an interview:
It is a good thing that the children eat the [snack] [...] we cannot always guarantee that they are going to eat. I sometimes send them money; my wife sometimes sends them something to eat. But it is better if we know they are going to eat something at school, especially the youngest one (Interview with parent, Community S, 21 April 2012).

As the following excerpt indicates, the headmaster at School S appeared to be aware of both the conflicts in the community and the attitude of community members towards the school:

There are difficult feelings in the community, there are some negative feelings, we are working on that with the community (Interview with the headmaster, School S, 16 August 2011).

However, according to observation notes on the community and school, there was no evidence of the headmaster or the teachers prioritizing communication with parents or community members beyond information sessions at the school which only a portion of parents attended. Following the continuum of participation by Simovska (2007, 2008), this type of community involvement can be placed closer to token participation or absence of participation. There seemed to be lack of interest, ambivalence and low motivation to engage in the SFP by both the community and the school.

Concluding reflections
The findings show that although the concept of participation could be criticized for not fully acknowledging either the complexities of internal community imbalances or focussing on shared visions beyond the school, the meaningful participation of the parents and community members can be linked to a school’s empowered stance towards the SFP so that it is better tuned to local conditions, priorities and systems of meaning. The study further shows that the school headmaster or sometimes even a single teacher plays an important role in promoting or hindering community and parent participation in the shaping of the school health promotion and education practices. However, when participating is not valued or prioritized by the community, even a motivated teacher or headmaster may not be able to single-handedly encourage members to become engaged. The findings also point to the relevance of the geographical space, the socio-economic composition of the community, and the existence of non-governmental associations and
organizations for the establishment of a culture of community participation, ownership and engagement with the school work. It seems that the closer the community works together on wider issues of common concern, the more likely its members will be willing to be engaged with school health and education practices.

As mentioned earlier, the aim of the study was to contribute to the debate concerning health education and health promotion at school by analysing community participation in the SFP in rural schools in Ecuador. The study concludes that, in the critical interpretation of the HPS approach, a school which aims at improving both health and education outcomes of children would do well to work with and across the community, including parents, based on school- as well as community-identified priorities related to nutrition, health and well-being. Particularly in small, disadvantaged rural schools in low and middle income countries, the participation of the community and parents is essential to achieve the health promotion and education goals of both the school and the community.

Based on the study we argue that the notion of community, including parent, participation needs to be re-examined, re-conceptualized, and nuanced if the socio-ecological approach to school health promotion and education in small rural schools is to be consistent with its declared values of democracy, empowerment and social justice. At the same time, along with Rifkin (2009, 2014) we argue that despite the challenges due to diverse interpretations and enactments of community participation in practice, standardization and ritualization of the concept is neither recommendable nor possible. Communities are diverse and complex and participation is situated, and changes over time and place. Community participation is thus contingent on its composition, history, culture and tradition as well as the larger socio-economic and political context.

In rural disadvantaged schools in Ecuador, a lack of participation at school could entail that a community shifts its responsibility towards the state, leaving important decisions concerning school practices without minimal local scrutiny. The study also shows that when community participation which can be characterized as fairly genuine takes place, the school policy and practices can be modified, and even challenged and refuted to fit the local priorities, needs and values of the whole community for the benefit of both the school and the community.
In accordance with the HPS framework, it could be argued that better understanding, valuing and creating room for meaningful community and parent participation might help create better participatory space for students’ health and learning, through modifying, adjusting and negotiating the policy framings with the circumstances of their everyday lives, which include families and others in the extended local community. At the same time, limits to community participation may be necessary to ensure the school’s focus on education, through policy implementation and students’ learning and competence development related to food and school meals.

The study identified three clusters of tensions and ambiguities in relation to the HPS model, which call for further research:

(1) Participation within the HPS approach typically focusses on the student and on the school agenda; the notion of community participation at school can be seen to be better aligned with a socio-ecological health promotion perspective to include the community agenda too. If these clash, participatory HPS would involve more dialogue and negotiation, which can be time-consuming and difficult to enact in practice.

(2) By emphasizing the importance of participation the HPS model avowedly adheres to critical health education and promotion theory; brought consequently into play with community and families, the participatory HPS approach needs to consider that community participation could result in the possibility of the community challenging the social order at school, and the educational policies and practices. This poses challenges for school headmasters and leadership.

(3) When addressing community participation, counter-participating and non-participating can be also considered as legitimate forms of participating. In small rural communities this can be particularly challenging due to proximity and the intertwined interests linked to schools.

Acknowledging the limitations of the study due to the empirical data generated with three communities, and the possible loss of nuance in translating the empirical material from Spanish into English, we argue that the study contributes to a more refined understanding of policy implementation and the implications of a HPS approach to health education and health promotion in small rural schools. On the one
hand, by insisting on community and parent participation in policy implementation at schools when the contextual conditions are not optimal, it is possible that in small rural schools in low and middle income countries the HPS approach could spur further conflict where it did not, or should not, exist. On the other hand, not involving the community and parents in school matters can lead to lack of motivation and disengagement of the community with the school practices, which can make the difficult process of reconciling private and public responsibility related to health, particularly when food and meals are at stake, even more difficult.

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