



MAPPING OF POLICIES SHAPING THE AGENDA WITHIN HEALTH AND SUSTAINABILITY EDUCATION IN SCHOOLS

Katrine D. Madsen and Venka Simovska

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Authors: Katrine D. Madsen and Venka Simovska

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Introduction

Health and sustainability are important issues that schools need to address in their educational practices if they are to respond to societal challenges of a global and complex nature and foster children's competences to deal with these challenges in creative, socially responsible and productive ways.

The concepts of health and sustainability themselves, and related school practices, are value-laden and shaped by a number of policies on global, regional, national and local levels. Research points to a persistent gap between, on the one hand, political aims and objectives concerning health promotion and education for sustainable development and, on the other hand, the treatment of these topics in school educational practices -- both in terms of formal teaching and learning processes as well as the everyday life or "culture" of the school (Stevenson, 2007a; 2007b; Jourdan, 2011; Samdal and Rowing, 2013).

This paper maps the key international and national policy documents influencing work with health education/promotion and education for sustainable development within primary and lower secondary education in Denmark. This mapping will provide the foundation for further analysis of:

- the ways in which the concepts of health and sustainability are articulated, with particular focus on stated aims, strategies and competences required for health promotion and sustainable development
- the relevance of the above-mentioned conceptualizations for school-based health education/promotion and education for sustainable development
- the transformation processes which take place when international/national policies are interpreted and put into practice at municipal and school levels

In the following, we first outline the general conceptual foundation for the study. We then present the method for the policy mapping, followed by a chronological overview of the international and national documents of relevance for each of the thematic areas separately, as well as the documents of relevance for both health and sustainability. Finally we consider the status of the documents in relation to school practices.

Conceptual Basis

The mapping is situated within the paradigm of “whole-school approaches” to both health and sustainability education. This paradigm is characterized by common underlying values such as equity, agency, social justice and democracy. In this sense, both concepts, health and sustainability, can be seen as “essentially contested”; that is, socially constructed and open to diverse, often conflicting interpretations. They can be characterized as contested according to the criteria that Tones & Tilford (2001) and Green & Tones (2010) propose on the basis of previous discussion (e.g. Bambra et al., 2003). According to these criteria, the concepts of health and sustainability can be seen as contested because:

- they are complex, ambiguous and value-laden,
- their definitions are persistently vague, their meaning depends on the sociocultural, historical and political contexts,
- their different interpretations are mutually competitive and exclusive, involving emotional reactions, and
- they hold a degree of authority and credibility

These characteristics, naturally, pose specific challenges for schools when it comes to determining the aims, content, teaching strategies and expected outcomes of education for health and sustainability.

Within the health education field, the whole-school paradigm has primarily been developed through the health-promoting schools initiative. In Europe, the notion of “health-promoting schools” (HPS) emerged in the 1980s. In accordance with the main principles and developments in the area of health promotion in general, health promotion in schools is construed as a social process of individual and community empowerment related to health and learning for health. Health is understood as a positive and broad concept, emphasizing wellbeing, rather than absence of disease, and the importance of social determinants and living conditions, in addition to individual lifestyles, for health promotion. The European Network of Health Promoting Schools (ENHPS) was officially established in 1991, drawing on the five principles of the Ottawa Charter (WHO, 1986); a health-promoting school was defined as an educational setting that attempts to constantly develop its capacity for healthy learning, working, and living (WHO, 1991, 1998). The current work on school health promotion in Europe is organized through the Schools for Health in Europe (SHE) network, with 43 participating countries each represented by a national coordinator (Buijs, 2009; Simovska, 2012). Building on the previous work within ENHPS and the International Union of Health Promotion and Education (IUHPE) (e.g. Denman et al., 2002; Clift and Jensen, 2005; IUHPE, 2009; St Leger et al., 2010), the SHE network endorses five core values (equity, sustainability, inclusion, empowerment and action competence, and democracy) and six pillars (whole school approach to health, participation, school quality, evidence, schools, and communities) as a common foundation for the SHE approach to school health promotion (Buijs, 2009). The whole-school

environment is seen as an important arena for action if a school is to be a health promoting school. This means that health promotion in schools goes beyond intervention at the level of individual behaviour, skills or knowledge and seeks to produce organizational change. This is achieved by strengthening the physical and social environment, including interpersonal relationships, school management, policy structures, and teaching and learning conditions, as well as teaching and learning strategies. It is considered important that a health-promoting school is a “learning” and “growing” community which, through social and organizational development and networking with the local community, creates new school capacities that contribute to positive pupil development (e.g. identity development, active participation and health-related action competence), better educational outcomes, and the health and well-being of all members of the school community, including pupils, teachers and non-teaching staff.

In Denmark, the health promoting schools approach has been most apparent in the development of the so-called democratic (Jensen, 2000) or critical (Simovska and Jensen, 2012; Simovska and Carlsson, 2012) approaches to health education, emphasizing the importance of the educational outcomes of health-promoting schools. Pupils’ action competence, or ability to bring about health-promoting changes in their own lives and in the determinants of health, is emphasized as one of the main educational aims.

Action competence has also been emphasized as a key educational aim, or ideal, within education for sustainable development, with origins in environmental education (Schnack, 2003). Sustainable development in a broad sense is defined as: “... development that meets the needs of the present without compromising the ability of future generations to meet their own needs” (Our Common Future, 1987: chapter two: 1). Here too the whole-school approach has been suggested for working with education for sustainable development in schools (Læssøe et al., 2009). Thus, both thematic areas - health promotion and education for sustainable development in schools - have been suggested as possible frameworks for comprehensive school development focusing on the following: creating democratic, inclusive learning environments; integrating values with educational goals, content and teaching strategies; emphasizing the importance of the development of pupils’ meaningful participation and action competence in addition to providing traditional, subject-related knowledge, skills and attitudes.

The concept of action competence is embedded in liberal education theory, broadly determined as a “formative ideal in a democratic perspective” (Jensen and Schnack, 1994: 7) that provides a valuable framework for observing, describing and reflecting on educational processes (Carlsson, 2001). Schnack defines it as a competence to engage in socially responsible action. In his words, action competence refers to:

...capability – based on critical thinking and always incomplete knowledge – to involve yourself as a person with other persons in responsible actions and counter-actions for a more humane world. (Schnack, 1994: 190)

Schnack (2000) notes that the term competence implies capability, willingness and qualified reflection on behalf of the individual. It also involves active social responsibility and care or, in other words, sustainable efforts to change. However, even though conceptualized as “competence”, action competence is not an objective, or a learning outcome to be reached through particular teaching and learning strategies. Moreover, as Schnack further contends, it is impossible to operationalize it and measure its development. It is an abstraction, an ideal, a “source of inspiration and irritation” related to basic educational values belonging to the democratic rather than the scientific rational meta-discourse (Carlsson, 2001). In other words, action competence is:

...situated in a non-place, a utopia, where it seems to get along very well in the company of such concepts as liberal education, democracy, human rights, sustainable development and equal (“herrschaftsfrei”) communication. All of these concepts live for, and indeed off, the fight against violence and oppression (Schnack, 2000: 107).

The discussion about the constitutive dimensions or the “content” of action competence is actually a discussion about values. Generally speaking, the values that are fundamentally related to the concept of action competence are anchored in the fields of political education, humanist philosophy and critical theory. Political education is synonymous with liberal education. Schnack (ibid.) defines it by contrasting it with vocational training and with education as adaptation or enculturation. The difference from vocational training is based on the fact that the liberal (political) education approach is concerned with more wide-ranging aims and outcomes than the specific competences of a particular profession. Liberal education involves general educational outcomes related to the fact that all people, regardless of their profession, are part of the social system or community and should be able to function as such. This naturally presupposes a certain degree of adaptation and socialisation, but also the self-determination and self-realisation of individuals as autonomous, independent beings, capable of thinking and acting creatively and critically. The dialectic between enculturation and self-actualisation shapes the second distinguishing characteristic of liberal education - the difference between liberal education’s view of education as for the autonomy, independence and creativity of learners, and a view of education as simple adaptation.

Similarly, the humanist approach, as the source of values for liberal education, emphasises that the main task of education is the development of the learner as a “whole” person; i.e., as a social, emotional, acting and knowing being (Schnack, 2000). Moreover, the focus of humanist education is on the “person in process” (Simovska, 1996, 1997), considering ever-shifting, fluid identities in the rapidly changing, globalised world. This inevitably implies that prescribing a certain predetermined body of knowledge, behaviours and ways of thinking that learners have to study, accept and perform

should not have a place among educational values; the humanistic perspective holds that it might be possible to compel children to attend school, but it is impossible to make them learn.

Consequently, if education is to embrace action competence as an educational ideal, it has to involve the critical cognitive dimension. Critical thinking is seen as an important dimension of action competence (Jensen, 2000; Schnack, 2003, 2000; Carlsson and Simovska 2012). Embedded in critical theory, it makes reference to emancipated, independent thinking, an ability to reflect on both individual (private) levels and social (structural) levels and to combine factual and value-related information. Critical thinking presumes an ability to articulate a defensible decision perspective, to make rational choices under uncertainty (Gregory, 1991) and to think in qualified, creative and socially responsible ways. Furthermore, it involves both thinking and acting as a political subject, rather than as an object of external control and influence (Schnack, 2000). In contrast to Schnack, Jensen (2000), and Carlsson and Simovska (2012) have suggested that it is possible to discuss the concept in more instrumental ways and to attempt to operationalize it. Thus, within the health promoting schools discourse, action competence has been operationalized through affective and cognitive components alike, e.g. knowledge, commitment, visions, action experiences etc.

In summary, the following dimensions can be seen as common characteristics of health education/promotion and education for sustainable development in schools, embedded within the conceptual background discussed above:

Time and place: The place dimension indicates that the decisions and actions we take locally concerning health and sustainability have consequences for others, including those living in other parts of the world. The time dimension implies that the actions of today have consequences in the future. To work with these somewhat abstract and complex dimensions in school-based teaching poses specific challenges in terms of pedagogy and curriculum. Visions, fantasy and empathy can play an important part in the pedagogical work, but consideration should also be given to specific consequences in relation to time and place.

Self-reflexivity: This dimension centres on the fact that the present, as well as the future, is filled with uncertainty and complexity; the knowledge we possess today will not be sufficient in the future in a sustainability perspective (Scott and Gough, 2003) or in a more general, humanistic perspective (Biesta, 2010). Therefore, it is important to foster pupils' capacity to handle uncertainty and complexity. Both health education and education for sustainable development imply learning without specific answers, and the educational emphasis is on the position of "not-knowing", and continuous dialogue and exploration rather than fixed answers (Læssøe et al, 2009). The key challenge for efforts to implement sustainability and health education in schools therefore include facing the very basics questions: "what is sustainability?" and "what is health?" respectively.

Critical dimension: Both health promotion and sustainable development include negotiation between and reflection concerning different interests, which may be conflicting, but are nevertheless legitimate

(Schnack 2003). At the same time, both health promotion and sustainable development are also about common interests transcending individual lifestyles and needs. It is vital that this dimension be included in school education.

Interdisciplinarity: The interplay between individual, social, cultural, environmental, structural and economic dimensions is central to both health education/promotion and education for sustainable development. Issues such as, for example, climate change, chronic disease or mental health are of a complex nature and cannot be addressed within a single discipline. Therefore, both thematic areas are impossible to plan as separate subjects, instead constituting cross-subject and cross disciplinary fields. This is an advantage as it allows for the inclusion of different perspectives in teaching and the asking of different questions rather than suggesting simple answers to complex problems (Læssøe et al., 2009), but it is also a challenge as it is difficult to put in practice.

Finally, it would be fair join Schnack (2004) in emphasising that, although seen as critical and action-oriented, this approach to health education/promotion and education for sustainable development in schools argues that schools for health and sustainability should not be treated as an instrument to “fix” the societal problems related to health and/or sustainability. The aim is primarily educational; that is, fostering pupils’ competences to assume critical positions, understand and act with a view to influencing the conditions for health and sustainability in a democratic society, despite an incomplete knowledge base, fluctuating conditions, and the need to consider contrasting interests.

Method

Within the conceptual background discussed above, the mapping is focused on the period from the end of the 1980s until 2012, based on the assumption that the central documents within both fields have been formulated during this period. The search targeted a wide range of documents, including policies, recommendations, guidelines and strategies published by the key international and national bodies. At international level, the search was focused on international organizations, primarily UN, WHO and EU. Documents published by the International Union for Health Promotion and Education (IUHPE) were also included as this network collaborates closely with WHO in the area of school-based health promotion and education. Also, the conference resolutions from the three European Conferences on Health Promoting Schools (Thessaloniki in Greece, Egmond in the Netherlands and Vilnius in Lithuania) are included, as well as a few Nordic documents of relevance for education for sustainable development. As health education and education for sustainable development within primary and lower secondary education in Denmark constitute transversal dimensions to be integrated across the boundaries of subject and year group, national learning objectives have been drawn up for each of the themes, which are implemented in subject-specific or more general curriculum guidelines. Therefore, the search at national level focused on policy and strategy documents, school curricula, national guidelines and inspiration material published by the Danish Ministry of Education and the Ministry for Children and Young People.

The search strategy included a general review of publications at the websites of the above mentioned international and national bodies, and a keywords-based search. The keywords used were (in English and Danish): sustainable development; education for sustainable development; sustainability; climate change; the environment; environmental education; health; health education; health promotion.

The criteria for inclusion of the documents in the mapping included:

- The documents are central in shaping the fields of practice of health promotion and sustainability in general and therefore have relevance for school practices,
- The documents explicitly mention health promotion and/or sustainable development in relation to schools, either in the title or in a specific section.

Initial Findings: the map

Table 1 below presents the documents we identified in a chronological order. The documents are categorised as relevant for education for sustainable development; for health promotion at school; or for both areas. The international documents are presented first, followed by the national documents.

INTERNATIONAL PUBLICATIONS

1980 – 1990	<p>EDUCATION FOR SUSTAINABLE DEVELOPMENT</p> <p>Our Common Future 1987. The World Commission on Environment and Development, UN</p>
	<p>HEALTH PROMOTION</p> <p>The Ottawa Charter for Health Promotion, WHO 1986 Adelaide Recommendations on Healthy Public Policy, WHO 1988.</p>
	<p>COMMON DOCUMENTS</p> <p>Convention on the Rights of the Child, UN 1989.</p>
1990 – 2000	<p>EDUCATION FOR SUSTAINABLE DEVELOPMENT</p> <p>Agenda 21, chapters 25 & 36 1992, Rio. United Nations Environmental Programme (UNEP)</p>
	<p>HEALTH PROMOTION</p> <p>Sundsvall Statement on Supportive Environments for Health, WHO 1991 The Salamanca Statement and Framework for Action. UNESCO 1994. Jakarta Declaration on Leading Health Promotion into the 21st Century, WHO 1997 Health 21 – health for all in the 21st century, WHO/European, 1998</p>
	<p>EDUCATION FOR SUSTAINABLE DEVELOPMENT</p> <p>Haga Declaration, Baltic 21, 2000. Baltic Sea States’ Declaration on Environment and Sustainable Development The UNECE Strategy for Education for Sustainable Development, 2005 UN Decade 2005-2014 for Education for Sustainable Development, UNESCO The EU Sustainable Development Strategy, 2006 UNESCO Strategy for Action on Climate Change, 2008 Bonn Declaration, UNESCO, 2009 Learning from each other: the UNECE Strategy for ESD, UNECE, Geneva, 2009</p>
2000-2010	<p>HEALTH PROMOTION</p> <p>Health Promotion: Bridging the Equity Gap, WHO 2000 The Bangkok Charter for Health Promotion in a Globalized World, WHO 2005 The Nairobi Call to Action, WHO 2009 Achieving health promoting schools: guidelines for promoting health in schools, IUHPE Better Schools through Health, The Vilnius Resolution, 2009</p>
	<p>COMMON DOCUMENTS</p>

2010 –

United Nations Millennium Declaration, UN 2000
 Recommendation of the European Parliament and of the Council on key competences
 Improving competences for the 21st Century: An Agenda for European Cooperation on
 Council conclusions of 12 May 2009 on a strategic framework for European cooperation

EDUCATION FOR SUSTAINABLE DEVELOPMENT

Climate Change Education for Sustainable Development, UNESCO, 2010.
 Education for Sustainable Development, Conclusions of the Council, EU, 2010
 Learning for the future – competences for education for sustainable development,
 UNECE, 2012

HEALTH PROMOTION

The new European Policy for Health – Health 2020 Vision: Vision, values, main directions
 and approaches, WHO/Europe 2011.
 Early childhood education and care: providing all our children with the best start for the
 world of tomorrow. Conclusions of the Council, EU, 2011
 Facilitating Dialogue between the Health and Education Sectors to Advance School
 Health Promotion and Education, IUHPE, 2012.

HEALTH PROMOTION

Council conclusions on the social dimension of education and training, EU, 2010
 A Resolution to Promote Health, Equity and Sustainable Development in Schools, IUHPE
 2012.

NATIONAL PUBLICATIONS

1990 – 2000

EDUCATION FOR SUSTAINABLE DEVELOPMENT

'A touch of green' ('Det grønne islæt'), foreword to the Danish Act on primary and
 lower secondary education 1993, Danish Ministry of Education
 Objectives and central areas of knowledge and proficiency (Formål og centrale
 kundskabs- & færdighedsområder). Danish Ministry of Education 1994. Biology, science
 and technology, social studies etc.

HEALTH PROMOTION

Health and sex education and family studies (Sundheds- og seksualundervisning og
 familiekundskab). 1994, Danish Ministry of Education.

COMMON DOCUMENTS

Students' all-round development (Elevernes alsidige udvikling). Danish Ministry of
 Education, 1994.

2000-2010

EDUCATION FOR SUSTAINABLE DEVELOPMENT

Local Agenda 21, Danish Ministry of the Environment, 2000.
 Common Objectives (Fælles Mål) 2009, Danish Ministry of Children and Education.
 History, social studies, home economics, biology. etc.
 Education for Sustainable Development – a strategy for the United Nations Decade
 2005-2014, 2009. Danish Ministry of Education.

2010 –

HEALTH PROMOTION

Healthy food and physical activity in schools (Sund mad og fysisk aktivitet i skolen), Danish Ministry of Education 2004

The government’s programme for children’s health (Regeringens indsats for børns sundhed). Danish Ministry of Health, 2007

Inspiration for health education in primary and lower secondary education (Inspiration til folkeskolens sundhedsundervisning). Danish Ministry of Education 2008.

COMMON DOCUMENTS

Revision of the Danish Act on primary and lower secondary education 2003

Revision of the Danish Act on primary and lower secondary education 2006

Teacher training (Læreruddannelsen) 2006

Students’ all-round development. Common Objectives, subject booklet 47 (Udvikling af elevernes alsidige udvikling. Fælles Mål, Faghæfte 47). Danish Ministry of Education 2009

EDUCATION FOR SUSTAINABLE DEVELOPMENT

The ESD portal, EMU (UBU portalen, EMU’en). Danish Ministry of Children and Education, 2012.

HEALTH PROMOTION

Health and sex education and family studies. Common Objectives, subject booklet 21 (Sundheds-seksualundervisning og familiekundskab. Fælles Mål, Faghæfte 21), Danish Ministry of Education 2009

Physical activity and exercise in primary and lower secondary education (Fysisk aktivitet og motion i folkeskolen), Danish Ministry of Education 2010

COMMON DOCUMENTS

New Nordic School (Ny Nordisk Skole), Danish Ministry of Children and Education, 2012.

Table 1: Overview of the policy and other documents of relevance for school-based health education/promotion and education for sustainable development

Perspectives

On the basis of the conceptual background and the identified documents in the mapping, and with reference to the current research in the field we point to the following lines of discussion that could be interesting to examine in more detail in the further work.

Who sets the agenda within health education and education for sustainable development?

A tendency highlighted by research is that guidelines and recommendations from transnational and cross-national organizations are becoming increasingly influential in shaping national educational policies (Moos, 2009). Furthermore, it seems that decisions are made at many different levels and in numerous arenas, often within a grey zone between policy, recommendations and the work of global networks (Carlsson and Hoffmann, 2004; Beech, 2006). Sometimes the influence is indirect; authorities use the global principles, policies and recommendations to provide a rationale and justify reforms and revisions of national education policies. In other instances, the influence is more direct, using social technologies such as international comparisons, indicators, “best practices” etc. to endorse a specific agenda (PISA, HBSC etc.). Arguably, this is particularly strong within health education and education for sustainable development, as they are linked to wider societal economic and social interests that are keen to influence the educational agenda, which would otherwise normally be within the domain of national policy. The argument is that health and sustainable development are among the highest priority areas of common interest, beyond national borders. Moos (2009) calls such international policies and reports within education “soft laws” resulting in “soft governance” - in contrast to “hard laws” which are legally binding, soft laws rely on persuasion, encouragement, exchange and inspiration with a view to influencing the values and norms related to education. Often, the “background” negotiations through which criteria, indicators and recommendations are established are not transparent and explicit (Moos, 2009; Timmermans and Epstein, 2010). National recommendations too can sometimes operate in a grey zone between hard and soft laws. The recent recommendations concerning the “New Nordic School” by the Danish government (MBU, 2012) can be seen as assuming the status of a soft law. While not legally binding, they seem to have increasing influence on the values and norms in schools in Denmark, as well as on educational development and research agendas.

What gets lost in translation on the two-way trajectories between policy and practice?

Research continuously points to a gap between policy and practice, both in health education and education for sustainable development within schools (Stevenson, 2006; Jourdan, 2011, Simovska et al, 2012; Samdal and Rowing, 2013). Both areas are characterized by lofty political aspirations and rigorous demands placed upon schools which are not always in line with the realities of practice in schools or supported by appropriate resources for educational development. There is a tendency that both health education/promotion and education for sustainable development only take heed of the

policy and research levels, while failing to connect with priorities and systems of meaning within schools. The whole-school approach and the overall pedagogy behind health education/promotion and education for sustainable development can be challenging in relation to the existing school structures and classroom-based teaching as they imply, among other things, changes in the treatment of knowledge and a never ending epistemological work (Stevenson, 2006; 2007a; 2007b).

What are the consequences for the roles and competences of teachers?

There are tensions between, on the one hand, societal interests, and the educational goals and objectives articulated in policy, and, on the other hand, the professional and personal interests, goals and objectives of individual teachers and embedded in local educational contexts, which are specific to education for health and sustainable development in school. Given the culture of accountability, evidence-based practice and other pressures teachers encounter in their everyday work, they need to navigate and balance between competing conditions and demands (Scott and Gough, 2003; Jourdan, 2011). Health education and education for sustainable development would not normally be high on their agenda, partly because the topics themselves address wider social and societal changes in a longer term perspective and imply social and personal development of pupils; neither of these is easy to measure and demonstrate immediate results. Furthermore, in Denmark, both thematic areas are cross-curricular, they are not exam subjects, and it is pretty much up to the individual school or even the teacher to decide how, how much and when these topics should be integrated in teaching. As such, a fundamental tension exists between international and national guidelines, principles and recommendations on the one hand, and the teachers' professional judgment on the other. Research suggests that that there is a risk that the soft laws, especially high profile international policies and recommendations, undermine teachers' professional expertise (Moos, 2009; Stevenson 2007a; Stevenson 2007b). This calls for professional development of teachers in these areas and a strengthening of reflexivity in practice so that policy recommendations can be implemented in combination with existing experience and adapted to the specific context of the school.

References

- Beech, J. (2006). Redefining Educational Transfer: International Agencies and the (Re) production of Educational Ideas. In: *Identity, Education and Citizenship – Multiple Interrelations*. Sprogøe, J., Winther-Jensen, T. (eds). Peter Lang GmbH).
- Biesta, G.J.J. (2010). *Good Education in an Age of Measurement: Ethics, politics, democracy*. Boulder, Co: Paradigm Publishers.
- Buijs G. (2009). Better Schools through Health: networking for health promoting schools in Europe. *European Journal of Education*, Vol. 44 No. 4, pp. 507-520.
- Carlsson, M. (2001). *Evaluering af sundhedsundervisning i folkeskolen: didaktisk set. (Evaluation health education in elementary schools)*. PhD dissertation, Copenhagen: The Danish University of Education.
- Carlsson, M. S., & Simovska, V. (2012). Exploring Learning Outcomes of School-based Health Promotion: a multiple case study. *Health Education Research*, 27(3), 437-447.
- Carlsson, M. & Hoffmann, B. (2004). Netværkssamfundet – nye muligheder og vilkår for samarbejde [The network society – new opportunities and conditions for partnerships]. In: Samarbejde om bæredygtig udvikling. Nye perspektiver på samarbejde mellem skole og eksterne aktører [*Partnerships for sustainable development. New perspectives on partnerships between schools and external stakeholders*]. Carlsson, M. & Hoffmann, B. (eds.). Danmarks Pædagogiske Universitets Forlag.
- Clift, S. and Jensen, B. B. (eds.) (2005). *The Health Promoting School: International Advances in Theory, Evaluation and Practice*, Danish University of Education Press, on behalf of the European Network of Health Promoting Schools, Copenhagen.
- Denman, S., Moon, A., Parsons, C., and Stears, D. (2002). *The Health Promoting School: Policy, Research and Practice*, London and New York: RoutledgeFalmer
- Gregory, R. (1991). Critical thinking for environmental health risk education. *Health Education Quarterly*, 18, 273-284.
- International Union of Health Promotion & Education (IUHPE) (2009). *Achieving Health Promoting Schools: Guidelines for promoting health in Schools*, available at <http://www.iuhpe.org> [accessed 12 November 2012].
- Jensen, B.B. (2000). Handlekompetence, sundhedsbegreber og sundhedsviden [Action competence, health concepts and health knowledge]. In: Læring i sundhedsvæsenet [*Learning within the health services*]. Hounsgaard, L. & Eriksen, J. J. (eds.). Gyldendal Uddannelse.
- Jensen, B.B. & Schnack, K. (1994). Action Competence as an Educational Challenge. In Jensen, B. B. and Schnack, K. (eds), *Action and Action Competence as Key Concepts in Critical Pedagogy*. Didaktiske studier, Studies in Educational Theory and Curriculum, vol.12. (5-19). Copenhagen: Royal Danish School of Educational Studies.

- Jourdan, D. (2011). *Health Education in schools. The Challenge of Teacher Training*. Saint-Denis: Inpes, Coll. Santé en action.
- Læssøe, J., Schnack, K., Breiting, S., Rolls, S. (2009). *Climate Change and Sustainable Development: The Response from Education. A cross-national report from international alliance of leading education institutes*. The Danish School of Education, Aarhus University.
- Moos, L. (2009): A general context for new social technologies. *Nordic Studies in Education*, Nr 1.
- Samdal, O., & Rowling, L. (2013). (Eds.), *The Implementation of Health Promoting Schools: Exploring the theories of what, why and how*. London and New York: Routledge Falmer.
- Schnack, K. (2000). Action Competence in a Curriculum Perspective. In: Jensen, B.B., Schnack, K. and Simovska, V. (eds), *Critical Environmental and Health Education: Research Issues and Challenges*. (107-127). Copenhagen: Research Centre for Environmental and Health Education, the Danish University of Education.
- Schnack, K. (2003). Action Competence as Educational Ideal. In: *The internationalization of curriculum studies*. Bonna T., William E. D., Hongyu W., William F. P. (eds.)
- Schnack, K. (1994). Some Further Comments on the Action Competence Debate. In Jensen, B.B. and Schnack, K. (eds), *Action and Action Competence as Key Concepts in Critical Pedagogy*. Didaktiske studier, Studies in Educational Theory and Curriculum, vol.12. (185-191). Copenhagen: Royal Danish School of Educational Studies.
- Schnack, K. (1995). Environmental Education as Political Education in a Democratic Society. In Jensen, B.B. (ed), *Research in Environmental and Health Education*. (17-29). Copenhagen: Research Centre for Environmental and Health Education, The Royal Danish School of Educational Studies.
- Scott, W. & Gough, S. (2003). *Sustainable Development and learning. Framing the issues*. Routledge.
- Simovska, V. (1996). What is School For? A New Viewpoint toward the Goals of Education. (in Macedonian). *Educational Reflections, Journal on Theory and Practice of Education* Vol. 4. 12-16.
- Simovska, V. (1997). Humanistic Education? Risk and Resilience in Relation to School Achievement and Adaptation. *Journal of Applied Psychology of Children and Adolescents*, Vol. 1 no. 1 (in Macedonian) 77-97.
- Simovska, V. (2009). Participation og læring for sundhedsfremme: et sociokulturelt perspektiv [Participation and learning for health promotion: a socio-cultural perspective]. In: Sundhedspædagogik og sundhedsfremme. Teori, forskning og praksis [*Health education and health promotion. Theory, research and practice*]. Carlsson, M., Simovska, V. & Jensen, B.B. (eds.). Aarhus Universitetsforlag.
- Simovska, V. & Jensen, J. M. (2012). Sundhedspædagogik og sundhedsfremme: Principper og sammenhænge [*Health education and health promotion: principles and contexts*]. In:

Sundhedspædagogik i sundhedsfremme [*Health education in health promotion*]. Simovska, V. & Jensen, J. M. (eds.) Gads Forlag.

- Simovska, V., Dadaczynski, K., & Woynarowska, B. (2012). Healthy eating and physical activity in schools in Europe: a toolkit for policy development and its implementation. *Health Education*, 112(6), 513-524.
- Simovska, V., & Carlsson, M. S. (2012). Health-promoting changes with children as agents: findings from a multiple case study research. *Health Education*, 112(3), 292-304.
- Simovska, V. (2012). Guest editorial: What do health-promoting schools promote?: processes and outcomes of health-promoting schools. *Health Education*, 122(2), 84-87.
- St Leger, L., Young, I., Blanchard, C. and Perry, M. (2010). *Promoting health in schools. From Evidence to Action, 2010*. Available at <http://www.iuhpe.org> [accessed 18. October 2012].
- Stevenson, R. B. (2006). Tensions and transitions in policy discourse: recontextualizing a decontextualized EE/ESD debate. In: *Environmental Education Research*, Vol. 12 Nos. 3-4.
- Stevenson, R. B. (2007a). Editorial. In: *Environmental Education Research*. Vol. 13, No 2.
- Stevenson, R. B. (2007b). Schooling and Environmental/sustainability education: from discourses of policy and practice to discourses of professional learning. In: *Environmental Education Research*. Vol. 13, No 2.
- Timmermans, S. and Epstein, S. (2010). A World of Standards but not a Standard World: Toward a Sociology of Standards and Standardization. *Annual Review of Sociology*, Vol. 36.
- Tones, K. and Tilford, S. (2001). *Health Promotion: Effectiveness, Efficiency and Equity*. (3rd edition). London: Chapman & Hall.
- Green, J. and Tones, T. (2010). *Health Promotion: Planning and Strategies* (2nd edition). Sage.
- World Health Organisation (1986). *Ottawa Charter for Health Promotion*. First International Conference on Health Promotion, Ottawa 17-21 November. Copenhagen: WHO Regional Office for Europe.
- World Health Organisation (1991). *Background, Development and Strategy Outline of the Health Promoting Schools Project*. Copenhagen: WHO Regional Office for Europe.
- World Health Organisation (1998). *The WHO Approach to Health Promotion Settings for Health*. Geneva: World Health Organisation.