



IPPN

OBESITY AND OVERWEIGHT IN CHILDREN IN IRELAND

Prepared for: the Minister for Education and Skills
and the Children's Rights Alliance

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INTRODUCTION

The Irish Primary Principals' Network (IPPN) is the officially-recognised professional body for the leaders of Irish primary schools. Established in 1999, IPPN is an independent, not-for-profit voluntary organisation with a local, regional and national presence. Recognised by the Minister for Education and Skills as an official Education Partner, IPPN works with the Department of Education and Skills (DES), the National Parents' Council, management bodies, unions, education agencies, academic institutions and children's charities towards the advancement of primary education. IPPN articulates the collective knowledge and professional experience of over 6,400 Principals and Deputy Principals, leading Ireland's 3,200+ primary schools.

IPPN has worked with the Children's Rights Alliance over the years and supports its work. This submission is in response to its draft submission entitled '*Reducing obesity and overweight in children in Ireland through prevention and early intervention policy*'. While we advocate for teaching and learning and our vision of 'Empowered Leaders; Inspired Learners, IPPN's views are based primarily on our role in supporting school leadership and management to deliver on this vision; thus school leadership is the 'lens' through which we view the issues around child obesity and overweight. Our submission is based on work we have done in this area over the past few years in relation to emotional wellbeing and also physical education.

1. CHILDREN'S RIGHTS ALLIANCE PROPOSALS

IPPN fully supports the recommendations as set out in the Children's Rights Alliance position paper, particularly those that relate to schools and the 'universal interventions' approach. The data in the report correlate closely with our own data as set out in our position paper on Physical Education in Schools, and are sobering.

1.1. IPPN RESPONSE

A number of points in relation to the implications for schools of the recommendations in the CRA report need to be highlighted:

1. Most schools do not provide school meals and therefore are not in a position to control pupils' food choices
2. Many of those schools that are funded to provide school meals find it very challenging to manage the programme and meet the standards set out owing to inadequate preparation, cooking, storage and disposal facilities, and inadequate funding.
3. In relation to healthy food choices in schools, most schools have implemented Healthy Eating policies in line with recommendations by the HSE in its [Healthy Eating for Children](#) publication.
4. Schools are not in a position to 'police' children's lunchboxes but do encourage pupils and parents to choose healthy options. Many schools do operate a 'ban' on unhealthy snacks and fizzy drinks, for example, but enforcing this can be challenging, as ultimately it is a matter of parental choice
5. IPPN agrees that there are significant barriers to rolling out and introducing multi-component interventions, not least the physical infrastructure in school buildings
6. IPPN further agrees that early intervention in the home is the most critical factor in influencing and improving child nutrition and, by consequence, obesity and overweight levels
7. Any initiative to introduce kitchens into primary schools would need input from school leaders and the staff that would manage these kitchens, to ensure they would be fit for purpose.

It is worth noting that the vast majority of primary schools do not have vending machines thus the challenges faced by post-primary schools seeking to supplement school funds do not generally apply

2. PHYSICAL EDUCATION IN SCHOOLS

IPPN has made various submissions to government in recent years in relation to the resourcing and the emphasis placed on the teaching of Physical Education (PE) in our primary schools. Evidence continues to mount that lifestyle practices are contributing to an increase in passive activities amongst children. The ESRI Growing Up in Ireland research initiated in 2009 pinpointed this emerging reality when it revealed that more than a quarter of our nine year olds were overweight. The seriousness of the situation has escalated considerably since that initial report.

IPPN believes that a renewed focus on encouraging physical activities at primary school level is both necessary and desirable. This focus must also encompass other areas of the primary school curriculum such as Social, Personal and Health Education (SPHE) and Emotional Wellbeing. The primary school curriculum must strike a balance between learning and physical and emotional wellbeing, a balance that currently does not exist.

While IPPN is not advocating that a renewed focus on physical education in our primary schools will solve all fitness- or health-related issues in society, the World Health Organisation report (April 2015), which shows that close to 350,000 children are estimated to be either overweight or obese in Ireland (more than half the primary school going population), is truly a frightening statistic.

International research clearly points to the positive effects of physical activity in supporting a healthy mind and body. International health experts recommend 45 minutes of vigorous physical activity per day for primary school children, though all of this does not necessarily have to be engaged in during school hours. International education systems reflect this reality through appropriate accommodation of adequate PE timetabling in the curriculum.

Our European neighbours place a far higher emphasis on PE than we do in Ireland. England, Scotland and Portugal timetable PE for 2 hours per week at primary level. The Polish education system goes even further by timetabling an allocation of 3 hours per week.

Further afield, PE is a mandatory subject in most Asian countries. In South Korea, it is mandatory to timetable PE in primary schools for 3 hours per week while in Singapore 2 hours is allocated in addition to compulsory fitness tests. In Canada, there is an allotment of 20 minutes of physical activity per day and the majority of schools in the US, with the exception of seriously deprived areas, have PE for 40 minutes four times weekly. The situation is broadly similar in New Zealand with a weekly allocation of 2 hours or 30 minutes' physical activity per day.

Towards Active Bodies and Minds

Learning must be a holistic experience for all children and there is an onus on schools to promote a healthy active lifestyle to complement other school learning experiences. In that regard, increased investment in physical education would enable schools to provide that holistic experience and would simultaneously shave millions of euro off future health budgets.

Research indicates that there is a strong link between obesity and low levels of physical activity. There is also evidence to suggest that there is an equally strong link between obesity and socio-economic disadvantage. Schools in disadvantaged areas do not possess fundraising capabilities and depend

entirely on Department funding to purchase, replace and upgrade PE equipment. Unfortunately, grants supporting Physical Education in schools have dried up completely in recent years.

IPPN believes that strong leadership is required to address children's diet, exercise and fitness and that partnership with parents is central to that. The proposed Parent and Student Charter may offer opportunities in that regard, as it should strengthen the relationship between schools, parents and students and provide a platform to agitate for initiatives that will bring about change.

Government policy at present is not supporting schools in fostering healthy living and emotional well-being from an early age. This failure is being reflected in a changing mental health landscape in schools. An IPPN survey conducted in January 2015 revealed that the number of principals who saw obesity as the greatest challenge impacting on children's welfare had doubled in 5 years. In that same survey, 89% of the 810 respondents said that the time allocated to both PE and SPHE in schools should be increased despite the fact that schools already operate an overcrowded curriculum.

2.1. IPPN RECOMMENDATION

Based on survey returns, research data and feedback from school leaders nationally, IPPN puts forward the following recommendations to the various Departments of government:

- IPPN advocates the concept of 'Physical Literacy' where a school, under the leadership and guidance of the Principal, promotes the holistic development of the child including physical competence, motivation, confidence and knowledge and understanding of the importance of physical health.
- Increase the curriculum time allocated to physical education activities to two hours per week, which may include 30 minutes taught through the medium of Gaeilge.
- Physical Education should be integrated meaningfully into other strands of the curriculum such as music and drama.
- The promotion of a physical education atmosphere in schools such as the provision of designated play areas for Junior and Senior Infant pupils and activity-based initiatives.
- The provision of a multi-annual budget to purchase, replace or upgrade indoor and outdoor physical education equipment.
- Adequate funding to cover all strands of the PE curriculum.
- The provision of indoor and outdoor PE facilities in all schools to ensure the various strands of the curriculum can be delivered.
- The development of a national strategy for Emotional Wellbeing.
- Double the time allocation for the teaching of SPHE in our primary schools to 1 hour per week.
- The new 4-year Initial Teacher Training course should contain a renewed emphasis on dedicated PE modules containing clearly-defined learning outcomes. A module dedicated to Health and Nutrition would also provide newly-qualified teachers with the tools to promote a positive attitude towards healthy foods and healthy living.
- The provision of ongoing professional development for all teachers in the areas of physical education and emotional well-being.
- A total ban on the targeting of children by multi-national companies in their quest to increase market share of unhealthy food products.

3. EMOTIONAL WELLBEING IN PRIMARY SCHOOLS

For several years, principals have been highlighting increasing levels of child emotional ill-health, including issues such as anxiety, depression, neglect, obesity, bullying, physical and sexual abuse, drug and alcohol abuse, anti-social behaviour and specific mental illness.

Meanwhile, principals say that they do not feel sufficiently trained to support these children adequately. Clearly, teachers are not trained to diagnose, solve or resolve emotional and mental health problems among their students or their families. However, there are some actions that can be taken by schools to support these children, and their families, provided the required supports and training are provided at a national level.

The proportion of principals citing depression among children as the greatest child welfare challenge has doubled since 2009. Three times as many principals in 2016 stated that mental illness was the greatest child welfare challenge than in 2009. Despite the anti-bullying guidelines and training for teachers on bullying prevention, the rate of bullying has remained constant during this period, with 25% stating in both 2009 and 2015 that bullying was the greatest challenge. The number of principals citing anti-social behaviour reduced from 17.9% to 10.8% in the same time period, which may also be explained by the focus on, and resources given to, bullying prevention strategies.

Given the prevalence of child welfare issues in our primary schools, and the related issues around emotional wellbeing, it is crucial that school principals and teachers are equipped to deal with these issues, both to identify problems and to address them adequately. A January 2016 IPPN membership survey of principals tells us that 79% of principals feel 'insufficiently trained' or 'not trained at all' to identify mental health issues in children, much less adequately support them once the problems have been identified. Children can present with a very wide range of emotional issues on a spectrum of emotional wellbeing, from complete wellness on one end to suicidal at the other. While the supports available at the more extreme end are relatively well known, it is less clear where to go for help when a child displays distress or the school becomes aware of some dysfunction at home. In other words, there is a need for a clear 'continuum of support' to meet the varying needs right across the spectrum.

By this we mean that there needs to be support for ALL children to help them develop emotional literacy and resilience to cope with life's many challenges; additional support for SOME children experiencing significant personal challenge; and, for the FEW children who require it, referral to medical and/or psychiatric experts to deal with diagnosed illness. This is in line with National Educational Psychological Service (NEPS) guidelines, which we wholly endorse and support.

It needs to be emphasised that it is not the responsibility of teachers to deal with issues of mental health when they arise, as the professionals in this field have the expertise and qualifications to address these issues. A teacher's role in this continuum of support is restricted to creating a safe place for children to express their anxieties. As educators, we need to give children the language and the opportunity to express and convey their emotions. This can be achieved by creating a school environment where it is safe for a child to talk to a teacher on a human level. Schools need to engage in a professional conversation around this issue.

It must be acknowledged that there is a range of national, regional and local services available to schools aimed at improving awareness and providing support around mental health, including NEPS,

SESS and DCYA youth services committees. This is particularly true at second level. There are also state programmes such as the DOHC Health & Wellbeing Programme as well as national guidelines for mental health promotion in schools (NEPS, 2015). However, it is fair to say that supports and services are largely ad hoc and inadequate, do not integrate with each other and it is not clear to schools which services to engage with, when and how. Some supports are available only in certain regions or counties.

Others are only available in specific local areas. Schools report having to prioritise between the needs of the child and the CPD needs of staff when accessing NEPS resources. There is a need for joined-up thinking as well as provision and a clear communication plan so that schools know where to go to help children in their schools, whatever the type or severity of issue.

3.1. IPPN RECOMMENDATIONS

1. To improve the situation in schools significantly, there is a real need to create an Action Plan for Emotional Wellbeing. This Plan would need to include all education sectors, from pre-school to post-primary. When a strategy is backed up with action, as was the case with the National Strategy for Literacy and Numeracy, impressive results can be achieved in as few as five years. This Plan should involve all of the key stakeholders in education – principals, teachers, the Department of Education & Skills and its agencies, Teaching Council, Ombudsman for Children, the Department of Health & Children, the Health Service Executive, the National Council for Curriculum and Assessment, Professional Development Service for Teachers, among others.
2. Map the existing cross-sectoral guidelines for emotional wellbeing and identify any gaps in provision.
3. Develop a cross-sectoral continuum of supports and services for schools, whereby it is clear which service to engage, for what type of issue, and how to go about it.
4. Develop a CPD programme for teachers and for principals to develop an understanding of the issues pertaining to emotional wellbeing, how to identify specific issues and how to avail of the continuum of supports and services described above.
5. Review the balance of the national curriculum, ensuring that adequate time is given to personal development, emotional wellbeing and resilience to help children develop holistically as well as academically – preparing them for life, not just for the workplace. A rebalancing in favour of SPHE and PE would be a good place to start.
6. The emotional wellbeing of staff is central to managing the emotional wellbeing of children. Unless the staff themselves are emotionally well they cannot hope to provide the best relationship with, or the environment necessary to deal with the wellbeing needs of children. This requires a sustained focus underpinning all that the school does. Personal development of staff has to be emphasised as an integral component of a teacher's continuous professional development, beginning with the Colleges of Education.
7. A school culture focussed on emotional wellbeing for all needs to form part of the SSE process and be evaluated as part an element of WSE to form a continuum of action.

CONCLUSION

There is significant evidence that an integrated, cross-sectoral approach is needed to address the prevalence of overweight and obesity among Irish children. Early consultation with school leaders is crucial in any further policy and resource initiatives to avoid wasted effort and resources. An assessment of the practical implications of any initiatives in schools as well as in the home is paramount.

The sedentary lifestyle that modern living habits has bequeathed us renders it essential that a broad and balanced Physical Education curriculum be at the core of children's learning, enabling physical and social skills to develop and lifelong patterns of physical activity to be formed. Successive governments have failed to recognise the ticking time bombs of children's increasingly sedentary lifestyles and the resultant impact on emotional wellbeing and levels of obesity. The curriculum as it is currently constituted does not provide an antidote to these emerging problems.

IPPN calls on government to implement a renewed focus on physical education and emotional wellbeing in our primary schools. This renewed focus must centre primarily on increased financial and physical support for schools, in their continuing quest to guide children through the minefields of modern society.

IPPN believes that the recommendations in relation to emotional wellbeing would collectively greatly improve schools' ability to support children to develop emotionally and deal with issues that arise during their school years. The timing is right, given the recent emphasis on mental health and wellbeing across government departments and Irish society generally. While there is no desire to reinvent the wheel, there is certainly a need to integrate services and supports and also to plug any gaps in provision. With the emotional health of everyone in the school community at stake, what could be more important?

We look forward to an opportunity to discuss this in further detail with the Minister and his officials.