THEORETICAL FRAMEWORK FOR THE TEACHER’S ACTIVITIES AIMED AT STRENGTHENING FORMATION OF HEALTHY SOCIAL RELATIONSHIPS AMONG PUPILS

Stanislav STŘELEC

Abstract: Social health is a significant part of the pupil’s health and the school is an important institution intervening into the process of its development. The term social health has been interpreted in special literature on different levels and in various contexts. The study aims at defining more stable theoretical framework for the application of educational means in the formation and development of healthy social relations in the school classroom. The study is a part of the MSM0021622421 Masaryk University Faculty of Education Brno research project ‘The School and Health for the 21 century’.

Keywords: health literacy, social health, specific dimensions, school, teacher, educational means, formation, development

The Czech primary and secondary school systems have been undergoing important changes nowadays. Alongside with the new School Act, the new curricula documentation system for the education of pupils and students aged 3 to 19 years old has been introduced and new education framework programmes have been declared as a new educational strategy. The new school education framework programmes have been declared as a new educational strategy. The innovative aims of primary education, key pupils’ competencies, learning spheres and cross-sectional themes are the categories specifying the basic picture of the changes into which the Czech school has entered. In connection with that, the school has been characterized as the system of assistance to the pupil bringing about the prerequisites for their optimal individual and social self-assertion. As one of the basic educational aims being reflected in the long-term trends of globalizing (universalizing) educational pattern has become the implementation and development of human health. As E. Řehulka pointed out in his foreword to the J. Holčík’s monograph ‘Health literacy and its role in the care for health’: ‘An ideal situation would come up if the next chapters of health literacy were written down in lecture rooms, classrooms and staff rooms becoming thus an obvious and indispensable tool in good educational work and efficient care for health’ (see Řehulka in Holčík, 2009, p. 5).
The above-mentioned topics and issues concerned with health literacy have also presage (thought not only in its general sense) the theme of this paper which has tried to establish more stable theoretical framework for the implementation of certain educational means in the formation and development of healthy social relations among school pupils.

Following the similitude of the terms health literacy and social health of the pupil, and for the purposes of further theoretical outlining of educational aspects of the pupil’s social health, let me cite a few propositions from the above-mentioned Holčík’s monograph:

- **“Health literacy constitutes the essentials for the future life. It can help people find and utilize necessary information and strengthen the influence on their health. Health literacy must become an essential part in the child’s education. The sooner the child acquires necessary knowledge, skills and habits, and the sooner we can contribute to the formation of healthy attitudes, views and needs of him/her, the greater benefit health literacy can represent for their health.”**

- **Health literacy is an important tool in the development of personality. Health literacy enables the citizens to strengthen their abilities in decision-making about their health and life, boosts their self-confidence, and builds up their dignity and self-reliance.**

- **Health literacy as an essential part of general culture affects not only the health of people. Healthy lifestyles, development of positive interpersonal relations, creative approach to life, awareness of appurtenance, strengthening of personal responsibility – those are the values that should become obvious characteristics of healthy society and its general culture** (Holčík, 2009, pp. 10–11).

The next category determining the content of our paper is the term of social health of the pupil. The term social can be interpreted in pedagogy (and/or in other fields of study) on various levels. One of the cutting-edge branches of pedagogy is social pedagogy which in its closer definition can be characterised as an applied branch of education dealing with educational influence on the risk and/or socially deprived groups of children and youths. In such more general aspect and concept social education focuses on the educational issues researched in terms of the influence of social environment (family, school, formal and informal peer groups, local and regional environment, mass media, civic associations and organizations, including the institutions engaged with their educational programs in leisure time activities of children and adults. During the time of its development social education has formed a certain initial scheme for the assessment of groups of particular social environment factors (see, e.g., Wroczyński 1968, Baláž 1981, etc.).

The scheme in three layers (see below) typically determines the basic groups of social environment factors affecting the pupil (child). The group of social factors (agents, institutions, etc.) typically immediately and in a most intensive way affecting the life of a school-age child is called social micro-environment. Among the agents of social micro-environment, the crucial role is played by the family, school, sports and/or other hobby associations, as well as informal social groups affecting the pupil (child)
in a different, short-term or long-term intensity. The influence of country and town environment, the differences in the effect of local and regional environment including particular social and cultural institutions are all usually associated with social mezzo-environment. The Internet, mass media, television and radio broadcasting, newspapers and magazines can be included into that influence of social environment. The sphere indicated as social macro-environment comprises main economic, political, cultural and other social trends which altogether form the situation in which the citizens and the society appear in a particular country.

Social environment scheme from the point of its impact on the child (pupil)

Society and its institutions

Local and regional environment

Interpersonal contacts

Child/pupil

Family

School – interest groups

Mass media

B

A - social microenvironment

B - social mezzoenvironment

C – social macroenvironment

A1

A2

The borders among micro-environment, mezzo-environment and macro-environment are changeable, their particular agents, institutions and their relations have dynamic characteristics. The influence of the social environment factors on the pupil can only be assessed from the point of view of concrete conditions in which the pupil lives and which have an impact on him/her. The schematic outline of social environment factors can be concluded by the fact that the biggest impact on social health of an individual has, as a rule, his/her family into which he/she was born and brought up during his/her childhood and adolescence. The educational and social impact of the family, alongside with its emotional and protective tasks, are considered most important parts of the fami-
ly impact on the child, especially in the early childhood, pre-school and early school-age periods. Upbringing is most frequently characterized as a process of intentional impact on the personality of a human aimed at reaching positive changes in his/her development. Socialization can be understood, in the first place, as the process of discovering the human society by an individual and of taking an appropriate position in the division of assignments and activities in the society. The process of socialization, called most frequently as placement, inclusion, and/or incorporation into the society, thus requires constant networking, deepening and enlargement of social contacts of an individual in the socio-cultural system as a prerequisite for permanent changes of personality and his/her relations to the environment (Řezáč, 1998, p. 43).

As a rule, the family has a substantial share in both the interwoven processes, i.e. upbringing and socialization, through which every individual undergoes during his/her life. Upbringing and socialization incorporate personalization (personality development) as an essential part. In the process of the child’s socialization we distinguish the primary and secondary stages of his/her socialization. The primary socialization is carried out in the family. Within the family interactions, especially parent-child interactions, and starting from the earliest developmental stages, the first social experience of the child, and the first habits of social behaviour are being formed. However, upon the child’s development the influence of the family gradually changes. The child becomes independent and his/her attitudes towards reality have been impacted by other factors, among which the school and other institutions play an important part. That is why the secondary socialization of the child is usually associated more with the school than with the family. But even on this stage of the child’s life both the direct and indirect educational impact of family environment take an important place.

Tridimensionality in the area of social environmental influence can be also transferred into our approach to the social health concept (see Střelec – Krátká, 2008). The term *social health* has been interpreted in special literature on different levels and in various contexts. The term *relation* is used as the determining and universal feature of social health characteristics. For the purpose of our study, we distinguish three dimensions of social health – intrapersonal, interpersonal, and social dimensions. On the intrapersonal level, social health is viewed as inner transformation of the personality expressing the relation of the person to the person themselves, including his/her self-acceptance, self-control, autonomous acceptance of social roles, needs, values, etc. On the interpersonal level, social health is viewed as manifestation of a certain level in relation to other people. In case of the pupil, it comprises, e.g., the ability to cooperate with classmates, respect the views of other people, cooperate in project team work, communicate with understanding, and be disposed to friendship, fellowship, and partnership. The third level of relations – social level – comprises, in a broader (civic) sense, e.g., reflection of the human behaviour and action consequences for the life of social groups and the whole society.

In this respect we may ask: „What substantiation and support have the formation and development of the pupil’s social health in the current primary and secondary school documentation?“ The current framework of the Education Programme for Primary School (EPPS) determines the following requirements within the main primary education aims:
to teach the pupils develop and protect their physical, mental and social health,
• to lead the pupils to tolerance and thoughtfulness towards other people, cultures, and intellectual values, to teach them live together with other people,
• to help the pupils learn and develop their abilities and real possibilities implementing them along with obtained knowledge and skills in decision making about their life and career orientation (EPPS, 2005, p. 13).

From the point of view of the pupil’s social health, the school environment should provide conditions convenient for the whole spectrum of pupils, encourage slow learners, protect and support the weak pupils, and ensure that every child, by means of upbringing and education adapted to individual needs, be developed by his/her individual method in a satisfactory way. That is why appropriate conditions for the education of pupils with special needs should be formed. Friendly and helpful atmosphere should encourage the pupils to study, work and activities according to their interests and provide them space and time for active learning and complete development of their personality. Further specification of the primary school goals in the EPPS involves key competencies of the pupil. The pupil’s social health is reflected especially in social, personal, and civic competences. Social and personal competences encompass: ‘Upon completion of their primary education, the pupils

• cooperate efficiently in a group and, along with the educator, they set rules in the team, impact in a positive way the quality of the project work on the grounds of accepting the new role in the set activity,
• participate in creating pleasant atmosphere in the team, contribute to building up good interpersonal relations on the grounds of respect and thoughtfulness in dealing with other people, in case of necessity, he/she provides assistance or is able to ask for it,
• contribute to the discussion in a small group or in the class, understand the necessity cooperate effectively with the others working out an assignment, appreciate experience of other people, respect different points of view, learn from what other people think, say, and do,
• create positive imagination of themselves supporting his/her self-confidence and independent development, control and manage his/her actions and behaviour in order to reach the feeling of self-satisfaction and self-esteem’ (EPPS, 2005, p. 16).

Upon completion of their primary education, the pupils civic competences encompass:

• respect the beliefs of other people, appreciate their inner values, being able to empathize other people’s situations, disapprove oppression and rude treatment, realize the necessity oppose physical and psychical violence,
• understand basic principles of social standards and laws, being aware of his/her rights and obligations in and out of the school,
• make responsible decisions in an appropriate situation, provide efficient assistance and behave in a responsible way in risk situations and in situations dangerous for life and health,
• respect and protect our traditions and cultural and historic heritage, express positive attitude towards pieces of arts, sense for culture and creativity, take an active part in cultural and sport activities,
• understand basic environmental consequences and issues, respect requirements for quality life environment, make decisions supporting and protecting health and permanent and sustainable development of the society (EPPS, 2005, p. 16).

Particular attention, in terms of the content and techniques of health education in schools, including social dimension of the pupil’s health, is paid in one of the nine spheres of the EPPS called ‘Human and Health’ and in its subsequent cross-section theme categories. The cross-section theme in primary education utilises not only theme subjects, but also the pupil’s experience, when the whole school climate (relations among all the participants of education based on cooperation, partnership, dialogue, and respect) creates democratic classroom atmosphere serving like ‘laboratory of democracy’ in which the pupils are in a higher degree motivated to implement their opinions in discussions, and to participate in the decisions about the rules and regulations in the class, society, community in a democratic way. At the same time, not only can the pupils themselves verify the importance of keeping the rules and regulations and participate in setting new rules by themselves, they can see the importance of keeping the set rules and regulations and the necessity to care for democracy being aware that breaking the rules may lead towards anarchy and/or anarchism. Such pupil’s ability to distinguish hence develops their ability to think critically (EPPS, 2005, p. 93).

There are other inspiring resources in addition to the EPPS. Looking at our particular subject, we considered some associations concerning the activity of a class teacher and the issues related to the ‘Healthy School – the School Supporting Health’ project (further on the Healthy School project). As the three basic conceptual pillars of the Healthy School project are considered ‘friendly environment’, ‘healthy learning’, and ‘open partnership’. They are further specified and developed into nine principles (see Havlínová, 1998) out of which four principles have the closest relation to the social and health aspects in the pupil’s education within the Healthy School project. The ‘friendly environment’ principle suggests mutual humanistic approach, creation of positive climate of the school, support of open communication, helpfulness, respect, trust, broad-mindedness, patience, and readiness to help.

Organizational environment well-being suggests that the school activities were organized in compliance with the regiment requirements, changing of work and relaxation, healthy nutrition, and active physical exercise of both the pupil and teacher. The partnership and cooperation principle supposes the teaching methods and forms which suggest the implementation of democratic principles, effective cooperation and partnership of children, development of contacts with other social and/or special partners – parents, municipality and educational institution representatives. The principle called ‘School – model of a democratic society’, supposes a change in hierarchic into partnership relations layout enabling thus the experience of a democratic way of life, at first inside and then also outside of the school. We pay special attention to the Healthy School project principles because the majority of the tasks related to the implementation
of the above-mentioned principles deals with the work of all the class teachers, not only those who have been involved from a long-term perspective.

Comparing the assumptions of the Healthy School project and the central EPPS concept we may conclude that both of them head towards the same goals, but each having a specific educational strategy. The Healthy School project declares physical, psychical and social dimensions of health as the central and predominant aim. This fact penetrates all the educating and educational aspects of the project while the educating aspects (personality and social development ones) prevail. If we compare and contrast the Healthy School project and the central EPPS, then the EPPS programme is a more complex and self-contained concept (in terms of the balance of educating and educational dimensions). The EPPS is a state-run educational programme with legislative and institutional support. While the Healthy School project used to be understood at the very beginning as more or less one of the alternative educational options which, in many ways, inspired the authors of the EPPS as well as other educational programmes. Both the documents (‘The Healthy School’ and ‘The EPPS’) reflect the global WHO (World Health Organization) ‘Health for 21 Century’ strategy and declare a long-term programme aimed at the improvement of health of population.

**TEORETICKÁ VÝCHODISKA PRO ČINNOSTI UČITELŮ PODPORUJÍCÍ UTVÁŘENÍ ZDRAVÝCH SOCIÁLNÍCH VZTAHŮ MEZI ŽÁKY**

**Abstrakt:** Sociální zdraví je významnou součástí zdraví žáka a škola je důležitou institucí zasahující do procesu jeho rozvoje. Pojem sociální zdraví je v odborné literatuře interpretován v různých rovinách a souvislostech. Cílem studie je vymezení stabilnějšího teoretického rámce pro aplikaci pedagogických prostředků při utváření a rozvoji zdravých sociálních vztahů ve školních třídách. Příspěvek je součástí řešení jednoho z témat výzkumného záměru PdF MU Brno MSM0021622421 Škola a zdraví pro 21. století.

**Klíčová slova:** zdravotní gramotnost, sociální zdraví, specifické dimenze, škola, učitel, pedagogické prostředky, utváření, rozvoj