

0216

## Young People's Decision Making about Health as an Embodied Social Process

Laura De Pian

*Loughborough University, Leicestershire, United Kingdom*

### Background

Currently, public discourse around health focuses in a somewhat negative manner on individuals' weight and medical conditions associated with being overweight and obese. Popular mass media, notably newspapers, magazines, television, radio and the Internet is saturated with reports warning the nation of the health risks associated with being overweight and obese; namely, medical conditions such as diabetes and heart disease which are largely assumed to be caused by poor diets and inadequate levels of physical activity.

Attention of this kind has increasingly been directed towards children and young people; a population generally regarded as representing our best hopes for the 'future' (Burrows, 2008) yet those most 'at-risk' of being affected by the 'obesity crisis'. Using schools as a point of intervention, the UK Government has targeted children across an age-range of four to eighteen years in its drive for better health. Messages deriving from public discourse around obesity and health have shaped a number of policies that have been implemented across schools in England, prescribing the lifestyle choices children and young people should make in order to improve and maintain their health. Based on the assumed relationship between poor diet, a lack of exercise, and weight, the majority of these imperatives concern food and physical activity, which, if improved is believed to halt the rise in childhood obesity - a Government target set for 2010 (Department of Health, 2005).

### Research Questions

Despite the significant role schools are playing in the UK government's attempts to tackle childhood obesity, until recently, there has been little empirical research seeking understanding of how obesity discourses have been recontextualised by schools, teachers and pupils nor on what the effects of the resulting health imperatives may be for pupils' understandings of health (Wright et al, 2008). Nevertheless, debates continue as to whether schools should be held accountable for delivering health messages to children and young people which consequently affect change in their behaviour. Of particular significance here is the lack of attention given to how health messages generated within obesity discourse are interpreted by young people.

In line with a growing number of scholars whose work challenges dominant discourses around obesity, health and the body, the research outlined in this paper builds on findings from an international study which investigated the relationship between children's subjectivities and obesity discourse when recycled and recontextualised through formal policies and pedagogic practices of schools in Australia, New Zealand and the UK.

Findings from the project call for a more sophisticated look at the relationship between obesity discourse and children's subjectivities, to include local contexts of health discourse (the family and children's wider social networks) (Evans, Rich, De Pian, Burrows, Wright, Harwood and Davies, 2009). Data reveal that schools are not the only, nor perhaps even the most influential source of knowledge from which children draw their ideas on diet, weight, physical activity and body image. The main concern of this paper, therefore, is to illustrate the way in which we might conceptualise these relationships and acknowledge broader aspects of a child's experience of social networks beyond the school setting.

### Methods

In the UK context of the aforementioned collaboration, data collection was three-fold. Firstly, relevant national policy documents, media texts (largely newspaper and Internet articles) and school policy documents were collected and analysed to investigate the nature of the health messages transmitted and the extent to which these messages featured in learning and teaching about health in schools. Secondly, semi-structured interviews with relevant members of school staff were conducted to gain an understanding of the extent to which messages deriving from public discourse around obesity and health are present in schools and the ways in which these messages are communicated, and lastly, the views of a range of school-age children were obtained through questionnaire and interview techniques, to establish what children and young people understand about health, and the cultural and economic resources they use to make sense of the various versions of health that are transmitted in schools.

Drawing briefly on this data, case study examples of the intersection of lay/local, public and official pedagogic practices for children's embodied subjectivities are provided, with particular attention given to the way in which families, representing a variety of social and cultural contexts, construct, affirm and practice ideas around health.

### **Frame**

Conceptually, this research aligns with the perspectives of those in the sociology of childhood (James and Prout, 1997; James, Jenks and Prout, 1998; Jenks, 1996; Prout, 2000) who emphasise that children are to be regarded as 'sentient beings who can act with intention and as agents of their own lives' (Greene and Hill, 2005: 3). Drawing on a 'networks of intimacy' model (Johnston, Dyke and Heath, 2007), I aim to build on previous research investigating the role of schools in children's learning about health (Evans et al., 2004, 2008; Burrows et al., Rich et al., Wright et al., 2009; Allwood, 2009). I will suggest that this model, alongside the work of Basil Bernstein (1990; 1996) and Foucault (1972; 1979; 1980) provides a useful theoretical framework to guide thinking around discourses concerning health and the body and the construction of 'individual selves' (embodied subjectivities) through the communication of health knowledge across a range of social, cultural and economic contexts.

### **Research findings**

This research therefore addresses a gap in the literature around 'intimate' networks, predominantly 'the family', and the production and reproduction of health knowledge within these networks in relation to the forms of pedagogy found within schools addressing health and the body.