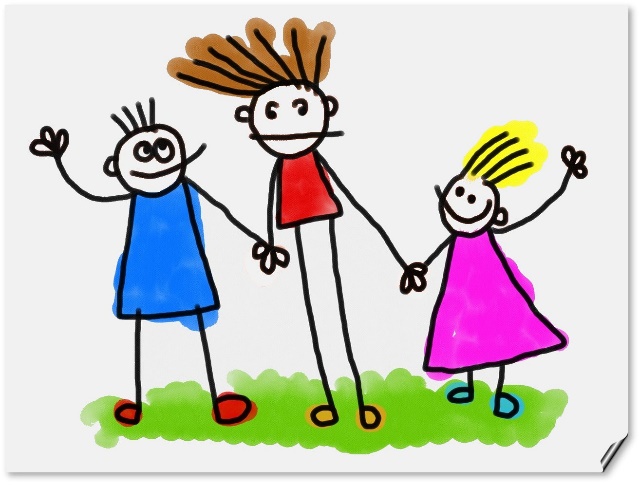
**Improving physical health**



Your teacher has given you some pictures.

They show people doing things that are healthy and unhealthy for their body.

**To talk about in your group**

1. Do you agree with each picture of a healthy activity?
2. Do you agree with each picture of an unhealthy activity?
3. Can you think of any more healthy activities?
4. Can you think of any more unhealthy activities?

**To work on in your group**

Write a short story called “Sam’s healthy day”.

Include in your story:

* things Sam does that are good for physical health
* things Sam avoids doing because they are bad for physical health.

*Biology > Big idea BHD: Health and disease > Topic BHD1: What are health and disease? > Key concept BHD1.1: Good and ill health*

|  |
| --- |
| **Response activity** |
| **Improving physical health** |

**Overview**

|  |  |
| --- | --- |
| Learning focus: | The physical health and the mental health of an organism can range from good to ill, and are affected by numerous factors. |
| Observable learning outcome: | Identify factors associated with good and ill physical health in humans, other animals, and plants. |
| Activity type: | Discussion |
| Key words: | Health, disease |

This activity can help to give students the opportunity to explore their thinking about physical health and encourages social construction of new ideas (meaning making) through dialogue. It is intended to be used in response to the following diagnostic question:

* Diagnostic question: Healthy body

|  |  |
| --- | --- |
| **P** | **PRIOR UNDERSTANDING**  This activity explores ideas that are usually taught at age 5-11, to aid transition from earlier stages of learning. |

**What does the research say?**

Research suggests that children up to age 11 primarily equate healthiness with eating a healthy diet and being physically active (Hesketh et al., 2005; Protudjer et al., 2010).

When children aged 5-9 in Australia (Brindal et al., 2012), 9-11 in the US (Reeve and Bell, 2009) and 14-15 in Turkey (Çetin et al., 2013) were asked to draw and write about healthy and unhealthy things, most of the students’ answers related to food and drink (over 60% in the US study) and physical activity. Emotional or mental health was not commonly depicted or described by the children up to age 11 (although depictions of healthy activities usually included people who were smiling), but featured more commonly in answers from the children aged 14-15. Ideas about social health and wellbeing were rarely seen. A separate study found that some adolescent children also referred to fresh air in relation to healthiness (O’Higgins, Sixsmith and Gabhainn, 2010).

Asking children to draw, discuss and write is an established technique for probing their understanding of health and disease, which has been said to enhance participation by children (Wetton and McWhirter, 1998; Backett-Milburn and McKie, 1999; Harrison, 2002).

**Ways to use this activity**

Students should complete this activity in pairs or small groups.

In part 1, each pair or group looks at drawings of people engaging in activities that are healthy and unhealthy for the body; these drawings may be those produced by students in the diagnostic activity ‘Healthy body’ (in which case you may wish to swap drawings between groups so that students are not looking at their own drawings, to reduce sensitivities), or they could be sourced from elsewhere.

In part 2, each pair or group writes a story (or a series of bullet points) to describe things that an imaginary person does during a ‘healthy day’ that help to improve their physical health, and things that the person avoids doing.

There is evidence that the gender of the character in a ‘storying’ activity may influence the perception of appropriate health behaviours (Mooney and Lorenz, 1997). The gender neutral name Sam is used in the student activity but could be changed if desired.

The focus throughout the activity should be on group discussion to answer the questions about the drawings and to decide what to include in the story of the ‘healthy day’. It is through the discussions that students can check their understanding and develop their explanations. Listening in to the conversations of each group will often give you insights into how your students are thinking.

The quality of the discussions can be improved with careful selection of groups, or by allocating specific roles to students in a group. For example, you may choose to select a student with strong prior knowledge as a scribe, and forbid them from contributing any of their own answers. They may question the others and only write down what they have been told. This strategy encourages contributions from more members of each group.

After their discussions, each group should be prepared to report the key points of their discussions to another group, or to the class.

**Equipment**

For each pair/group:

* drawings of people engaging in activities that are healthy and unhealthy for the body (either produced by the students in the diagnostic activity ‘Healthy body’, or sourced from elsewhere)
* paper (if not writing on the student worksheet)

**Expected answers**

The stories of the ‘healthy day’ are likely to contain a range of activities, but in the studies by Reeve & Bell and Brindal et al. most student responses were categorised as relating to either eating and drinking or physical activity. Smoking, rest, fresh air, use of medicines, and activities related to personal hygiene may also feature.

Students with deeper understanding of the relationship between behaviours and physical good health may indicate *how much* of each activity is appropriate, and may go so far as to explain that while an activity done in moderation can be good for physical health, too much or too little of the same activity may lead to physical ill health.

**Acknowledgments**

Developed by Alistair Moore (UYSEG), from techniques described by Wetton and McWhirter (1998), Harrison (2002), Reeve and Bell (2009), and Brindal et al. (2012).

Images: adapted by UYSEG from pixabay.com/Prawny (1082114)

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