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Analysis of the representations of school and physical education roles in combatting obesity

Obesity is currently one of the priorities for interventions in health promotion (Branca et al., 2007). Notwithstanding the fact that there are multiple causes of overweight and obesity in the modern world, sedentariness along with unbalanced dietary habits are identified as key factors (WHO, 2003). As Lee et al. (2006) observe the educational system is generally identified as one of the main potential actors in promoting active lifestyles in children and adolescents and there have been a number of international involving schools in health promotion (Stewart Burgher et al., 1999). Within the multi-sectorial strategies commonplace nowadays, PE is considered as the cornerstone of schools' responses (Tappe & Burgeson, 2004). Official recommendations point out that physical educators are expected to mobilize their specific professional competences in order to build and coordinate projects aimed at increasing the amount of physical activity as well as encouraging appropriate food habits. However, practitioners' opinions about the role of schools/PE are not clearly identified.

This study aimed to identify the perceptions of two groups of subjects about what school and PE could/should do in relation to the issues of obesity among young people. Two groups of practitioners were selected: (1) 11 health professionals considered as obesity specialists (physicians, physiotherapist, psychologist, nurse ...) and, (2) 10 secondary school PE teachers. Subjects participated in open-ended interviews conducted by the same researcher.

From the PE teachers' point of view, schools should arouse youth attention on food habits and the significance of an active lifestyle. The school's role would involve educating their pupils through the intervention of several school disciplines as well as by specific actions like improving the quality of the canteen's service or providing water. The teachers pointed to a lack of systematic collaboration between all educations' actors and regretted that initiatives tended to lack systematic and rigorous follow up. Health specialists considered that school should inform and act through multidisciplinary interventions involving professionals from other contexts than merely education.

PE teachers identified their discipline as a vehicle allowing youth to receive valuable information about food habits (starting from training experiences) as well as physical activity recommendations (based on practical discovery). They reported attempting to take into account obese/overweight students by adapting learning tasks without highlighting differences. However, they confessed to lacking concrete strategies and being concerned about the potential psychological consequences of their initiatives. Health specialists focused more on PE as a means for providing positive physical experiences, to motivate youth to move and to valorise progress whenever possible. They mentioned that PE teachers should improve their knowledge about the obesity phenomenon (its origins as well as strategies to combat it) in order to be able to provide support to their students. They were unable to propose specific examples of what PE teachers could do in their lessons considering that the latter are the most informed people and therefore best placed to know what to do.

In conclusion, it seems that urgent collaboration is needed between professionals who need to share their experiences and competences. Development of collaborative projects would be appropriate to build content that could be introduced into continuing teacher education.

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