

# The Pyramid Project: building for the future

The notion of the pyramid project is a very exciting one. The vision is to survey children in a secondary school, and the associated feeder primary schools. This provides an immediate 'mirror view' of the pupils' current health-related behaviour patterns, attitudes and beliefs across an age range which spans the transfer between primary and secondary school.

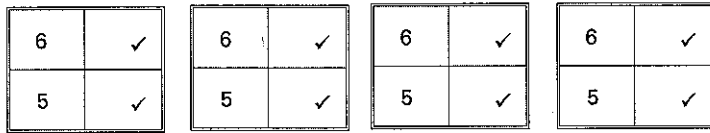
We have nine and ten years' experience respectively of teaching Years 4-7 (8-12 year olds), and our particular professional interests include Physical Education, Information and Communications Technology (ICT), Science, History and Health Education. Within the last year, both our schools have used the Health Related Behaviour Questionnaire surveys (primary version) and were intrigued by the results.

We have since become temporary members of the Unit, involved with the development of teaching materials for primary schools to use following a survey. Currently, we are working with five primary schools, which have been surveyed recently as part of a 'pyramid', together with their linked secondary school.

There are both short-term and long-term outcomes built into a pyramid survey. The participating schools get a new perspective on their

11	
10	✓
9	
8	✓
7	

A typical Pyramid model. The upper years of the feeder primary schools, and Years 8 and 10 of the associated secondary school, are sampled. Repetition at 2-year intervals creates a Year 6-8-10 cohort study.



curriculum content, as well as a range of new coursework material. Health and education authorities can assess current and future needs and review their funding and provision.

## Immediate benefits of a pyramid survey

The data provided by the pyramid survey are of great interest to all parties involved.

- The secondary school receives a preview of its future intake's health-related behaviour.
- The primary schools receive insights into the possible future behaviour patterns of their youngsters.
- Staff from all linked schools are able to plan a co-ordinated approach in their health education programmes.

Year	Boys			Girls		
	6	8	10	6	8	10
Football	68	60	57	16	10	8
Netball	3	1	1	26	31	20
Swimming	36	30	26	42	38	30
Hockey	14	12	10	5	19	14
Jogging	50	24	21	45	20	16
Judo	12	9	6	6	5	4
Cricket	17	20	17	4	3	2
Roller/ice skating	26	24	16	34	19	13
Rugby	9	19	16	2	1	1
Gymnastics	7	4	3	18	15	8

Table 1. The percentage of young people participating in sports outside school, taken from *Young People in 1997*.

***Teachers can often demand more respect and attention than parents can achieve.***

### Supporting classroom work in primary schools

Present beliefs are that in order to effect any change in the behaviour of our teenagers, we actually have to teach them the dangers of undesirable activities before they get there. This stresses the importance of tackling health-related issues (such as drug awareness) at an earlier stage, rather than leaving them exclusively to secondary schools, where the problems are already manifesting themselves. The result has been a shift of emphasis within school-based health education.

Primary school teachers often do not fully appreciate the power of influence that they have over the impressionable minds of youngsters in their care. Children can spend more time in contact with their class teacher over the course of their week than they do with their parents. Indeed teachers can often demand more respect and attention than parents can achieve.

### Sports and physical activities

Here are some ways in which Year 5 and 6 children can become involved in looking at their present and future physical activity through HRBQ data.

### *Looking at the future — and doing something about it*

In our experience, children are very interested in finding out about what life might be like after primary school. We have successfully shown them data illustrating the downward trend in participation levels in sport for boys and girls (Table 1).

Their response was to advertise all the clubs that they currently attended on the P.E. notice board, in order that others might be encouraged to become members. We were pleased with this positive outcome and hope that we may have made a difference to their future. Is this a foolish hope?

### *Drawing conclusions from HRBQ data*

The use of real data such as these had such an effective impact upon the children that we set ourselves the task of developing a wide range of teaching materials for primary classrooms, designed to promote good health through use of the survey data. These materials are in their infancy of development, but we look forward to trying them out in the classroom and receiving feedback from other schools and teachers who trial them.

Figure 1 shows an example of a suggested classroom activity for use with children in Years 5 or 6. The data were derived from this age group, and show the physical or sporting activities most often recorded as being taken part in weekly or more frequently on a regular basis.

If the school has taken part in an HRBQ survey, the percentages could be the ones derived from their own data.

The authors would be very pleased to hear from primary teachers who have used Health Related Behaviour data with their pupils.

Fig. 1. A trial worksheet developed by the authors to give Year 5 and 6 pupils practice in interpreting data.

Name \_\_\_\_\_ Date \_\_\_\_\_

### Top ten sports

Look at the table below

Boys		Girls	
1. Football	75.5%	1. Riding your bike	51.0%
2. Riding your bike	60.4%	2. Going for walks	40.8%
3. Running	34.6%	3. Roller skating	38.8%
4. Swimming	32.1%	4. Swimming	38.8%
5. Keep fit	30.2%	5. Dancing / gymnastics	28.6%
6. Going for walks	28.3%	6. Running	26.5%
7. Roller skating	28.3%	7. Horseriding	16.3%
8. Rugby	17.0%	8. Netball	14.3%
9. Cricket	15.1%	9. Keep fit	14.3%
10. Tennis	9.4%	10. Football	12.2%

Which activities come in the top ten for boys, but not for girls?

\_\_\_\_\_

Which activities come in the top ten for girls, but not for boys?

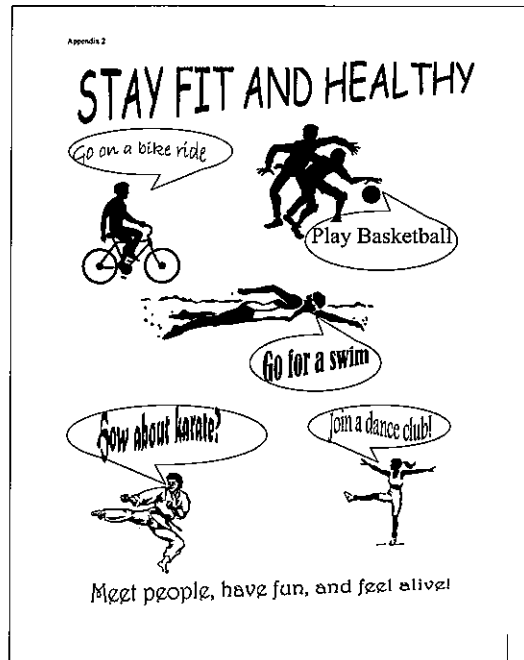
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Are these statements true or false?

- |  |            |
|--|------------|
| 1. The most popular activity for boys is football.   | True false |
| 2. The most popular activity for girls is netball.   | True false |
| 3. More girls ride their bikes regularly than boys.  | True false |
| 4. More girls go swimming regularly than boys.       | True false |
| 5. Boys and girls never walk anywhere these days.    | True false |
| 6. Only girls are interested in keep fit activities. | True false |
| 7. Girls do not play football.                       | True false |
| 8. Boys are more active than girls.                  | True false |

The authors are currently developing and trialling a set of data-related worksheets. Readers interested in piloting and trialling similar materials with their own pupils are invited to contact the Unit. The prototype worksheets are available as Microsoft Word/Publisher files.

Fig. 2. A poster presenting messages derived from HRBQ survey data, generated using computer clip-art.



### Messages in ICT

We have successfully used computers in our classrooms to enable children to make posters encouraging others to take part in sports regularly. Figure 2 is an example of a poster that could be used to give children ideas for this activity.

### Tracking changes

If the survey is repeated in a systematic way (Figure 3), it enables the tracking of children from primary schools, into and through their secondary school careers. Undoubtedly, this is a very powerful tool with which to monitor changes in patterns of behaviour.

Fig. 3. A strategic planner for an existing pyramid survey. Co-ordinated, long-term strategies such as this have already been negotiated with the Unit.

Year	1997	1998	1999	2000	2001	2002
5	✓		✓		✓	
6	✓		✓		✓	
7						
8		✓		✓		✓
9						
10		✓		✓		✓

### Food for thought

Is it foolishly optimistic to believe that teachers can really effect any degree of change for the better, in the behaviour of young people? Can they be indoctrinated with the error of the ways of their predecessors in their secondary schools?

The pyramid approach offers the potential to enhance the whole spectrum of PSME work done with children. Co-ordinated programmes could be designed by feeder school staff and their colleagues in the secondary schools, which would tackle issues that are highlighted by the reports for their area.

### Postscript

We hope that our work will be a valuable asset to the Schools Health Education Unit and that it will enhance the service that they are able to offer schools, particularly in the primary sector. At present our work is in the early stages of its development, and we would welcome any comments, suggestions and ideas from interested parties.