IMPLEMENTING HEALTH AND FAMILY LIFE EDUCATION (HFLE)

AT A PRIMARY SCHOOL IN THE NORTH EASTERN EDUCATION

DISTRICT IN TRINIDAD AND TOBAGO: TEACHERS' CONCERNS

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2011

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A Research Project

Submitted in Partial Fulfilment of the Requirement for the Degree of

Master of Education in Curriculum

Of

The University of the West Indies

Phyllis Rigaud

2011

School of Education

Faculty of Humanities and Education

St. Augustine Campus

ABSTRACT

Implementing Health and Family Life Education (HFLE) at A Primary School in

the North Eastern Education District in Trinidad and Tobago:

Teachers' Concerns

Phyllis Rigaud

This study sought to investigate the concerns of primary school teachers about implementing the Health and Family Life Education programme, an initiative of the Ministry of Education in Trinidad and Tobago.

The purpose of the study was to explore the reasons why the teachers at North Bank Primary School were not implementing the HFLE curriculum with fidelity. The theoretical framework for the study was the Concerns theory initially developed by Fuller (1969) and later modified to the Concerns Based Adoption Model (CBAM). The Stages of Concern (SoC) framework, a diagnostic dimension of CBAM, guided the study.

A qualitative case study design was used to gain insight into the concerns of the teachers. Three teachers were purposively selected from each level of the school. Data were collected using semi-structured interviews and the emerged themes from the analysis were discussed in accordance with the SoC framework. The findings of the study revealed teachers' concerns characteristic of four stages of the seven-stage framework; as well as concerns associated with the school environment. The emergent themes were concerns about information, parental support, proficiency, time demands, collegial relationships, the physical environment and administrative support.

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Chapter One

Introduction

Background to the Problem

The Health and Family Life Education (HFLE) programme is supported by a planned, sequential curriculum that addresses the physical, mental, emotional and social dimensions of student health. The HFLE programme was developed in Trinidad and Tobago in 2006, to be institutionalized at the primary school level. Prior to this, emphasis was placed principally on academic achievement to the detriment of the holistic development of the child. A number of issues have therefore arisen among the school-age population of Trinidad and Tobago and they continue to be a problem that will interfere with the goal of "Education for All." Academic achievement is important to a child's holistic development; however, equally important are the social and emotional aspects of this development.

Social and emotional development starts with the family, who is the first socializing agent in the life of a child. The child's socialization therefore begins from infancy and continues into the school years. According to Bandura's Social Learning theory (Oswalt, 2008), it is through this socialization process that the infant comes to know how to relate with others in their environment. Depending upon whether the interaction within the family is respectful, trusting and caring, children tend to develop particular habits and ways of relating that usually extend throughout their lifespan. Erik Erikson (1956 cited by Child Development Institute, 2010) concurs with this position in his Stages of Social-Emotional Development when he speaks of children learning basic trust, autonomy and

initiative prior to entry into formal school. Those developmental tasks, according

to Erikson, serve as the foundation for the school age child who, through mastery

of such task, should then develop a sense of self worth through industry at school.

Since the socialization of the home and community influence a child's

development, it usually bears upon the relationships that children develop as they

enter the primary school. It tends to influence how they relate to and interact with

their teachers as authority figures, as well as their peers and others in the school

environment. For children to function normally as "good" social beings it is

essential, at the entry-level of formal schooling and beyond, that they be given

opportunities to build on, or in some instances adjust, the social habits that begun

with the family. These opportunities are available through participation in HFLE,

as its curriculum is designed in an age appropriate way so that the issues that affect

children at different ages and stages of their development are addressed.

The child's social development at this formal school level is also

fundamental to cognitive development, as Lev Vygotsky argues in his Social

Development theory: social interaction precedes development. Vygotsky (1978)

argues that learning is constructed firstly as children interact with more

knowledgeable others on the social level (inter-psychological). Then later on an

individual level, through the intra-mental processes, the child assimilates the

information (intra-psychological). Vygotsky's theory promotes learning contexts

in which students play an active role in learning. It is therefore imperative that

children acquire the social skills necessary for them to interact positively with their

peers, as it is mainly through this active interaction that children come to construct

much of their knowledge.

In addition, given the thrust to collaborative learning, the educational approach that involves groups of learners working together, it is important that children be given all opportunities to learn how to communicate and interact positively in order that they are successful academically. The HFLE curriculum is designed to provide these opportunities through the participatory learning strategies prescribed for its implementation. Participatory learning, according to the HFLE teachers' guide (2006), "is central to life skills teaching as it relies primarily on learning in groups" (p.23). Through the participatory learning strategies of HFLE, the students are expected to utilize the experience, opinions and knowledge of group members in a creative context that promotes cooperation, listening and communication skills for the learning and decision-making process (HFLE teacher's guide, 2006). Given these opportunities, it is therefore expected that students should build the skills in support of their social development; thus, by extension, their holistic development.

Emotional development is also central to a child's holistic development. According to Salovey and Mayer (1990), "emotional intelligence is a subset of social intelligence that involves the ability to monitor one's own and others' feelings and emotions, to discriminate among them, and to use this information to guide one's thinking and action" (p.189). Given that our society is experiencing accelerated social changes that may be influencing our children, it is therefore critical that they are taught the skills that could help them to become emotionally intelligent. If children are helped to emotional intelligence, then they may be able to manage their emotions, to communicate effectively, to co-operate with others

and to resolve conflicts amicably, thus developing the mechanisms to cope effectively with the environmental changes.

The home is the first socializing agent, so that parents help their children to develop their social and emotional skills; however, social and emotional development also continues in the school, throughout the system. The curriculum area that helps the students to develop socially and emotionally is the HFLE curriculum. This curriculum is designed to provide opportunities for social and emotional development, through its interactive learning strategies as well as its content that focuses on a range of health and social issues relevant to children and adolescents. The curriculum is structured in such a way that it is age appropriate; thus, it addresses the issues associated with different ages and stages of children development, from late childhood through early adolescence. These periods in children's lives are, according to the (WHO) World Health Organization (2003), critical moments of opportunity for assisting children to build positive habits and skills. The HFLE curriculum, through its organization by levels, that span from infant year one to standard five, is structured so that children who participate in the curricular activities are exposed to different levels of the content based on their developmental needs. The children, through participation, are therefore helped to interact constructively and to make decisions that should affect their lives positively.

According to Erickson (1956), in this "school age" period children are progressing from free play to relating with peers according to rules. He also suggests that as the need for formal teamwork increases, so too, does the need for self-monitoring. The HFLE curriculum is so designed, through its life skills

teaching of self-management, monitoring and anger management skills, to help children to develop awareness of self so that they may be able to engage in self-monitoring activities that could help them to build effective communication skills towards healthy relationships at the school, home and societal levels. Through participation in the curriculum activities, children could therefore develop the ability to make situational and lifestyle behaviour choices that may result in them attaining and maintaining their own social and emotional health, as well as healthy interpersonal relationships.

Due to the imperatives of the times - break-down in family life, single parenting accompanied by twelve-hour working shifts - families are now challenged in a number of ways, one of which is the supervision of children. As a result, children are being supervised and socialized by the television and other media; hence, are being influenced, at times negatively, by other cultures and ways of relating that cause them to display antisocial behaviour. HFLE is designed to forestall this social influence by bringing to children the proper environmental stimulus to help them to build the life skills they need to become resilient to the negative influences. Through HFLE participation, children can be helped to develop critical thinking skills; thus, enabling them to discern positive from negative behaviours and to clarify their own values and actions.

Eating and fitness is a growing area of concern due to the increasing prevalence of obesity among young children. In a 2003 survey conducted in Trinidad and Tobago among children (ages 6-11), approximately ten percent were overweight and six percent, obese (Ramdath, 2010). If children are taught about good eating and exercise habits then this problem of obesity can be alleviated.

The HFLE curriculum has a eating and fitness module that is designed to help promote healthy weight and lifestyle behaviours. If taught as designed, children should be helped to employ appropriate nutritional decision-making to avoid lifestyle diseases; thus, enhancing their prospect of contributing meaningfully to the development of Trinidad and Tobago.

Recent reports indicate that children of Trinidad and Tobago are having problems relating to each other and resolving conflicts amicably. This is manifested by fights and fatal stabbings. On 20th January (2011), national television (CCN TV6) aired a video of two female students engaged in a brutal after-school fight on the streets. A similar incident was aired again on June 2nd 2011. In this incident, two girls in school uniform were being cheered-on by their peers, while they fought on the streets. A similar incident ended in fatality on October 19, 2010. The Newsday newspapers reported that what began as a fight between two female students, ended with the seventeen-year-old stabbing her fifteen-year-old schoolmate to death, outside a church in a rural village in Northeast Trinidad (p.3). Further, The Daily Express (2nd November 2010) reported that five boys charged for alleged rape of their 12-year old schoolmate were released and allowed to return to the secondary school in West Trinidad. The girl's parents expressed concern for her safety (p.7). These cases of crime and violence among schoolchildren can be averted if HFLE is implemented with fidelity, as it is designed to help children to not only come to a sense of who they are, but also to develop the skills to recognize and avoid situations of threat to their well-being.

Pregnancy at the primary school level has recently become a source of concern in Trinidad and Tobago. The Trinidad Express newspaper (January, 2011) has reported the Minister of Education lamenting that between 2007 and 2010 there were seven reported cases of girls having to demit their pupillage, because of pregnancy. HFLE's thematic areas of "self" and "sexual health and sexuality" are designed to help children to deal with sexual threat. The curriculum is also designed to help children, who actively participate in it, to develop self-esteem, as well as skills of critical thinking, healthy self-management and refusal skills that should enable them to employ health-enhancing behaviours consistent with their values. Cumulatively, these competencies can help to empower children to make choices and act appropriately to affect a healthy lifestyle. Issues of sexual promiscuity and sexual abuse among primary school children could also be averted if they are given the opportunity to interact constructively with the content of Health and Family Life Education.

The need for HFLE is aptly summarized in the Government of the Republic of Trinidad and Tobago National Policy on Health and Family Life Education:

> "The health status (health in this context refers to physical, emotional, psychological and spiritual health), of the workforce is a recognized threat to economic competitiveness, in that health affects creativity and productivity. Maintaining an efficient and productive workforce is ultimately dependent on the full realization of the potential of children and youth.... The introduction of Health and Family Life Education represents a positive step towards the promotion of the holistic development of our children and youth and the eradication of the social, psychological and physical ills that plague them" (National Policy on HFLE, 2001, p.1).

The societal trend that threatens youth and children are not unique to Trinidad and Tobago, but is part of a global phenomenon. In recent years, enthusiasm for education about health and social issues has been growing in communities around the world. A number of studies and articles have emerged (WHO, 2003; Novello, Degraw and Kleinman, 1992; Symons, Cinelli, James and Groff, 1997) to support the idea that good health can help children perform better in school because children are more likely to attend school, to be able to concentrate and to perform well. According to one study comparing students at low and high risk for food insufficiency, students who were undernourished scored lower on math tests, were more likely to have been suspended from school, and had more problems getting along with others (Alaimo, Olson, & Frongillo, 2001). Also highlighted in the literature is that schools that offer physical education and health education produce students with higher scores on tests of reading, writing, and mathematics; higher grade point averages; and better attendance than comparable schools without an emphasis on health (Improving Academic Performance, 2000).

The need to imbue traditional education systems with life-skills application so that they militate against threats to children's health and learning opportunities, is highlighted in a number of international recommendations. These include the Convention on the Rights of the Child, the International Conference on Population and Development, and Education for All. Initiatives recognised by different names in different regions of the world- "life skills", "life skills-based education", "skills-based health education" and "health and family life education," pervade the literature. Further, in 2008, the United Nations International Children's

Emergency Fund (UNICEF) articulated that life skills development is part of a rights-based approach to learning. The body attest that children are fundamentally entitled to quality education that respects their dignity and expands their abilities to live a life they value and to transform the societies in which they live.

In Zimbabwe and Thailand, the impetus for initiating skills-based health education was the prevention of HIV/AIDS among children and youth, whereas in Mexico it was initially the prevention of adolescent pregnancy. Other focus in the USA included alcohol, tobacco and other drug abuse. In South Africa, a comprehensive approach was focussed on a range of health and social topics, whereas in Columbia the focus was on incorporating life skills for Integral Education.

In response to the Internal Conference on Population and development in Cairo1994, schools in the Eastern and Southern African Regions incorporated life skills-based education into their curricula. In this region, life skills programmes have been implemented in response to escalating HIV/AIDS among young people. Uganda implemented a life skills curriculum in 1994, followed by Namibia, Malawi, and Botswana in 1995, 1997 and 1998 respectively (Gachuhi, 1999).

The genesis of Life Skills-based health education in the Caribbean region can be traced to 1986 in the Ottawa Charter on Health Promotion, which highlighted education as an essential requirement for health. Consequently, in 1996 in the face of alarming evidence of serious threats to the health and well-being of children and youth in CARICOM member states, the CARICOM Standing Committee of Ministers of Education gave birth to a resolution supporting the development of a comprehensive approach to Health and Family

Life Education, to promote the holistic development of the region's children. The initiative is thus perceived as the viable way to bridge existing gaps to enable young persons to attain the high levels of educational achievement and productivity required for the 21st century (UNICEF, 2004).

To date, all nations of the Caribbean are on-board with the implementation of HFLE into their curricula. To effect such changes, collaboration between the University of the West Indies at Cave Hill and Eastern Caribbean nations developed and instituted associate degree programmes to equip their teachers with the necessary competencies. Jamaica in 1999 revised their HFLE curriculum to suit their changing realities and became the first CARICOM member state to develop an HFLE curriculum for early childhood education in 2007 (Holness, 2008).

Trinidad and Tobago established its National Policy on HFLE in 2001. HFLE, having gone through a transitory stage from Family Life Education (FLE) of the late 1990s, was reaffirmed within our primary schools' curricula in 2006. HFLE's new focus was to develop students' psychosocial competence, through the application of life skills; the curriculum was to be implemented as a separate subject, twice per week. Curriculum specialists from the Ministry of Education conducted regional training workshops for principals and two teachers from each primary school, subsequent to which school-based workshops were to be conducted, by the trained personnel of the respective schools, to prepare all teachers for the change. In addition, a comprehensive HFLE curriculum document with a corresponding teacher's guide were prepared and distributed nationwide for use within every primary school in Trinidad and Tobago.

North Bank Primary School (NBPS) is a multi-grade school situated in the North Eastern Education district. It was established in the rural community in 1959. The school's present enrolment consists of a mixed student population of thirty-eight (38) pupils, all from the catchment area. The staff is a complement of eight female officers: the principal, five teachers, a clerical officer and a cleaner. All teachers are qualified with a Teachers' Diploma. Additionally, two teachers have obtained degrees in the field of education.

At North Bank Primary School, bullying has become a norm among the student population. Students have been known to engage in after school fights that on occasions resulted in bloodshed. In response, one student in particular has borne arms as a means of protecting himself from perceived danger. Additionally, students engage in leisure-time activities embedded with sexual undertones and disseminate willingly, among themselves, reports of their sexual encounters. These behaviours are addressed daily at assembly and on incidental bases; however, these efforts have been proven highly unsuccessful, resulting in continued practise.

The HFLE curriculum is designed in a behaviour change model that is fitting to help the students at NBPS, so that they may become socially and emotionally developed, and so be able to contribute to the overall development of society in a positive way. Furthermore, since emotional health is carried into adulthood and influence personal adult relationships and family life, HFLE is essential to every child at NBPS. However, the development of the skills needed for self-management and healthy interpersonal relationships continues to elude the students at the school, while their teachers appear to be reluctant to implement the

HFLE curriculum. This is manifested by teachers, at regular intervals, using the time, timetabled for HFLE to teach other subjects or to engage in other school related activities. The issues emanating from the school suggest that the children are not being holistically developed; intervention is therefore warranted. This study is guided by a review of the literature and the research question.

Statement of the Problem

At North Bank Primary School, teachers are periodically using the timeframe assigned for implementing the HFLE curriculum for other curricula related activities. The students are therefore not being sufficiently exposed to the curriculum as it was designed. This is against the background that many social problems are emanating from the school system.

Purpose of the Study

The purpose of this qualitative case study is to explore the reasons why the teachers at North Bank Primary School are not implementing the Health and Family Life Education (HFLE) curriculum with fidelity. This will allow the researcher to get a clear insight into the concerns that the teachers have about implementing the curriculum.

Research Questions

Research questions should be clearly formulated, intellectually worthwhile, researchable and used as means to move from broad research to specific research (Mason, 2002). The research question is designed to find out why the teachers at NBPS are not implementing the HFLE curriculum with fidelity. The research therefore aims to answer the following question:

❖ What concerns do teachers at North Bank Primary School have about implementing the HFLE curriculum?

To answer this question, the following subsidiary questions were posed to provide additional insights to the main question:

Sub-question 1: What concerns are related to teachers' own psychological/ emotional preparedness?

Sub-question 2: What concerns are related to teachers' training for the specific curriculum area?

Sub-question 3: What concerns are related to the nature of the school environment?

Significance of Study

This study seeks a clear insight into the concerns that teachers at NBPS have about implementing the HFLE curriculum. The researcher anticipates that after analysing the data from the study, it will be possible to identify the concerns of the teachers and to recommend to administration appropriate measures to empower teachers to implement the HFLE curriculum with fidelity. The school's

administrator may therefore use the results of this study to guide policy-making

relating to teacher training and preparedness to implement the curriculum; thus,

strengthening the capacity of teachers, at North Bank Primary School. It is

therefore anticipated that maximum opportunities for positive student outcomes

would materialize from the study.

Although the study's design restricts generalizability of its findings, the

recommendations arising out of the study can provide the Ministry of Education

with valuable information, which can guide policy development, with respect to

HFLE implementation at the primary level.

Additionally, this study will add to the limited research on the topic.

Definition of Key Terms:

Concern. The composite representation of the feelings, preoccupations,

thoughts and consideration given to a particular issue or task. (Hall,

George and Rutherford, 1979, p.5)

Implementation. The process of putting into practice an idea, program or

set of activities and structures new to the people who are attempting or

expected to change. (Fullan, 2001, p.69)

Innovation. An idea, practice or object that is perceived as new by an

individual or other unit of adoption. (Rogers, 2003)

Fidelity of implementation. The faithful implementation of an innovation- that is, to use it as it is "supposed to be used," as intended by the developer. (Fullan, 2001 p.40)

Organization of the Paper

This chapter, introduced the study by detailing a description of the problem that gave rise to the study, the purpose of the study, the research question that the study seeks to answer, the significance of this study and definitions of key terms used throughout the paper. Chapter 2 contains a review of the literature that builds a bridge of relationship between this study and other studies in the area of teacher concerns about implementing health education innovations. Chapter 3 presents a description of the theoretical framework, research method and procedures followed during the course of the study. In addition, trustworthy strategies, ethical considerations, limitations and delimitations are also included. Chapter 4 includes the analysis of data in relation to the research question and a discussion of the findings of the study. Chapter 5 concludes the study and provides recommendations based on the findings of the study.

Chapter Two

Review of the Literature

This chapter reviews the literature related to teachers' concerns about implementing the CARICOM regional innovation, Health and Family Life Education (HFLE). Literature specific to concerns about implementing HFLE is scarce. A search of the literature so far has revealed limited research conducted on teachers' concerns about implementing HFLE. However, literature on analogous studies focussed on health education and life-skills based education is readily available. The researcher is under the opinion that although this literature is not specifically related to the topic under research, the issues addressed in these studies are similar and therefore the literature is relevant.

A Study conducted in Uganda by J. Kinsman, S. Harrison, J. Kengeya, E. Kanyesigye, S. Misoke and J. Whitworth in 1999, evaluated the implementation of a life-skills education initiative. The study was part of a large information, education and communication sexual transmitted disease (STD) intervention trial. A nineteen lesson comprehensive school-based AIDS education programme was implemented and evaluated in 50 primary schools and 16 secondary schools in 12 parishes of Masaka District, Uganda. One hundred and forty-eight teachers were trained over a period of one year and the programme was to be scheduled into the school's timetable to teach one lesson per week.

The researcher found that the teachers were trained to teach using didactic teaching methods, therefore they were concerned about the participatory method required to implement the curriculum. The researcher also found that teachers were resistant to the inclusion of condom use as part of programme content. Many teachers were concerned about parental disapproval, as offended parents withdrew their children from classes due to the inclusion of condom use discussions. While some teachers expressed their personal disapproval with the topic and refused to implement that part of the programme, other teachers who attempted, reported feeling embarrassed during the lesson and were unable to maintain classroom control during those sessions. It was also found that despite the programme being generally well received by teachers, they expressed that time to implement the additional curriculum was restricted, thereby resulting in the omission of certain content areas.

Kinsman et al. (1999) concluded that teachers are willing to implement AIDS education as long as they are adequately prepared. They therefore recommended that tuition and support should be given to teachers to help them with the required teaching techniques. In addition, the researchers concluded that improvement in relationships between teachers and students are possible due to the open communication during implementation. They recommended that comprehensive AIDS education should be incorporated into the national curricula and should be examinable to encourage full implementation.

J. Cohen, S. Byers, H. Sears and A. Weaver surveyed three hundred and thirty-six teachers in elementary and middle schools in New Brunswick in 2004. The researchers used questionnaires to assess teachers' attitudes towards sexual

health education, the importance they assign to sexual health topics, how knowledgeable teachers felt about a variety of sexual health topics and how comfortable they felt about teaching those topics.

The findings of the study were that the majority (93%) of teachers supported sexual health education and agreed that it should include a broad range of topics. Generally, teachers had no concern with respect to comfort teaching most of the content; however, were concerned about delivering explicit aspects of the curriculum, such as masturbation and sexual pleasure. Sixty-five percent of teachers had received no training for implementing the curriculum; hence, the majority of female teachers expressed concerns about teaching sexual health to mixed sex groups amid limited pedagogical knowledge.

Coming out of the study, was that a disparity existed between the importance teachers assigned to teaching particular sex topics and their own knowledge about and comfort teaching those topics. The researchers also found teachers to be more knowledgeable about, and comfortable with, teaching areas that were more compatible with their own experiences and gender roles. Cohen et al. therefore recommended that teachers should be provided with training that increases both their knowledge about and comfort with teaching topics that have not been associated with their gender roles.

The implementation, monitoring and evaluation of HFLE in four CARICOM countries was undertaken, in conjunction with the United Nations Children's Fund (UNICEF) to document the development, implementation and impact of a common curriculum for youths in forms 1, 2 and 3 in Antigua, Barbados, Grenada and St. Lucia. This study was conducted by C. Constantine, A.

Stueve, L. O'Donnell, G. Agronick and C. Vince-Whitman in 2009. Two types of evaluation were conducted. An impact evaluation provided information about student knowledge, attitudes, skills and behaviours at the regional level, while the process evaluation included interviews with school administrators and HFLE coordinators, observation of lessons and unit assessments from teachers about what worked and what needed to be improved. Implementation of the Common Curriculum, on the two themes of "Self and Interpersonal Relationships" and "Sexuality and sexual health," began in 2005 and, with the same cohort of students, continued for three years.

The researchers found that the teachers were concerned about the on-going problems with scheduling HFLE, class time disruptions and classroom management during the lessons. They also found that teachers expressed unfamiliarity with the pedagogic interactive strategies, hence were concerned about the modification to normal teaching approaches and delivery to match the required changes. Additionally, the researchers found that teachers were unprepared and uncomfortable with teaching topics on the theme of "sexuality and sexual health." Coming out of the study was that although the curriculum had a positive impact on practice at the intervention schools, there was insufficient evidence to conclude that implementation resulted in a measurable impact on 4student health indicators.

Constantine et al. recommended more structured training to prepare teachers, given their inexperience with the health content of lessons and the participatory exercises required for delivery. The research team also recommended that Ministries should sustain support for HFLE and ensure that it is

timetabled into classroom schedules. It was also recommended that stringent

monitoring procedures should be undertaken to ensure that lessons were taught

with sufficient fidelity so that goals are addressed to maximize effectiveness.

     A study conducted by A. Sy and K. Glanz in 2008 sought to identify

organizational and individual factors associated with teachers' implementation of a

tobacco use prevention curriculum in Hawaii. The study used the process

evaluation data from the randomized trial, project SPLASH (Smoking Prevention

Launch Among Students in Hawaii). Qualitative and quantitative data were

collected from teacher and student questionnaires, teacher interviews, training

evaluation questionnaires and project SPLASH database.

     Project SPLASH assessed the effectiveness of a curriculum that

emphasized student involvement on smoking rates in Hawaii middle school

students, compared to a standard smoking prevention curriculum. Project

SPLASH, the experimental curriculum, comprised of three innovative components

of computer lessons, a drama education programme and youth advocacy training

that employed life skills training. The control curriculum was based on an

evidence-based, school-based smoking prevention programme, which was less

interactive and primarily used social influence approaches. Both curriculums were

delivered to seventh and eighth grade students and data was collected from 26

middle school teachers in 20 public schools in Hawaii.

     The researchers found high self-efficacy to implement the curriculum

among teachers who had previous experiences and familiarity teaching the content

and using participatory strategies. The qualitative findings corroborated these

finding as the researchers found that teachers who were not formally trained in

health education expressed, during interviews, that they had insufficient training on effective health education pedagogy to prevent students' tobacco use. The researchers also found that teachers with neither prior experiences nor professional skills that related to implementing smoking prevention curriculum, expressed concerns about the complexity of the curriculum.

Sy and Glanz (2008) concluded that relevant and more specific professional training, rather than general course work in health topics, is more effective towards full implementation. They therefore recommended that schools support teachers by educating them of the critical strategies, thus increasing their confidence in their ability to implement fully the curriculum. The researchers also sought to ascertain what type of training best prepared teachers for implementing the curriculum. Coming out of this study was that there was no association between workshops or individual training and implementation dose, as many teachers expressed the feeling that the training they received to prepare them for delivery of the curriculum, provided no additional assistance than if they had reviewed the curriculum on their own.

M. Stead, R. Stradling, M. Macneil, A. M. Mackintosh and S. Minty conducted an evaluation of the Blueprint drug prevention programme in the United Kingdom in 2007. The intervention was designed for the general school population of pupils aged eleven to thirteen. It adopted a life skills-based approach as well as the principles of effective drug education. The objective of the study was to determine the extent to which the teachers participating in Blueprint delivered it as intended and whether changes in pupils' attitudes, behaviour and understanding could be attributed to exposure to the curriculum

component. The mixed methods approach to evaluation comprised lessons delivered in the classroom, qualitative interviews with teachers and pupils, and a survey on pupils' reactions to the curriculum.

The researchers found that teaching experience appeared to have no bearing upon the concerns that were expressed by the teachers about using the interactive methods in their classrooms. The research team found that teachers with and without experience teaching drug and health education expressed the feeling that activities that involved pupil-pupil interaction were unpredictable and difficult to control because they were accustomed using methods that allowed them to direct the progression of the lessons.

The researchers also found that teachers felt pressured by the specified timings for each lesson, therefore behaved in ways, which contradicted their own notions of good practice. The researcher found that teachers curtailed discussion or question and answer sessions in which pupils seemed genuinely interested because they were concerned about completing the core, drug education activities, amid limited time. The research team therefore recommended that timings for lessons should be more realistic to allow for discussion, review and reflection of what is being learned and how it relates to pupils everyday lives.

Coming out of the study was that teachers did not understand clearly the principles behind some of the approaches. The recommendation was that training should incorporate both demonstration of content, methods and activities central to the curriculum, as well as the underpinning thinking behind the methods. Additionally, the researchers found that there was no marked difference in the quality of delivery from experienced or inexperienced teachers. Stead et al. (2007)

therefore concluded that with appropriate intensive training, materials and support, all teachers could be equipped to deliver health education to a high degree.

S. Mihalic, A. Fagan and S. Argamaso conducted an evaluation study in 2008. The study presented the results of a process evaluation. The evaluation was focused on identifying the extent to which 432 schools, participating in the Blueprints for Violence Prevention Initiative, were able to implement successfully the life skills training (LST) drug prevention programme over a three-year period. The programme was designed to prevent tobacco, alcohol and other drug use among middle and junior high school students in the United States. It was aimed at developing self-management skills, social skills and the provision of information related to drug use, through didactic instruction, classroom discussion, behaviour skill rehearsal and demonstration of skills. Results for the research questions were based on teacher and coordinator surveys, observation of lessons and qualitative interviews conducted by research staff. Each cite in the study received a 2-day training workshop in the first year of implementation. Additional 2-day follow-ups in the second and third years were conducted to familiarize staff with the programme rationale and the key components of each lesson. Technical assistance was also provided by LST trainers to help with programme issues during implementation.

The researchers found that many schools struggled to integrate the three-year curriculum into existing schedules. Some teachers expressed their concern about the addition of the programme, because they felt that finding time outside of "core" academic subjects was stressful, amid increasing academic pressure to fulfil standardized test requirements. Teachers also expressed that similar material was

already being taught in the school. Additionally, the researchers found that teachers expressed the feeling that project guidelines were too rigid and did not allow for teacher creativity and flexibility. Teachers therefore communicated that adhering to the interactive activities prescribed was almost impossible in some cases, due to their large classes and the classroom management issues that resulted.

The results indicated that better student behaviour was related to higher teacher adherence and use of interactive teaching techniques, as teachers with poor classroom management skills often loss control of the class when using interactive techniques. The researchers concluded that support from administrators was crucial to the success of this type of initiative and that provision of technical assistance as well as implementation monitoring is necessary for identifying and overcoming barriers to implementation. The team therefore recommended that schools build an internal mechanism of on-going support and internal monitoring procedures that provide corrective feedback to teachers. It was also recommended that training in classroom management skills should be considered, prior to adopting a programme that uses interactive techniques.

A study conducted in South Africa by M. J. Visser in 2005, sought to monitor the effectiveness of the implementation of the life skills and HIV/ AIDS education programme. The programme was adopted because HIV/AIDS had reached epidemic proportions and it was considered a threat to individuals and South Africa as a whole. The aim of the intervention was to prevent the spread of HIV/AIDS among South African young people by pre-empting risk behaviours and contributing to a decrease of existing risk behaviours.

Visser (2005) used an action research approach with a stratified sampling technique to select the five schools from among twenty-four secondary schools of Gauteng. Two teachers, often the guidance teachers, were trained from each school. The training focussed on knowledge and attitudes related to HIV/AIDS, as well as how to use effectively the experiential learning techniques in life skills training. This training lasted for ten to twenty hours and trained teachers were to develop a context-specific programme for their school based on the needs of learners and values of the community. Teachers were then to present the programme to all learners at their respective schools and to act as change agents to get other teachers to integrate HIV/AIDS education and life skills training as part of the school curriculum.

Two years after the programme was implemented, a process evaluation consisted of interviews and focus group discussions were conducted in the five selected schools. The researcher found that change took place on an individual level. In a few schools, data indicated that few teachers were able to disseminate information about HIV/AIDS to learners; however, the researcher found that the majority of teachers in the study reported being frustrated by the many obstacles that prevented them from implementing the programme. In the schools that implemented, the researcher found that the teachers were highly motivated, had faith in the intervention and got support from their principal and the other teachers.

In the schools that could not implement the programme effectively, the researcher found that there was no time on the timetable to present the programme and the trained teachers were severely challenged to reach all students. Additionally, Visser (2005) found the hierarchical structure of the school to be a

major inhibitor to implementation; the trained teachers experienced a lack of support from the other teachers and the principal, due to their low status as guidance officers. The researcher also found that the majority of teachers were not interested in becoming involved in the programme because they did not regard their relationship with the learners as appropriate to deal with intimate issues. Further, it was found that teachers did not conceptualize sex education and emotional involvement with learners as part of their role.

The researcher concluded that the pervading climate in the education system and the school community were underlying processes that obstructed the implementation of the programme. He therefore recommended that processes on the different levels of the school community should be co-ordinated to support the implementation of the intervention.

Conclusion

This literature review has unearthed seven studies that were conducted in North America, East and South Africa, the Caribbean and the United Kingdom. Although these studies were differently designed, conducted under different cultural influences and among different respondents, similar themes emerged.

In all studies, except that which was conducted in South Africa by Visser in 2005, inadequate training was a common concern of respondents. Teachers were generally concerned about content matter training as well as training for delivery of the curriculum, as the strategies required for implementing the curriculum were unfamiliar to most teachers.

Similar themes also emerged from the studies conducted in the Caribbean, East Africa and Canada. Respondents were similarly concerned about implementing explicit aspects of the curriculum that dealt with sexuality, as teachers felt unprepared for this change in their practise. Another similarity among several of the studies was the frustration expressed by teachers, with scheduling the innovation into their existing curricula.

While the Visser study revealed similar concerns about scheduling, it also revealed strikingly different results. Concerns centred on factors within the schools' community, such as support from principals and other members of staff. Recommendations for training and support for teachers, dominated all studies within the review.

Chapter Three

Methodology

The purpose of this study was to explore the reasons why the teachers at NBPS are not implementing the HFLE curriculum with fidelity. The focus is to get a clear insight into the concerns that the teachers have about implementing the curriculum. This chapter describes the theoretical framework and research design used in the study, as well as how they coordinate the sampling procedure, data collection and analysis to answer the research question: What concerns do teachers at North Bank Primary School have about implementing the HFLE curriculum? This study is a practical project of field study type.

Theoretical Framework

I derived a theoretical framework from the orientation to the study through reviewing appropriate literature. Concerns theory initially developed by Fuller (1969) and later modified by Hall, Wallace and Dossett (1973) was consequently used as the theoretical framework for this study. Concerns theory posits that teachers have concerns and the level of concerns depend on their experiences, individual differences and the type of innovation (Fuller, 1969; Hall et al., 1973); the level of concern of individuals will therefore be different, thus giving rise to categorization of concerns. Concerns theory served as the basis for the development of (CBAM), the Concerns Based Adoption Model by Hall, Wallace and Dossett in 1973.

The stages of concern (SoC), one of the diagnostic dimensions of CBAM, is a framework that gives insights into the feelings, motivations and preoccupations a teacher might have about implementing an innovation, at different points in the implementation process. This framework was used in the study, to enable the researcher, to better understand and explain the findings associated with the teachers' expressed concerns about implementing the HFLE curriculum. Hall and Locks (1978) contend that intervention to effect successful change, should address the specific expressed concerns of the teacher. These researchers also assert that the stages of concern about an innovation provide a key diagnostic tool for determining the content and delivery of staff-development activities.

Fuller (1969), focussed on the concerns of teachers while they taught, thereafter articulating that teachers have job-related concerns. Fuller's research in 1969 resulted in a developmental conceptualization of the unrelated, self, task and impact concerns of teachers. The modified version of the original concerns theory, CBAM, includes three components: Innovation Configuration (IC), Stages of Concern (SoC), and Levels of Use (LoU), that introduce change, identify concerns and monitor implementation respectively.

Six assumptions about educational change underpin CBAM. The power of the SoC lies in the following five assumptions:

❖ The first assumption is that change is a process, not an event. Hall & Hord (1987) assert that it takes time to institute change thus it is achieved only in stages.

❖ The second assumption of the model is that individuals must be the focus if change is to be facilitated.

❖ The third assumption embraces the change process as an extremely personal experience. It assumes that the way the change process is perceived by the individual will strongly influence the outcome, since change is brought about by the personal satisfactions, frustrations, motivations and perceptions of individuals.

❖ The forth assumption is that individuals involved in change, progress through various stages regarding their emotions and capabilities relating to the innovation.

❖ The fifth assumption is that a client-centered diagnostic/prescriptive model can best facilitate and enhance the individual's staff development needs. It therefore encourages change facilitators to diagnose the location of their clients in the change process and to direct their interventions towards resolution of those diagnosed needs.

Within CBAM, the stages of concern is viewed as a developmental progression in which teachers implementing a change have concerns of varying intensity across seven stages, at different points in the change process. Hall, George and Rutherford (1979) have provided paragraph definitions for each stage as follows:

The first category, stage 0 (Awareness), indicates the teacher has little concern about or involvement with the innovation. Self, Task and Impact are the umbrella, categories from which the other six stages were expanded.

Self has two distinguishing stages within. It consists of stage 1 (Informational) and stage 2 (Personal). At the informational stage, a general awareness of the innovation and interest in learning more detail about it is indicated. At the personal stage, concerns typically reflect uncertainty about the demands of the innovation and anxiety about ability to meet those demands. This includes analysis of his/her role in relation to the reward structure of the organization, decision making and consideration of potential conflicts with existing structures or personal commitment.

Task, is at stage 3 (Management). At this stage, attention is focused on the processes and task of using the innovation and the best use of information and resources. Management is reached when the teacher begins to experiment with implementation. Concerns are thus intensified around the new behaviours associated with putting the change into practice. Issues related to efficiency, organizing, managing, scheduling and time demands are utmost.

Impact also has distinguishing stages within. It is comprised of stages 4, 5 and 6, which are representative of (Consequence), (Collaboration) and (Refocusing) respectively. At stage 4, (Consequence), concerns focus predominantly on the impact of the innovation on students and on the possibility of modifying it to improve its effect. Stage 5, (Collaboration), reflects a teacher's interest in cooperating with other teachers regarding use of the innovation, to improve the benefits. At the final stage, (Refocusing), attention is given to making major modifications to the innovation or replacing it with a more powerful alternative.

According to Fuller (1969), when early self-type concerns are resolved, the late impact concerns appear. However, after extensive research with the SoC, Hall and Hord (1987) posits that although each of the stages is distinguished from the other, they are not mutually exclusive. She contends that individuals may indicate concerns at all stages, but the intensity of particular stages varies with any individual as implementation progresses. Further, Hall and Hord (2001) assert that teachers will move in a developmental sequence from early self concerns to task concerns during the first years of use and finally to impact concerns after three to five years. However, the researchers also caution that this natural progression is conditional. Without effective support, needed for the change process, the flow of concerns through the stages is not always guaranteed, nor does it always move in one direction.

Research Design

The purpose of a research design is to provide the most valid and accurate answers possible to the research question (Denzin and Lincoln, 2000; Mc Millan and Schumacher, 2001). An effective research design outlines the defined purpose in which there is coherence between the research question and the approaches proposed that generate data that is credible and verifiable (McMillan and Schumacher, 2001). This study sought to gain a clear insight into the concerns that the teachers at NBPS have about implementing the HFLE curriculum. This study therefore used a descriptive case study design under the umbrella concept (Merriam, 1998) of qualitative research.

A qualitative mode of inquiry is ideally suited for this research because its focus is based on meaning in context (Merriam, 1998). The qualitative approach provided the opportunity for the researcher to get a clear insight into the reasons why the teachers responded to implementing the curriculum the way they did, and according to Creswell (2007), the context in which they responded and the deeper thoughts and behaviours that governed those responses. One of the assumptions of the SoC is that change is a personal experience; a qualitative approach therefore allowed for direct conversations with the teachers so that I may garner their individual perspectives on the topic and so answer the research question.

Further, in the process of interpreting the individual meanings participants ascribed to implementing the curriculum, a naturalistic inquiry (Patton, 1980) was optimal. Patton defined this form of inquiry as "a discovery oriented approach which minimizes investigator manipulation of the study setting and places no prior constraints on what the outcome of the research will be" (p.42). This type of inductive approach to research, that allowed the important dimensions of the participants' personal concerns to emerge from analysis of the case under study, is only possible through qualitative research.

More importantly, to acquire the information that could adequately answer the research question of this study, a research strategy that allowed a human instrument to collect and analyse the data was needed. This characteristic unique to qualitative research allowed me, as the primary instrument for gathering and analysing the data (Merriam, 1998) to respond to the context, so that while engaging in the study, it was possible to review initial questions, seek elaboration, clarify uncertainty and reflect on emerging dimensions of the topic. The research

process therefore approved of re-entry into the field to capitalize on emerging aspects of the topic, previously missed, thereby attaining greater depth of understanding. Employing the qualitative approach, therefore allowed the study to evolve (Wellington, 2000), as it progressed.

Finally, a qualitative research strategy allowed the researcher to capture and use the participants' words, rather than numbers, to convey in rich narrative description, (Merriam, 1998) their subjective realities about implementing the HFLE curriculum at the North Bank Primary School. This endeavour cannot be fully attained by empirical approaches. Simply put, statistical analyses cannot capture the social world of participants, therefore do not befit the purpose of this inquiry.

Merriam (1998) defines a case study as "an intensive, holistic description and analysis of a single, bounded unit" (p.193). Merriam further offers that there are three types of case studies: descriptive, interpretive and evaluative. Yin (1984 cited in Cohen, Manion and Morrison, 2000) concurs with Merriam and posits that the three types of case studies can also be named in terms of their outcome: exploratory (as a pilot to other studies), descriptive (providing narrative accounts) and explanatory (testing theories). The researcher sought to ascertain the reasons why the teachers at NBPS were not implementing the HFLE curriculum with fidelity, to do so require that the concerns of the teachers be tapped. The study did not seek to test theories, to pass judgement or to be a pilot to other studies. I therefore used a descriptive case study design to present a narrative account of the phenomenon under study. The descriptive case study strategy gave the researcher the opportunity to gain interpretation in context (Cronbach, 1975 cited in Merriam,

1998) and, in rich and thick description, convey the concerns that the teachers at NBPS have about implementing the HFLE curriculum with fidelity.

The study is also specific to a single primary school in the North Eastern Educational District of Trinidad and Tobago, during a fixed period. More importantly, and in keeping with the postulates of Miles and Huberman (1994), the study explores a single phenomenon occurring in a bounded context. The descriptive case study approach therefore, best typified the inquiry.

Selection of Participants

To select the participants for the study, the purposive sampling strategy was employed. This strategy was used as it involved, according to Wellington (2000), making contact with a specific purpose in mind. It also offered the opportunity to select a convenience sample (Miles and Huberman, 1994), for ease during the conduct of the study. I was also enabled to select from within that sample, the individuals most suitable for generating relevant and in-depth data to address the research question. This is in keeping with the suggestions of Merriam (1998), that "two levels of sampling are usually necessary in qualitative case studies" (p.65). Merriam suggests that first, you select the case to be studied and then you do sampling within the case. Purposive sampling, according to Patton (1980), is also a strategy to be used to help manage the trade-off between the desire for in-depth, detailed information about the case and the desire to be able to generalize. This case study seeks in-depth understanding of the particular case.

Each teacher of the infant, junior and senior class respectively was chosen to participate in the study. These teachers were selected because they represented a broad cross-section of the school and therefore could adequately fulfil the purpose of the inquiry. Additionally, they all were on staff at North Bank Primary School, when HFLE was introduced into the school's curricula, therefore this sample was likely to be knowledgeable and informative about the phenomenon of interest (McMillan and Schumacher, 2001).

Each teacher in the sample has greater than fifteen (15) years teaching experience and holds a Teachers' Diploma from a certified institution. Each has taught at NBPS for between nine years to twelve years.

Method of Data Collection

The data for this study were collected through semi-structured interviews. I elected to use the interview method because interviews are one of the most common forms of qualitative research methods (Mason, 2002; Merriam, 1998) and involves the construction or reconstruction of knowledge (Mason, 2002). Silverman (2004) contend that an interview is a flexible, interactive and generative tool to discover meaning and language in-depth; therefore its proclivity to generate the data required for this particular inquiry into teachers' concerns, was an asset. My position is also supported by the views of Wellington (2000), who offered that interviews could reach the parts, which other methods cannot reach; and by Patton (1980) who states, "The purpose of interviewing is to allow us to enter into the

other person's perspectives, so that we can find out from them those things we cannot directly observe."

The assumptions of the theoretical framework underscores that individuals is the focus of change, therefore the interviews were semi-structured to allow for a loosely defined framework, which enabled flexibility over the range and order of questions (Wellington, 2000), as well as the opportunity to respond to the emerging views of individual participants while I investigated their personal perspectives. The semi-structured framework also facilitated a trusting communication climate that permitted participants to voice their concerns freely while allowing for probing of responses, as I endeavoured to achieve in-depth understanding of the personal context within which the study is located.

The key questions for the interviews were generated from the research sub-questions. Interview questions were subsequently pilot tested, using two colleagues who were familiar with the research project. Thereafter, minor adjustments were made. The interview guide (Appendix A) was comprised of standard background questions to elicit specific personal information from the respondents, as well as a list of open-ended questions (Mason, 2002) to guide the interview, while educing participants' views.

To establish a trusting communication climate, at the start of each interview I assumed a positive, pleasant, yet business-like approach (Smith, 1972 cited in Wellington, 2000), and portrayed a respectful and nonjudgmental (Merriam, 1998) persona, which was maintained throughout the interviewing process. To ensure honesty in participants when contributing data, thereby enhancing the credibility of the study, I encouraged participants to be frank,

assured them that there were no "right answers," and that my interest laid in their

views about the phenomenon. I also ensured willingness to participate by giving

prospective participants the opportunity to refuse to participate.

Initial interviews were conducted in the month of March, on two

consecutive days, at the convenience of participants. Interviews were conducted

individually in the privacy of the school's computer room, at participants' request.

Each interview session lasted for approximately thirty-five minutes. During

transcriptions, it became evident that I needed to return to the field. A second

interview session was subsequently conducted with two participants. These

interviews sought clarification of issues based on data previously generated, as

well as from those that emerged, but were detected only during initial analysis. A

final visit was undertaken to invite participants to peruse individually, their

transcribed conversations in order to validate that the transcript was an accurate

representation of their reality.

Method of Data Analysis

Data analysis is the process of making meaning out of the data by

consolidating, reducing and interpreting it (Merriam, 1998). The data analysis

process therefore involves the use of specific techniques to make the data more

manageable. Bogdan and Knopp Biklen (1998) advised breaking the process

down into stages. Bogdan et al. therefore offers that the collected data can be

organized into categories then interpreted; a search for recurring patterns should

then determine the importance of relevant information. Additionally, Wolcott

(1994 cited in Creswell, 2007) has offered an analytical strategy that involves forming a description from the data, as well as relating the description to the literature. Similarly, Miles and Huberman (1994) in defining data analysis, "as consisting of three concurrent flow of activity," have offered a three stage process for qualitative data analysis – data reduction, data display and conclusion drawing/verification (p.10).

I prepared the data for analysis by first seeking to become very familiar with the data; therefore, I listened to each audio recording in its entirety before transcribing. Thereafter, transcriptions were read and gaps were noted in the data. A return to the field necessitated further transcriptions and intense scrutiny of the data to verify its worth. I then heeded the words of Merriam (1998), who asserted that devising categories is largely an intuitive process, but it is also systematic and informed by the study's purpose.

In recognition of the purpose of the study, the assumption of the SoC that individual change occurs in stages, and the advice of the aforementioned researchers, I proceeded to reduce the data. I used the categories of the SoC as a guide to category formation. With each transcription in turn, and the use of a word processing programme on my personal computer, I isolated manually the initial most striking aspects of the data that appeared to conform to answering the research question. These were assigned to the SoC categories, using different font colour identifiers for respondents. The interrogation of the data continued in this fashion until all data deemed relevant to answering each research sub-question were aggregated into the preformed stages of the SoC, the data then naturally fell

into the three dimensions of the SoC: self-concerns, task-concerns and impact-concerns.

Bearing in mind the advice of Creswell (2007), "to be open to additional codes emerging during the analysis" (p.152), I hereafter used an emergent approach to sub-category formation, by scanning the data for units of analysis that were pertinent to answering the research question. Patterns were identified, by searching for issues that recurred in the data, and then organized into coherent categories. The entire database was interrogated until all emergent themes were captured and coded. These themes emerged from the data and provided adequate insights pertinent to answering the overarching research question, therefore were presented and discussed to give a thorough understanding of the topic under study.

All categorized and coded data were subsequently organized diagrammatically (Miles and Huberman, 1994), to spot connections that were not apparent in the text-based format. An audit trail of the data analysis process (Patton, 1990; Guba, 1981) was undertaken by two independent researchers to confirm that the findings resulted from the participants views. The findings of the study were thereafter compared and contrasted with that of published literature (Walcott, 1994 cited in Creswell, 2007) relating to teachers' concerns about implementing similar innovations. Afterwards, a narrative description of the analysis was developed using excerpts of the participants' words to substantiate the findings of the study.

Trustworthiness Strategies

To enhance the trustworthiness of the study, taken into consideration, was the framework of Guba (1981). Guba's constructs seek to satisfy the four criteria of credibility, transferability, dependability and confirmability.

Credibility. To demonstrate that a true picture of the phenomenon under study was being presented, I used two strategies:

- o Peer scrutiny of the research project was invited. This allowed for refining of methods and strengthening of assumptions and arguments.
- o Member checks were also employed to confirm that participants' words matched what they actually intended to convey.

Transferability. The findings to this study are specific to the particular environment and individuals. However, a full description of all the contextual factors impinging on the inquiry (Guba, 1981) was provided in sufficiently rich and thick description to allow other practitioners, who believe their situation to be similar to that described in the study, to relate the findings to their own positions (Bassey, 1981).

Dependability. The processes within the study were reported in detail, thereby giving the reader opportunity to assess the extent to which proper research practices were followed.

Confirmability. To ensure that the findings of the study resulted from participants' views:

- o Participant quotations were incorporated in the discussion of the

    findings.

- o An audit trail of the data, performed by a peer as well as by a

    graduate student of the Masters in Education Programme at

    University of the West Indies, validated the data analysis process

    from transcriptions to findings.

Ethical Considerations

Gaining access to the school and securing uninhibited participation in the

study warranted that I undertake certain ethical responsibilities. I therefore made

an appointment to meet with the principal and teachers to apprise them of my

research interest. I gave an oral description of the study; the procedure to be used

in data collection; what will be done with the findings and what the school can

expect to gain from the study. This information was also presented to the parties,

in writing (Appendix C & D). Informed consent (Bogdan and Knopp Biklen,

1998; Mason, 2000; Wellington, 2000) was thereafter secured verbally from each

participant and written consent to conduct the study at the school, from the

principal

(Appendix E).

To ensure that ethical standards were adhered to while conducting the

study, the following were observed:

✓ I received informed consent from every participant before the
interviews. Participants were guaranteed that confidentiality of
responses would be observed, informed of the goals of the study
and about their right to withdraw from participating in the study, at
anytime.

✓ I was open, honest, and never sought to mislead the participants
during the study.

✓ I received permission from each participant, to audio record the
interviews.

✓ Collection of data was anonymous and confidential (pseudonyms
were used in an effort to conceal participants' identity and study
cite).

✓ Information obtained from participants remained confidential.

✓ I have paid special attention to accuracy, ensuring that no bias
about my opinions was evident.

Limitations of the Study

Clark and Cline (1998) assert that limitations are those characteristics of
design or methodology that set parameters on the application or interpretation of
the results of the study. A feature of the qualitative approach to research is that
data collection and analysis occur in overlapping cycles (McMillan and
Schumacher, 2001); revisits to the school were therefore necessary, so that data

collection and analysis could be sufficiently undertaken to generate a credible interpretation of the phenomenon under study. However, in the educational setting time is a valuable, and often limiting, resource. The desire not to disrupt the school's operation and to keep within the timeframe of the research deadline impinged upon the data collection period.

Additionally, the researcher is the instrument for collecting and analysing data for the study. Merriam (1998) articulates that the human instrument is as fallible as any other research instrument. She contends, "The investigator as human instrument is limited by being human- that is, mistakes are made, opportunities are missed, personal biases interfere" (p.20).

Delimitations of the Study

The characteristics that limit the scope of the inquiry as determined by the conscious exclusionary and inclusionary decisions that are made during the development of the proposal are, what Clark and Cline (1998) define as, the delimitations of a study. A single case study was ideally suited to the needs and resources of this small-scale researcher; therefore, the study was delimited to one school in one educational district in Trinidad and Tobago. Additionally it was not feasible to extend the inquiry beyond this scope, since the issue under study is particularistic to that specific school.

The sample of the study is narrowed to three teachers on staff, thus generalizability of the findings will not be directly relevant. Alternatively, the responsibility to transfer the findings of this study resides with the reader.

Chapter Four

Data Analysis and Findings

The findings of the study were derived from analysis of participants' words during the semi-structured interviews conducted with three teachers at North Bank Primary School (NBPS) -Pseudonym.

Katy, Carla and Jewel (Pseudonyms), of the infant, lower-junior and upper junior classes respectively, candidly responded during individual interview session, to key question of the interview guide. These questions were generated from the research sub-questions. The interview guide contained background questions that sought personal information from participants, as well as open-ended question that pertained to the study (Appendix A). Participants expressed their concerns about implementing the Health and Family Life Education (HFLE) curriculum, in sessions that lasted for approximately thirty-five minutes.

Several themes emanated from the analysis of the data. These are discussed according to the SoC of the theoretical framework of the study (Appendix B).

- o The themes associated with self-concerns were concern for information and for parental support.
- o Themes associated with task-concerns were proficiency and time demands.
- o The theme associated with impact-concerns was collegial relationships.

> o   Two other themes concerning the school environment emerged from the
>   data. These pertained to the physical environment and administrative
>   support.

Self Concerns

Self-concerns are concerns that teachers have in relation to their
uncertainty about the demands of the innovation, their inadequacy to meet those
demands and concerns about how the change will affect them personally.

Concern for information

The findings revealed that the teachers had an awareness of, and basic
knowledge about, the innovation. Also indicated is the common view among the
teachers that they needed to have more information about the content of the
curriculum and clarification about how to precede with using it in the classroom.
Jewel, the teacher of the standard four and five classes expressed her concern for
information, which she thought would be beneficial to implementing the
curriculum:

> I will like more information on the content because sometimes I don't
> know how to put across certain information. If I get more information at
> least it would help me with that aspect, which I consider to be a big part of
> this whole thing about teaching HFLE. I think someone who knows about
> HFLE should come and have some sessions with us. Maybe teach a lesson
> so that we can see it in action.

The other teachers also expressed their concern for information. Katy, the teacher
of the infant classes, expressed her need for reference material. Katy states:

I think I really need something to refer to, to get the correct information, some kind of resource material to use. I have nothing to refer to. With the other subjects, we have textbooks, with HFLE there is no text.

Carla, the teacher of the standards one and two classes expressed a similar concern for information and material of a different kind. Carla is of the opinion that times have changed, thus technology can be used to help their cause. She lamented:

I'll like to see an actual lesson being demonstrated, you see if I could actually see a lesson being taught, I think I will be better able to teach one myself. What about books to give information about the content. In this technological age, what about some CD with someone teaching HFLE, so we could see how it should be done. I also need information as to what is the basis for adding HFLE to the curriculum.

Concern about parental support

In accord with the first research sub-question, the findings revealed that the teachers of NBPS were not concern about their personal psychological/emotional preparedness. This finding was surprising, yet comforting, in that the findings of other studies conducted in the Caribbean on HFLE implementation by Constantine et al. revealed that those teachers were unprepared and uncomfortable about implementing specific topics in the sexuality thematic area.

The teachers of NBPS did however express concerns about implementing the sexuality and sexual health theme with the less mature children. Katy, the teacher of the infant classes, expressed her apprehension about implementing the sexuality and sexual health topics:

Sometimes it is a little difficult to talk to these children about private parts and those things. Is not that I am ashamed to talk about it, but I find that the children themselves seem uncomfortable during the lesson, sometimes they hide their faces and behave as if they are embarrassed.

The concern expressed by Katy was not shared by the other two participants. Their concerns differed in that while they had no personal psychological concern about teaching the content, as the respondents of the Kinsman et al. study, they were concerned about parental approval with respect to sexual health education and other specific aspects of the curriculum. Jewel expressed her concern about gaining approval from parents for specific aspects of the curriculum:

I don't feel any "how" when teaching about say sexuality or so, these children are open, so I have no problems with it. Some parents though, may think I teaching their children about sex and they may feel that is their role and I trying to take it over. Actually, I think we should get parental consent for the nutrition area as well. Remember people have different eating habits and different lifestyles. When I stay here and say to a child, do not eat this or that isn't a good eating habit, I don't know what happening at home and I might be doing more harm than good.

Carla's response was similar to Katy's, however her concerns centered on the appropriateness of the curriculum content for the age of the children presently in her care. She lamented:

I have a big concern about that theme with sexuality at this level. At this lower level, I have issue with what, and how much they should know. I think it should be taken from my hands and left in the hands of the parent of the child. Not that I have any personal problem teaching it, because I

have done it before in standard four, but at this level some of these parents especially the very religious ones, will not like that I am addressing those issues with their children.

Task Concerns

These concerns, according to the SoC, are related to the actual use or management of the innovation in the classroom.

Concern about proficiency

All three participants expressed concern about their proficiency in relation to implementing the curriculum. The teachers were of the view that their proficiency was being severely compromised due to the inadequate and ineffective training that was given to prepare them to implement the curriculum. Katy clearly expressed her concern for her pedagogical unpreparedness. She lamented:

> I think in all the training was for two days and that was quite a few years back. That wasn't in any way adequate. So many different things that could come up when you doing HFLE. It has so many sensitive areas, a one-day or two-day workshop cannot make a person adept to deliver this curriculum. Training college didn't prepare us to teach those issues. Is not just what it is and how it should be taught, but my concern is that I don't know how to deal with certain situations that may come up.

Carla and Jewel echoed the concerns of Katy; they felt that the training they received was unfit and inadequate for the required task. They stated respectively:

> I say a definite no; the training was in no way adequate. A one-day workshop with second-hand information from those who went on a two-

day workshop themselves, that was in no way adequate for me to teach that HFLE curriculum.

Jewel stated:

I didn't get any training, maybe a bit of information about the new focus and how it is supposed to be done as a separate subject, I will not call that training at all, not for what I'm required to do.

The need for training and resource material to equip teachers to implement the curriculum content effectively was uppermost among the respondents. Carla succinctly expressed this:

Beside that sexuality theme, there are the self and interpersonal relationships, and food and nutrition areas. Without training and resource material for those in-depth technical things, how am I supposed to teach them. The ministry needs to do better than that. I think something as important as this, they should really make time to do another workshop or something, to get teachers out there and able to teach the thing.

Katy also expressed her frustration about her inability to prepare effectively for implementing the curriculum. Her view was that the programme was too intense, and that she was not prepared with the required technical abilities. Katy expressed her frustration:

To tell the truth, it takes so much time to plan. It is a lot of brainwork to prepare for; I think it takes too much time to prepare for a lesson, much less two for the week. I just can't seem to get on top of things. I need help to be able to plan in a more efficient way so that it doesn't take up all of my time.

The concern that the respondents have about their training to implement the HFLE curriculum effectively, extends beyond the content matter to the interactive methods that are advised for implementing the curriculum. Low self-efficacy was therefore being echoed among the teachers at NBPS as they communicated their concerns.

Carla expressed her thoughts that the training she received did not prepare her to teach the methods that she is now required to use in order that she implement the HFLE curriculum. She expressed concern and frustration about having to perform tasks for which she felt that she was not adequately prepared:

> ..and the way they want you to teach it, is another matter. Well, it is supposed to be interactive with a lot of discussion and role-play and so on, but I really do not know whether I am doing it correct or not, I mean just being in that position alone is stressful. I didn't get any training to be able to handle the curriculum in that way. I feel like I'm spinning top in mud. With HFLE, is as though you neither here nor there when it comes to whether what you doing working or not.

Katy spoke about the feelings of helplessness that surrounded her as she attempted to implement the curriculum. She expressed her feelings of unpreparedness and her concern about her inefficiency with this aspect of her job:

> I didn't know how to react and what to do when certain things came up because I don't have the expertise to go about teaching the curriculum. If I can't do what I am required to do, then that is a real concern. The guide talks about skits and drama and so on, but anyone asked me if I could manage those things? It isn't straightforward, I am not sure if how I am doing it is the way it is supposed to be done.

Jewel, the teacher of the upper junior children, expressed her willingness to

implement the curriculum, despite uncertainty about her abilities. She stated:

> The children really enjoy doing the skits. It will be nice to know that I
>
> have the ability to make a difference in the children's lives in this area.
>
> But, to tell you the truth, I am not too sure if I managing the session as it
>
> ought to be managed. Nevertheless, as it stands now, they usually enjoy it,
>
> so when time permit I try to do what I can.

The concerns expressed about inadequate training for implementing the

curriculum, by the teachers in this study, were also expressed by other teachers in

a number of similar studies. One such study was conducted by Kinsman et al.,

(1999). The study revealed that teachers in Uganda, like teachers in the present

study, were concerned about their lack of training in the interactive methods to

implement the curriculum.

Concern about time demands

The respondents have expressed concern for the time to schedule HFLE

into their normal teaching routine. Also revealed was that the addition of the

curriculum, though thought to be pertinent to student development, was not well

received. The teachers thought that it was impossible to spend the required time

on implementing the HFLE curriculum because they were already overburdened

by the school's curricula. Katy explained:

> It is really difficult to implement it because there are so many things that
>
> have to be taught – all in one week. Social studies, science, agri-science,
>
> maths, art and craft, study skills, structural analysis, creative writing,
>
> comprehension, mental- all in one week, and now HFLE too. When you
>
> look at it all, is what matters most you will teach. Not belittling HFLE, but

the reality of the situation is that there are only so many hours in the school day and a magnitude of things to cover.

The teachers concern about scheduling the HFLE curriculum into their normal teaching was influenced by their feelings that they had a greater responsibility to implement the subjects that were being examined. Jewel contended:

> Sometimes it is really difficult to squeeze HFLE in, because the timetable already so compact. I try to teach what is being tested to ensure that I cover what the children supposed to cover for the exams. I have both standards four and five, it really tough for me to prepare the children for all those tests and exams and to give subjects like HFLE their due. Is not only HFLE, there are other subjects that I don't touch until SEA is over.

Also revealed was that the pressure exerted from the Ministry of Education, for pupils to excel at National Tests and Secondary Entrance Assessment (SEA), also influenced the teachers' decision to give priority to the subjects that are being tested. Carla explained:

> With the ministry's focus on national test, in standards one and two, making a slot for HFLE is a by-the-way time because of the other demands. In the end all and 'b' all of it, there is national test that comes and HFLE is not part of it. When national test with social studies, and science, and math and language arts are in front of you, these are what are being tested so that's where the emphasis is.

This concern about scheduling the innovation amid existing curricula demands is not unique to teachers of NBPS. The findings of a number of studies indicate similar concerns. The findings of studies conducted by Mihalic et al. (2008); Cohen et al. (2004); and Constantine et al. (2003), in the United states,

Canada and the Caribbean respectively, also indicated that scheduling the health

education curriculum within the respective schools' arrangement was a source of

concern for teachers of those studies. The participants of those studies, as do this

one, all felt that finding time to implement the curriculum outside of the core

academic subjects was stressful.

Impact Concern

Impact-concerns focus on the relevance of HFLE for students, coordinating

efforts with others to improve the use of the innovation and exploring the

possibilities of more powerful alternatives.

The data revealed no concerns about the impact of HFLE on students,

neither about the possibility of exploring other curriculum material for the benefit

of student outcomes. Concern for collaborating with colleagues regarding the use

of HFLE was however indicated by all participants.

Concern about collegial relationship

The findings indicate that teachers are working in isolation and are

concerned about the lack of collegiality existing among staff at NBPS. However,

teachers have also expressed openly, their lack of confidence in the competence of

their colleagues.

Katy expressed her hesitance to coordinate efforts on HFLE, however also

expressed positive thoughts on the subject:

> I haven't pushed to work with anyone else on HFLE because I think we are
>
> all in the same boat with teaching this HFLE thing. Yes, we talk about it,

but no real working together on it. I always thought that maybe if we pool resources it might be easier, but it hasn't happened.

Jewel expressed concerns about lack of collaboration at the school. However, she expressed her belief that collaboration was not a profitable venture given her lack of confidence in her colleagues:

It would be nice if we could come together and make things easier for each other, but I think the colleagues in the same position like me: limited information, little confidence, so again the blind leading the blind.

Carla expressed her desires to coordinate efforts among colleagues in the hope of generating a better curriculum experience for the students. Unlike her colleagues, she shared her belief that collegial relationships can assist with implementing the curriculum:

It would be a good thing if we could work together for the children sake. I think coming together and trashing out of ideas might help with teaching HFLE and in other areas as well. The thing is we know different things and since you have no resources to use and you have to rely on what you personally know, I think sharing ideas about it could go a long way, but then I am just one person.

School Environment Concerns

The physical environment

The data gleaned from the study indicate that the conditions under which the teachers at NBPS are implementing the HFLE curriculum are inconsistent with

that which is required. Disillusionment with the physical infrastructural

arrangement of the school, as it relates to implementing the HFLE curriculum, was

evident. Respondents have echoed that the classroom is a limiting factor to what

can be done with the curriculum, citing class-time disruptions. Carla, the teacher

of the lower junior classes, remarked:

> Barring that not everybody have the skill to use the methods we are
>
> supposed to be using, our classrooms are not even suitable to be carrying
>
> on those classes. We don't have doors to close. Imagine the standard fives
>
> doing a topic and those children are acting out something, and I fighting to
>
> teach say grammar, you know how hard it is for my children to listen to
>
> me.

Katy shared a similar view as her colleague in that she too expressed frustration

over the infrastructural arrangement, contending that the situation is specific to

NBPS:

> We don't have individual classrooms with doors to close like other schools.
>
> When the ministry decided to introduce HFLE with all its different ways to
>
> get children to come to understand and solve problems, they didn't stop to
>
> think that all schools were not built the same way, and that schools like
>
> ours would not be able to do HFLE like how some other school will be
>
> able to do it.

Jewel, the teacher of the upper classes expressed a similar view that the building

did not support the required activities. She declared that the alternative

arrangements that had been explored were also problematic. She remarked:

> Well the truth is we have class areas and not classrooms. So when you are
>
> doing something like HFLE and discussion going good, it disrupts the

entire school, not just the adjoining classes. I tried taking the class outside, but then it takes so much time to get them to think anything constructive.

Administrative support

Respondents shared their concerns about the lack of support and feedback given to them during the implementation process. Strong disheartenment was expressed by all participants as they were of the view that both the school's administrator and the Ministry of Education had abandoned them in this crucial time of curriculum change. Further, pressure of accountability for performance in assessments, has greatly exacerbated those concerns. Carla expressed her disappointment:

> There is no one to give you feedback, not from the school, not from the ministry. There was a time when curriculum officers came to offer assistance; I haven't seen any of them in years. Apart from you, asking about HFLE, who else is interested? When the time comes and the children don't perform well, then all this data is compiled. The ministry measures you and make a big deal that the North Eastern district doing so poorly, and they label your school. So, that pressure outweighs whatever noble efforts that you may take with HFLE.

Katy shared similar views as Carla; however, her belief was that the support should come from outside the school. She also lamented about the expectations of the employer and allude that those expectations influence her implementation decisions:

> The thing is we are not getting any support for HFLE per say. We really need the resource personal to come in and deal with the sensitive issues. The Ministry of Education is going to judge your school and you the teacher, based on how well the children do in maths, language and creative

writing; you think they want to know you were teaching HFLE? No matter how well behaved the children are, the ministry don't want to know that.

Jewel expressed her concerns for interest and support from the Ministry of Education as well as from the school. She expressed that positive outcomes may materialize if those concerns are addressed:

Well, if I have support, the thing is I will be more confident knowing that I on the right tract and somehow, I will make a greater effort to do it. The ministry say we must do it, but them not showing any interest, where is the support? Nobody want to know if you having any problems, if you need help with anything. Even here, the principal not asking any questions. They bombard you to perform well in national tests and SEA, nobody is concerned about how you making out with HFLE.

Carla expressed her concern for professional development. She echoed that she received no support from the principal and expressed her concern for the principal's lack of interest:

Support, if you talking about professional development, that is a rear thing here. When facilitators use to come around to help with subject areas, at that time we had on and off professional development with maths and reading, but not HFLE. If they want us to teach it, given how long ago the so-called training was, there should have been some follow-up workshops, but nothing happening in that area, sad to say.

Support for me personally, from the principal...none. If she sees that for two or three weeks, nothing registered for HFLE in the record and evaluation, then she will remind me that I need to do it, but no question about if I need help with it, or if I have challenges teaching it, or nothing of the sort.

Jewel also expressed her thoughts about administrative support and indicated her lack of confidence in the administrator. She stated:

> Well, the administrator has to know about it first before she could try to help me. Can't have the blind leading the blind. The principal went on the workshop, but no help there.

Interpretation of Findings

Analysis of interview data revealed that participants reported concerns at only four of the seven stages of the concerns model – informational, personal, management and collaboration. Since teachers already had experience with implementing, they had clearly progressed through the awareness stage. At the higher level, no teacher expressed impact or refocusing concerns. The informational and personal concerns expressed by the teachers suggest that they are interested in learning more about the innovation and its use. However, teachers at NBPS have had five years in which to implement the HFLE curriculum. According to Hall and Hord (2001), the teachers should have moved in a developmental sequence from early self-concerns to task concerns during the first years of use and finally to impact-concerns after three to five years. The findings of this study convey a significant amount to low-level concerns, which are consistent with non-users and early users of the innovation. It therefore suggests that teachers at NBPS may have not sufficiently experienced and mastered the use of the curriculum during the five-year period.

The findings indicate that no participant has concerns for the impact of the innovation on the students; however, teachers do have concern about collaboration, even while experiencing task concerns concurrently with informational concerns. Hall and Hord (2001) have offered that teachers' progression through the stages of concern is highly dependent upon effective support. These findings therefore suggest that the teachers were not supported through professional development, during the implementation process, thus progression through the stages of concern may be halted as task concerns continue to intensify, encouraging teachers to return to self-concerns.

The findings also indicate that the teachers at NBPS are not particularly concerned about their own psychological preparedness to implement the HFLE curriculum. However, the findings do indicate that teachers have self-concerns related to acquiring information about HFLE and about parental support for specific aspects of the curriculum. Also indicated in the findings is that, of the seven concern stages, the management stage was the most concentrated. The teachers mainly had task related concerns about their proficiency as it related to their training. Another task related concern was for assigning time to implement the curriculum, amid the demands of high stake examinations. The findings also revealed impact concerns that relate exclusively to the lack of collegial relationships needed to support the implementation of HFLE.

The findings also indicate that the teachers at NBPS have concerns about the nature of the school environment. Revealed were teachers' concerns about the physical infrastructural arrangement of the school; but more importantly, the findings revealed concerns about the lack of implementation support from the

principal. Cumulatively, these findings suggest that a lack of professional

collaborative ethos at the school is a concern for teachers. Also suggested is that

the supportive organizational arrangements that are necessary to reinforce the

change process have not been sufficiently developed and sustained.

Chapter Five

Conclusion

Recap of Study

The Health and Family Life Education (HFLE) programme was developed in Trinidad and Tobago in 2006. The programme was to be instituted at the primary school level, in response to the social threats to children and youth. The HFLE curriculum, which targets issues related to four thematic areas derived from an overarching theme of health and wellness, was therefore designed to help young people to develop life skills for psychosocial competence. The students at North Bank Primary School (NBPS) were expected to acquire these skills through guided learning experiences, from infants to standard five, so that they may participate actively in their own development. However, the teachers are not implementing the HFLE curriculum as it was designed.

The purpose of this study was to explore the reasons why the teachers are not implementing the HFLE curriculum with fidelity. Using a qualitative-descriptive case study design and guided by the concerns theory, the study addressed the question: What concerns do teachers at NBPS have about implementing the HFLE curriculum?

The purposive sampling strategy was employed and three teachers were selected to respond in individual semi-structured interview sessions, in their natural environment. During these sessions, all ethical protocols were observed to

ensure that the data generated were credible and worthy; thus, capable of providing insights into the teachers' concerns. The teachers' perspectives on the topic were audio recorded, transcribed and then analysed. The analysis and interpretation of the findings were communicated in a rich narrative format that included snippets of the participants' words from the data generated in the interview sessions.

Summary of Findings

The findings of this study were derived from interpretation of data generated from interviews. The findings of the study are that teachers are not concerned about their own psychological/emotional preparedness. However, the teachers are preoccupied with self-concerns that are related to gaining information about the content matter of the HFLE curriculum and gaining parental support for specific aspects of the curriculum.

In addition, the findings are that the teachers are experiencing heavy task concerns. These include concerns about their proficiency, which stem from inadequate and inappropriate training received for implementing the curriculum. Time demands is a concern for teachers, as they felt that scheduling the HFLE curriculum into their normal teaching routine was problematic, due to the demands of national assessments that span from standard one to standard five at the primary school level.

The study also found that teachers have concerns about the physical infrastructure of the school. The lack of support from the principal and the lack of collegial relationships among staff are also concerns for the teachers at NBPS.

The results of this study therefore point to the importance of promoting teachers'

professional self and working conditions conducive to good teaching performance,

in order to increase the prospect of success for the curriculum innovation.

Recommendations

From the findings of the study, teachers at NBPS are mainly concerned

about the following: information about HFLE, parental support, proficiency, time

demands, collegial relationships, the physical environment and administrative

support. Based on these findings, I make the following recommendations:

➢ To initiate and sustain support for HFLE implementation at NBPS, the

   Ministry of Education should undertake workshop sessions as an

   orientation to the HFLE programme. This should include information and

   discussions about the core principles, the philosophical underpinnings of

   the programme and the relevance of the skills-based approach. This

   measure should be considered as an attempt to generate a philosophical

   platform conducive to implementing the HFLE curriculum, so that all

   parties can be on-board with the implementation of HFLE.

➢ Since all the teachers are experiencing intense task concerns, then

   intervention strategies appropriate for building proficiency and alleviating

   time-demand concerns are as follows:

   ◊ A series of professional development sessions should provide

      teachers with training that includes information about the content

matter of the HFLE curriculum and opportunities for practical

teaching exercises involving the participatory strategies. Included

should be skill development with special attention to skill practice

and feedback on performance, as well as discussions about how to

implement effectively the curriculum so that its objectives can be

met.

◊   Additionally, training should involve visits to another school in

which the HFLE curriculum is being implemented successfully, so

that teachers of NBPS can observe classroom sessions in an attempt

to gain best practices in relation to implementing HFLE.

◊   To address concerns about time demands, training sessions should

also include time management skills and integration skills that

teachers may employ during their teaching routines, so that efficient

use can be made of the available contact-time.

➢ Having attended to teachers' attitudes, knowledge and skills with respect to

implementing the HFLE curriculum, teachers' confidence in the abilities of

colleagues should be optimal to effecting collegiality among staff. To

promote and sustain collegial relationships, the school's administrator

should initiate the organizational structures that actively foster additional

learning and collaboration. Teachers are therefore to be provided the

opportunities to develop the skills necessary for working collaboratively.

➢ To eliminate concerns related to the physical environment, synchronized

timetables should be established so that all classes are engaged in the

activity simultaneously. Additionally, since the student population is so

small, the team-teaching technique should be considered as a possible

means of teachers providing support for each other thus avoiding

disruption to the other subject areas.

➢ To sustain support for HFLE, the Ministry of Education should

periodically conduct workshops for principals to prepare them adequately

to initiate cite-based workshops. Principals should, in these sessions, gain

insights into effective monitoring of classroom activities and in providing

meaningful feedback to teachers. These are necessary to empower the

principal with the competencies necessary to give substantial support to

teachers.

➢ Additionally, the principal should be a part of the professional

development sessions that are extended to teachers, as this will entail

different foci and could help to reinstate the teachers' confidence in the

principal's abilities.

➢ To improve and sustain parental support for the HFLE curriculum, the

Parent Teachers' Association (PTA) can be used as a forum for educating

parents about the core aspects of the HFLE programme.

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APPENDICES

APPENDIX A

INTERVIEW GUIDE

General Questions

1. How long have you been teaching altogether?

2. How long have you been teaching at this school?

HFLE has been adopted into the primary school's curricula to help children to develop life skills so that they are able to manage socially, emotionally, psychologically, when faced with challenges......

3. What do you know about how HFLE is to be taught in the primary school?
4. What general concerns do you have about implementing HFLE?

[Q 1] What concerns are related to teachers' own psychological preparedness?

5. How comfortable do you feel about teaching the content of the curriculum?

6. What problems have you experienced while implementing HFLE?

7. What reservations do you have about teaching the thematic areas of the HFLE curriculum?

[Q 2] What concerns are related to teachers' training for the specific curriculum area?

8.   Which areas of HFLE will you say are most challenging you to implement the curriculum?

9.   To what extent will you say that the training you received in preparation for teaching HFLE was adequate?

10. What do you need to be addressed in training workshop/s to help you to implement HFLE?

[Q 3] What concerns are related to the nature of the school environment?

11. Has there been collaboration among colleagues concerning HFLE implementation?

12. What changes have you had to make to your routine classroom teaching, and what school support did you receive?

13. To what extent will you say that collaboration with your colleagues will help you with implementing HFLE?

14. Have you personally sought help or tried to work with the other teachers concerning HFLE?

15. How will you describe the culture of the school in terms of the "drive" to implement HFLE?

Do you have any other concerns about implementing HFLE that we have not spoken about?

APPENDIX B

CODED INTERVIEW SESSION

Coding Key:

Self concerns – Informational

Parental support

Task concerns – Proficiency: Training

: Actual teaching

Impact concerns – Collegial relationships

School Environment concerns – Physical environment

Administrative support

MERLE: Interviewer

CARLA: Teacher

Merle: How long have you been teaching altogether?

Carla: For 11 years now

Merle: How long have you been teaching at this school?

Carla: For 9 years now

Merle: Health and Family Life Education (HFLE) has been adopted into the
primary school's curricula to help children to develop life skills so that
they are able to manage socially, emotionally, psychologically, when faced
with challenges......

Merle- What do you know about how HFLE is to be taught in the primary school?

Carla – The information we got wasn't much, it was just a one-day workshop to tell us that we have to start doing HFLE as a separate subject.

Merle- What general concerns do you have about implementing HFLE?

Carla – Well, I think based on the content that I have to teach, it is too much. I am required to know so much content myself before I can teach the children it. And not only the content, but how much information to give the children, and the way they want you to teach it, is another matter.

Merle –Then, are you saying that you do not feel comfortable teaching the curriculum?

Carla- Exactly, I don't feel comfortable teaching it because I really do not know if I am doing it correct, I mean with the other subjects, say social studies, it is measurable, so you know if you doing it right based on the scores of the children. It is not only my internal test anymore, but there is also the external to indicate to you that you doing it right or you need to re-work something. With the other subjects, you have a better understanding of maybe they didn't capture this, or I taught this but need to reinforce it because they didn't understand it properly. With HFLE, is as though you neither here nor there when it comes to whether what you doing working or not. There is no way to measure if it was going anywhere and if you really had an effect. I am not saying measurable outcomes must be a pencil and paper thing, but there must be some evaluation outside of me. I might say yes I'm doing a good job and in the end the content was probably not being delivered the way it was supposed to be, but I just don't know that.

Merle- You said the way they want you to teach it. What about the way they want you to teach it?

Carla – Well, it is supposed to be interactive with a lot of discussion and role-play

and so on, but I really do not know whether I am doing it correct or not, I mean just being in that position alone is stressful. I didn't get any training to be able to handle the curriculum in that way. I feel like I'm spinning top in mud.

Merle – What other concerns do you have about implementing HFLE?

Carla – Well, it's there, but I have limited knowledge outside of what I get from the curriculum itself, so I will say (1) timetabling, (2) feedback (3) resources

Merle –Explain a bit what you mean by timetabling and feedback, as problems.

Carla – Timetabling With the ministry's focus on national test, in standards one and two, making a slot for HFLE is a by-the-way time because of the other demands. In the end all and 'b' all of it, there is national test that comes and HFLE is not part of it. When national test with social studies, and science, and math and language arts are in front of you, these are what are being tested so that's where the emphasis is.

Merle –And what about feedback and resources?

Carla – Well, there is no one to give you feedback, not from the school, not from the ministry. What about books to give information about the content. In this technological age, what about some CD with someone teaching HFLE, so we could see how it should be done.

Merle –Do you have any reservations about teaching the thematic areas of the HFLE curriculum?

Carla – I have a big concern about that theme with sexuality at this level. At this lower level, I have issue with what, and how much they should know. I think it should be taken from my hands and left in the hands of the parent

of the child. Not that I have any personal problem teaching it, because I have done it before in standard four, but at this level some of these parents especially the very religious ones, will not like that I am addressing those issues with their children.

Merle- Which other areas of HFLE are challenging you to implement the curriculum?

Carla – Beside that sexuality theme, there are the self and interpersonal relationships, and food and nutrition areas. Without resource material for those in-depth technical things, how am I supposed to teach them?

Merle – To what extent will you say that the training you received in preparation for HFLE was adequate?

Carla – No. I say a definite no. The training was in no way adequate. A one-day workshop with second-hand information from those who went on a one-day workshop themselves, that was in no way helpful adequate for me to teach that HFLE curriculum. The ministry needs to do better than that. I think something as important as this, they should really make time to do another workshop or something, to get teachers out there and able to teach the thing. I mean is health and "family life" education, look at what happening out there with families today.

Merle –If training was to be had now, what will you like to see in the training sessions to prepare you?

Carla – I'll like to see an actual lesson being demonstrated and information as to what is the basis for adding HFLE to the curriculum. You see if I could actually see a lesson I will be better able to teach one myself and be confident that I on the right tract.

Merle –What changes have you had to make to your routine classroom teaching, and what school support did you receive?

Carla – Well, HFLE is about life skills, so it calls for me to change my normal way of teaching a lot. The session is more discussions and informal things so it calls for more classroom management. Support, if you talking about professional development, that is a rear thing here. When facilitators use to come around to help with subject areas, at that time we had on and off professional development with maths and reading, but not HFLE. If they want us to teach it, given how long ago the so-called training was, there should have been some follow-up workshops, but nothing happening in that area, sad to say.

Merle- What support did you receive from the principal, towards helping you with implementing HFLE?

Carla – The principal and one other teacher went on the workshop from the Ministry. When they returned, sometime after, we had a workshop here and we looked at what we needed to do and gave suggestions of how we should go about it. But support for me personally, from the principal....none. If she sees that for two or three weeks, nothing registered for HFLE in the record and evaluation, then she will remind me that I need to do it, but no question about if I need help with it, or if I have challenges teaching it, or nothing of the sort.

Merle – Do you have any concerns about collaborating with your colleagues in relation to HFLE?

Carla – Not really. It would be a good thing if we could work together for the children sake. I think coming together and trashing out of ideas might help with teaching HFLE and in other areas as well. The thing is we know different things and since you have no resources to use and you have to rely on what you personally know, I think sharing ideas about it could go a long way, but then I am just one person.

Merle - Do you have any concerns about implementing the HFLE curriculum that is related to the school or the way things are done?

Carla – The school..... Well, barring that not everybody have the skill to use the methods we are supposed to be using, our classrooms are not even suitable to be carrying on those classes. We don't have doors to close. Imagine the standard fives doing a topic and those children are acting out something, and I fighting to teach say grammar, you know how hard it is for my children to listen to me. The next thing is, as I said before no feedback, no support. There was a time when curriculum officers came to offer assistance; I haven't seen any of them in years. Apart from you, asking about HFLE, who else is interested? When the time comes and the children don't perform well, then all this data is compiled. The ministry measures you and make a big deal that the North Eastern district doing so poorly, and they label your school. So, that pressure outweighs whatever noble efforts that you may take with HFLE.

Merle – How will you describe the "drive" to implement HFLE at the school?

Carla –Drive? The thing is there is no "drive". Whatever you can do to make life easier for yourself on a daily basis, is what you do. Sorry to say it so, but that is the reality of the situation.

Merle – Do you have any other concerns about implementing HFLE that we have not spoken about?

Carla – No, but if I think about anything else I could always give you a call.

Merle – Thank you Carla, I appreciate the time you took to talk with me, we'll talk again soon

APPENDIX C

LETTER REQUESTING PERMISSION TO CONDUCT STUDY AT THE

SCHOOL

To: Mrs. ▮   21 January 2011

Principal,

▮▮▮▮ Primary School

Dear Madam,

I am presently reading for the Masters in Education (MEd) with a concentration in

curriculum at The University of the West Indies. As part fulfilment for this

degree, I am required to conduct original research into a matter of concern and

write the report. In this regard, I will like to report on teacher's concerns relating

to implementing Health and Family Life Education (HFLE) at the school.

I hereby ask your permission to conduct this investigation. Your support will be

greatly appreciated.

Yours Faithfully,

Phyllis Rigaud

APPENDIX D

LETTER TO PERTICIPANTS

████████████ Primary School   21 January 2011
████████████
████████████

Dear Colleagues,

As you know, I am completing a Masters in Education programme at the University of the West Indies. As partial fulfilment, I am required to conduct original research of educational concern. I am seeking officially, your willingness to participant in the study.

The topic is "Implementing Health and Family Life Education (HFLE) at a Primary School in the North Eastern Education District in Trinidad and Tobago: Teachers' Concerns. As a participant, you will be required to share your concerns relating to implementing HFLE at the school. This is to be done in a series of interview session, which will be conducted at the school, at a time suitable to you.

I assure you that the findings from the study will be solely used for the research paper and will be shared with the school. I also assure you that confidentiality and anonymity will be maintained throughout the research. Additionally, you can ask any questions during the course of the research and can withdraw from the study at anytime.

Yours Respectfully,
Phyllis Rigaud

APPENDIX E

PERMISSION TO CONDUCT STUDY

MEMORANDUM

From: Principal I

████████ Primary School

██████████████████

████████████

To: Phyllis Rigaud

████████████

████████ Primary School

Date: 24/ 01/2011

Subject: Permission to Conduct Research Study at the School

Permission is hereby granted for you to conduct your research pertaining to

fulfilment of your requirements for your Master in Education degree programme.

....
Principal I
████████ Primary School