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Protection of Health by Increasing the health Literacy of Pupils

R1 – COUNTRY ANALYSIS NATIONAL REPORT CZECH REPUBLIC

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1. SURVEY AMONG PUPILS

1. Introduction

Methodology used for the questionnaire' administration as well as number:

Elements of this survey were adapted from the research "Health Literacy for School-Aged Children" conducted by Olli Paakkari and Leena Paakkari, Faculty of Sport and Health Sciences, University of Jyväskylä, Finland.

Number of questionnaires filled in by pupils: 49.

The questionnaire has been translated into national language, printed and distributed in 1 school of Prague. 2 classes have been randomly chosen to take part in the survey.

2. Questionnaires data

See annexes.

3. Summary/conclusions

Summarise the main findings from questionnaires in terms level of health literacy of pupils.

49 pupils gendered balance and aged 11-14 have replied to this questionnaire.

When asked about the 12 research items taken from the survey conducted by Olli Paakkari and Leena Paakkari, the results were rather heterogeneous and did not identify any pervasive and shared issues.

However, looking more closely at the results, the students feel that they are in overall confident to have good information about health (only 1 responded that they are not) and able to find health-related information that is easy for them to understand. However, only a minority of them estimate being absolutely able to compare health-related information from different sources. This result might be justified by the fact that pupils may tend to look for information on social media.

To the question «Does your school pay enough attention to the basics of a healthy lifestyle ?» (Question 5), « prevention of bullying and cyberbullying » has obtained the most collected answers for « too much ». On the opposite, « smoking, alcohol, and drug use prevention » follow each other closely and are considered « too little » addressed while physical activity is clearly « enough » considered.



However, these results contradict those obtained for the following question. Indeed, Prevention of bullying and cyberbullying (24%) and Alcohol, smoking and drug use (30%) occupy an important position in the school prevention's strategy since more than 50% (54%) of the pupils have mentioned that the events previously organized by their school have focused on these topic (Question 7).

However, many of the pupils surveyed did not know whether the school has held health promotion events.



1. INTERVIEWS WITH RELEVANT STAKEHOLDERS

Short introduction about the **methodology** used to select, involve and conduct the in-depth interviews.

1. In-depth interviews

It can be included the template used for collecting the data interviews.

Name and surname	Jiřina Konečná
Professional field	Teaching assistant
Current occupation (specify your role and how long have been doing it)	Teaching assistant, assistant of the director of the school, professional coach
What is the level of familiarity with health-related information of children and adolescents you work/have worked with?	Very diverse, it depends on the age and attitudes of the pupils. It varies in different stages of their development and also according to interest. Those who regularly play sports are actively interested in everything related to their health, the opposite is students who are completely indifferent to everything.
Based on your experience, what is the attitude of children/adolescents towards the health-related information?	The same as with all the information adults pass on to them (they often think they know better).
What are the challenges children/adolescents face when finding health information? Do you believe the pandemic has affected these challenges?	I don't think they actively seek out any information as part of education. They usually look for information on the Internet when they are troubled by a problem and are afraid/embarrassed to ask an adult. Subsequently, it very much depends on what information they get from the Internet and its source. During the pandemic, we all had the opportunity to become better acquainted with the functioning of the health system.
Do you think the digitalization can affect on the children health literacy?	In a way yes, it depends on how they use it. There are many apps on the market right now that students can use. At the moment, one of the most accessible "digitalizations" is a smart watch that has functions that monitor health and physical activity.



What is the sector responsible for delivery of children/adolescents health promotion and education? Please also specify which professionals should be involved.	The foundation should be in the family, the school can work with preventive programs, but the one who most influences children's habits and should set an example are the parents.
Are there initiatives for health education among pupils?	We regularly organize first aid days at our school, when pupils try first aid. Project days, focused on prevention, and there is a psychologist at our school as part of the counseling office, who takes care of the mental health of not only the pupils.
If yes, please provide the following information per initiative : (add rows if you have more than one initiative to report)	
Responsible organisation	Educators, students of the secondary medical school, sometimes health professionals ensure the course
Activity description (objectives, results and activities carried out)	Familiarize students with health protection
Age of pupils/grades	6–15 let
Time allocated	8:00 – 13:30
Involved experts leading the initiative	

If there you have any other relevant information concerning this topic not mentioned above, please use this space to explain it:

Name and surname	Mgr. Libuše Daňhelková
Professional field	Biology - mathematics
Current occupation (specify your role and how long have been doing it)	Headmistress, 11 years; teacher, 29 years



<p>What is the level of familiarity with health-related information of children and adolescents you work/have worked with?</p>	<p>The level of knowledge of our students in the field of health is very diverse, as well as their school performance. Their attitudes towards health as a value are also different, often related to the understanding of this value in their community or family. I cannot assess their health literacy because it is not defined what is meant by health literacy for the purposes of this questionnaire.</p>
<p>Based on your experience, what is the attitude of children/adolescents towards the health-related information?</p>	<p>As for all information. It depends in what form and from what source they come to them, how attractive they are. In my opinion and experience as a school psychologist, quite a few children are looking for information related to mental health.</p>
<p>What are the challenges children/adolescents face when finding health information? Do you believe the pandemic has affected these challenges?</p>	<p>It is not a problem to find information, but sometimes one needs to distinguish whether the information is really relevant. Often, information about health is less comprehensible to the layman. The pandemic affected the attitude of children towards health, certainly also the problems of finding information - because currents of opinion were formed that did not exist before (vaccination deniers and believers...)</p>
<p>Do you think the digitalization can affect on the children health literacy?</p>	<p>Sure. However, it depends in which direction.</p>
<p>What is the sector responsible for delivery of children/adolescents health promotion and education? Please also specify which professionals should be involved.</p>	<p>The family is ultimately responsible for a child's education, so the same applies to health awareness. Pediatricians, education, and the social sphere should be involved.</p>
<p>Are there initiatives for health education among pupils?</p>	<p>Not if we don't count the initiative of the school and its teachers. We have health education, primary education, science, natural history and physical education subjects - all these subjects also include the area of human health. We organize a project day once a year, where everyone can try out first aid and behavior in crisis situations, and at the first level, traffic education projects. We deal with pupils' mental health in the framework of the counseling workplace, the school's preventive program and project events related to school relationships. Pupils are provided with school meals. Health is also part of the educational program in our kindergarten.</p>
<p>If yes, please provide the following information per initiative: (add rows if you have more than one initiative to report)</p>	
<p>Responsible organisation</p>	



Activity description (objectives, results and activities carried out)	
Age of pupils/grades	
Time allocated	
Involved experts leading the initiative	

If there you have any other relevant information concerning this topic not mentioned above, please use this space to explain it:

Name and surname	Libuše Nová
Professional field	Natural History, Health Education
Current occupation (specify your role and how long have been doing it)	Teacher at the 2nd grade of elementary school 6 years of experience
What is the level of familiarity with health-related information of children and adolescents you work/have worked with?	As I have not conducted any research on health literacy in my workplace with pupils aged 11-15, this will only be my subjective impressions or teaching experience. Of course, it depends on the age of the students. When I asked the 6th graders what it means to be healthy, most of them answered in the style: I don't have pain - a selected part of my body or I don't have any disease. These students are not yet fully aware that our health also affects our mental health. All students, I speak for the second grade of the school, know who to turn to in case of psychological discomfort and start solving the situation with an expert.
Based on your experience, what is the attitude of children/adolescents towards the health-related information?	Some students perceive the effects of their lifestyle on their health. They can name well why they are sleepless - they play for a long time on the PC. I dare to say that our pupils have a sufficient number of preventive programs, from the issue of smoking and alcohol, through the risks of cyber space to the safe establishment of sexual contacts. However, I am convinced that the family is the basis of health and if the individual is not guided in the right direction by the family, then the educational influence of the school has little chance of influencing anything.



<p>What are the challenges children/adolescents face when finding health information? Do you believe the pandemic has affected these challenges?</p>	<p>I think that students do not seek information about health by themselves. If I assign a task related to health literacy, a problem arises when choosing suitable sources, or comparing information. During the pandemic, pupils could get to know our healthcare system, be responsible for the health of their surroundings and listen to the advice of doctors and other experts.</p>
<p>Do you think the digitalization can affect on the children health literacy?</p>	<p>I think there are a lot of interesting applications that students can use to their advantage and they will also enjoy it. For example, an application where they monitor their daily routine (movement, rest, food, liquids). Applications that show the time spent on the Internet. Also a smart watch that measures sleep quality.</p>
<p>What is the sector responsible for delivery of children/adolescents health promotion and education? Please also specify which professionals should be involved.</p>	<p>Mainly family. Also the Ministry of Education and Culture.</p>
<p>Are there initiatives for health education among pupils?</p>	<p>Every June there is a Defense Day dedicated to first aid, health protection and evacuation of people at the school. Pupils go through stations with different topics. Some stations are provided by teachers, some students from the secondary medical school, police officers, paramedics with an ambulance stationed in front of the school.</p>
<p>If yes, please provide the following information per initiative: (add rows if you have more than one initiative to report)</p>	
<p>Responsible organisation</p>	<p>Educators, students of the secondary medical school, sometimes health professionals ensure the course</p>
<p>Activity description (objectives, results and activities carried out)</p>	<p>To acquaint pupils with health protection in unexpected situations.</p>
<p>Age of pupils/grades</p>	<p>The whole school</p>
<p>Time allocated</p>	<p>8:00 – 13:30</p>
<p>Involved experts leading the initiative</p>	

If there you have any other relevant information concerning this topic not mentioned above, please use this space to explain it:

2. Summary/conclusions

Summary of the main findings from the interviews in terms of:

- state of the art regarding health literacy among children including the pupils level of familiarity, challenges they face with health-related information, who is responsible for the delivery of health promotion and education, etc.

Level of familiarity:

The level of knowledge of students in the field of health is very diverse, it depends on the age and attitudes of the pupils. It varies in different stages of their development and also according to interest. For instance, those who regularly play sports are actively interested in everything related to their health. Moreover, their attitudes towards health as a value are also different, often related to the understanding of this value in their community or family.

Challenges:

Pupils usually look for information on the Internet when they are troubled by a problem and are afraid/embarrassed to ask an adult. Subsequently, it very much depends on what information they get from the Internet and its source. Finding information is not an issue, but sometimes one needs to distinguish whether the information is really relevant.

The pandemic affected the attitude of children towards health, certainly also the problems of finding information - because currents of opinion were formed that did not exist before.

Responsible for the delivery of health promotion and education:

Educators, students of the secondary medical school, sometimes health professionals ensure health promotion and education. However, interviewees agree that the foundation should be in the family. The school can work with preventive programs, but the one who most influences children's habits and should set an example are the parents. The family is ultimately responsible for a child's education, so the same should apply to health awareness, according to the people interviewed. Additionally, pediatricians, education, and the social sphere should be involved.

- existing health-related initiatives in school curricula.

The school regularly organize first aid days, when pupils try first aid and behavior in crisis situations. Project days focused on prevention are also organized. These actions are initiated by the school and its teachers.

The school counts health education, primary education, science, natural history and physical education subjects - all these subjects also include the area of human health.



The school deal with pupils' mental health in the framework of the counseling workplace, the school's preventive program and project events related to school relationships.

Pupils are provided with school meals.



3. MAIN CONCLUSIONS

Presentation of main results from the survey among pupils and interviews with relevant stakeholders.

- Based on the survey distributed among pupils, pupils feel that they are overall confident to have good information about health but only a minority of them estimate being absolutely able to compare health-related information from different sources. In fact, the survey from professionals clarifies that pupils do not have difficulties finding information. However, they do not necessarily know how to distinguish whether the information is relevant or not.
- Additionally, professionals highlight that pupils usually look for information on the Internet when they are troubled by a problem and are afraid/embarrassed to ask an adult - although this contradicts the results of the 6th element from question 4 « when I do not find satisfactory answers on health-related information, I ask my parents or friends », which only states « parents and friends », meaning references they are closed to. Actually, professionals agree on the fact that the foundation should be in the family, the school can work with preventive programs, but the one who most influences children's habits and should set an example are the parents.
- According to pupils, prevention of bullying and cyberbullying (24%) and Alcohol, smoking and drug use (30%) occupy an important position in the school prevention's strategy. On the opposite, « smoking, alcohol, and drug use prevention » follow each other closely and are considered « too little » addressed while physical activity is clearly « enough » considered. Similarly, many of the pupils surveyed did not know whether the school has held health promotion events while professionals interviewed states that the school regularly organizes first aid days and project days focused on prevention as well.

Any relevant information/suggestions useful for the development of PUPILS Teachers' Handbook and/or modules should be included in this section. (max 1 page)

The collection of the professionals' opinion and experiences as school psychologist and teachers has confirmed that quite a few children are looking for information related to mental health.

Furthermore, they have communicated that smart watches/applications have functions that monitor daily routine, health and physical activity (movement, rest, food, liquids), as well as the time spent on the Internet. Some can also measure sleep quality. It can be an inspiration for the teachers' book to include activities associated.