
Guest editorial: Health education's response to the COVID-19 pandemic: Global challenges and future directions

Guest editorial

1

While the field of health education has been called on to respond to various health crises over time, the present COVID 19 pandemic presents new and unprecedented challenges on a global scale. Public health, health promotion and health education sit at the forefront of efforts to limit the spread of the virus. At the same time as we try to stem the spread of the virus, health educators and researchers are being called on to respond to the many health-related issues that have emerged (or been intensified) in the wake of COVID 19 – including individuals' and communities' need to understand the COVID 19 pandemic itself. With this special issue, our intention was to provide a place where articles, on their own and collectively, offer stimulating and incisive necessary coverage of an ongoing health crisis to help us begin to take stock of the emergent challenges for health education across sectors; across the life course and across categories of difference, experience and disadvantage.

When we initially pitched this special issue, we sought an opportunity to contribute to the growing chorus of academic journals and other publications that had begun to emerge early in the pandemic. We wanted to bring together scholars to capture the different ways their research engaged with the emerging pandemic and the various debates and study of COVID-19. We were particularly interested in affording scholars an opportunity to reflect on and reimagine health education in light of the challenges the COVID-19 pandemic presented. At this point in the pandemic, as many in the most privileged countries begin to resume some version of their past lives, health education provides a site for some of the most important long-term interventions and responses to COVID-19. The insights of health educators and health education researchers will support researchers, policy makers and health promotion/education professionals as they examine the usefulness of health education and identify what might need to change moving forward given the ongoing changing pandemic. Together, the nine papers in this special issue provide insights into how educators and learners experienced changing teaching and learning modalities during the COVID-19 pandemic across a range of countries, including Australia, Canada, Europe, Israel, New Zealand, the United Kingdom and the USA.

These papers address health broadly as “a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity” (Nutbeam, 1998, p. 1). Across the papers, health emerges as a resource “which permits people to lead an individually, socially and economically productive life. Health is a resource for everyday life, not the object of living. It is a positive concept emphasizing social and personal resources as well as physical capabilities” (Nutbeam, 1998, p. 1). Though it is clear that this approach to understanding health is increasingly integrated within the strategies deployed to respond to the current pandemic, significant challenges remain as we embark on the journey of making sense of the pandemic and how it has changed how we make sense of health and the subsequent role that health education has to play. The authors we've assembled address these questions – and raise others.



The first point of focus for this special issue is to reflect on the conditions of teaching and learning about health during the COVID-19 pandemic and especially the rapid move to online education. Even though online education is not new and teaching practices already included hybrid and online courses, the sudden and imposed move to online teaching needs to be explored and reflected upon.

The first paper, by Cruickshank and Mainsbridge and entitled “*Pre-service teacher perceptions of teaching health education online*,” critically examines Australian pre-service teachers’ perceptions about the shift to teaching health education online during the COVID-19 pandemic. Cruickshank and Mainsbridge suggest that, confronted with the shift to online teaching, pre-service teachers were concerned about their ability to teach and engage with students. The authors report that pre-service teachers were unsure how to best differentiate activities to ensure all students could meet the intended outcomes. The paper presents findings from focus groups and personal reflections with pre-service teachers majoring in health and physical education who were required to adapt a four-week high school health education unit for online delivery. The authors point to the need to adapt teacher education and teacher professional development to ensure teachers are better prepared for online delivery in the future.

Constraints can also represent opportunities for innovation. The second article in this special issue focuses on how educators have adapted to online teaching during the COVID-19 pandemic. In their article entitled “*Online argumentation-based learning aided by digital concept mapping during COVID-19: Implications for health management teaching and learning*,” Alt and Naamati-Schneider draw upon a management of health service organization case study to describe how traditional lecture-based activities for undergraduate students were transformed into argumentation-based learning activities during the COVID-19 lockdown. Analyzing undergraduate student responses to a digital concept mapping exercise, the authors argue that combining constructivist teaching tools with advanced technology can improve the development of lifelong learning capabilities of students.

In the third paper, “*Navigating COVID-19 through diverse student learning communities: importance and lessons learned*,” Mitchell, Mork, Hall and Bayer describes how a historically Black medical school in the southern USA adapted medical education training through learning communities during the COVID-19 pandemic. Analyzing survey responses from medical students, the authors found that LCs aided in navigating adaptation to new learning platforms. The small learning community group structure created a sense of security for students specific to receiving academic help, emotional support, a network of assistance resources and a place to process COVID-19 losses and insecurities. The authors suggest that medical students’ receptivity to utilizing the learning community structure for support may relate to their commitment to addressing health disparities, serving the underserved and embracing a medical school culture that values community.

The next paper by Catriona O’Toole and Venka Simovska explores the impact of school closures on the wellbeing of staff, students and the broader school community in Ireland. The authors interviewed 15 education professionals about their experiences during closures. Participants included classroom teachers, school leaders and special educational needs teachers from diverse communities across Ireland. The findings reveal that participants believe that schools are a key in supporting their local community and that student–teacher–family relationships are highly valued by educators. Additionally, school personnel reported that they found themselves forging new identities and establishing new professional boundaries as they cared for and supported students and families during school closures. The authors conclude their article by stating that COVID-19 has had a significant negative impact on already vulnerable and/or marginalized young people. They also suggest that COVID-19

has shone a light on the important role that schools play in promoting the health and well-being in their community.

Another point of focus for health education and thus for this special issue lies in health education's capacity to foster health and well-being during the COVID-19 pandemic. A substantial body of research points to the major adverse effects of the pandemic on people's mental and social health. Uчук and Yildirim's paper, "*The effect of COVID-19 prevention methods training given through distance learning on state anxiety level: the case of private sector*," explores the impact of COVID-19 prevention training on the anxiety levels of workers in a communication sector company in Turkey. Drawing on survey data, the authors found that workers' anxiety scores were lower after the training, suggesting that effective training can improve worker well-being. The authors argue that other sectors can benefit from implementing similar training programs.

In addition to this, a growing body of evidence points to the fact that social distancing measures have dramatically impacted people's health, well-being and social lives. The fifth article by Goldstein and Flicker reflects on such changes. In the paper entitled "*It's been a good time to reflect on . . . who isn't worth keeping around: COVID-19, adolescent relationship maintenance and implications for health education*," Goldstein and Flicker examine the impacts of COVID-19 physical distancing measures on the lives and relationships of young people in Canada. The authors draw upon theories of "digital intimacies" and "relationship maintenance" to argue that young people's reflections on physical distancing and online relationships expose larger gaps in sex, relationships and health education pedagogies. The findings of the study suggest that COVID-19 physical distancing measures and school closures appeared to create the conditions for some young people to productively reflect on the labor involved in the maintenance of their relationships in relation to considerations of proximity, reciprocity and distance. The authors show that this labor was particularly articulated by women and girl participants, many of whom expressed that life disruptions caused by COVID-19 catalyzed learning about their own relationship needs, desires and boundaries. Discussions of relationship maintenance and digital intimacies elucidate the limitations of health education's tendency to construct adolescent relationships as existing along binaries of "healthy" and "unhealthy," leading the authors to argue that health education might benefit from more meaningful integration of these concepts.

In the next article, Racine and Bryson explore how epidemic modeling could provide us with an opportunity to reimagine health education and policy post-COVID-19. According to the authors there is a lack of research exploring how modeling methods are taught and how this, in turn, influences what modeling methods are employed. To fill this gap, the authors conducted a multi-method study that involved conducting a literature review and interviewing modeling stakeholders. The authors suggest that epidemiological models are powerful tools for shaping public health policy, research and practice. But in stating this, they also caution us to pay attention to how modeling methods are initially taught. Overall, their research reveals that there is still room for improvement in this area that might better equip students to engage with the full range of tools available.

Last but not least, schools have been mobilized during the pandemic to take on two challenging tasks: to contribute to the national (and even global) efforts to control the pandemic by applying a set of public health measures and engaging, among other things, in the development of pupils' health literacy and to continue to provide pupils with education in spite of the major constraints resulting from lockdowns and social distancing.

In "*How school-based health education can help young people navigate an uncertain world*", Dixon and Robertson explore the potential of health education learning to contribute to aspects of the Organization for Economic Co-operation and Development's (OECD's) Learning Compass 2030. OECD's Learning Compass offers a learning framework that uses

the metaphor of navigation to demonstrate the competencies young people need to thrive. Dixon and Robertson suggest that socio-critical health education learning is compatible with the Learning Compass' emphasis on the notion that how subject matter is taught is paramount to the topics covered. The authors consider how to reimagine school-based health education in order to better enrich students' understanding of how to navigate the complex and uncertain times they will undoubtedly face across their lives.

The final paper in this special issue explores health and education professionals' experiences of schools reopening during the COVID-19 pandemic, providing us with valuable insight as to the challenges posed by the COVID-19 pandemic upon schools. In their paper, "*Co-operation and consistency: a global survey of professionals involved in reopening schools during the COVID-19 pandemic*," Gray and Jourdan present findings from a global qualitative study distributed through the UNESCO Chair of Global Health and Education's networks. The authors' findings suggest that educators in the Global North received guidance prioritizing public health measures like social distancing, with less emphasis on educational impacts. Success came from partnerships between schools, families and local authorities, consistent guidance and enough time and resources for implementation. Fear of infection led to significant absenteeism among students and staff. The authors show that respondents – many of whom were from the Global South – were left waiting for guidance, even though they shared similar concerns and expectations. This paper offers insight into the first-hand practices and perspectives of health and education professionals about reopening schools.

This special issue provides researchers and professionals with important insights as to how the field is currently responding to the global pandemic – what has worked and why. The conditions of teaching and learning have shifted alongside every other aspect of social life. We need more from health education at the very same time that health educators work with fewer of the usual resources, with less experience in the current conditions of teaching and learning and with a greater sense of urgency. But as even the pandemic threatens to throw our field, like so many others, into a sense of crisis, health education and health educators have persevered. The articles in this special issue suggest that across venues – online, in person, in medical schools, in primary schools, with adults and with young people – health educators have been trying to respond to the many challenges that COVID-19 has thrown up time and time again. With such an accomplishment in sight, we hope that the special issue will also contribute to discussions that help us understand what we could do to strengthen current program approaches and responses. We are hopeful that the special issue will provide us with some essential guidance and lessons for moving forward.

Emily Darlington

*Health, Systemic, Process EA 4129 Research Unit, Universite Claude Bernard Lyon 1,
Villeurbanne, France*

Jessica Fields and Ali Greey

University of Toronto, Toronto, Canada, and

Deana Leahy

Faculty of Education, Monash University – Clayton Campus, Melbourne, Australia

References

- Nutbeam, D. (1998), "Health promotion glossary", *Health Promotion International*, Vol. 13 No. 4, pp. 349-364, doi: [10.1093/heapro/1.1.113](https://doi.org/10.1093/heapro/1.1.113).