

# Chapter 14

## Multiple Solitudes: Digital Curriculum Access in the Pan-Canadian Context

**Lorayne Robertson**

*University of Ontario Institute of Technology, Canada*

**Dianne Thomson**

*University of Ontario Institute of Technology, Canada*

### ABSTRACT

*In this paper, the authors examine the potential and the reality of pan-Canadian digital curriculum policy access in the current web-enabled global landscape. The authors discuss theory related to the affordances offered by digital technologies for the sharing of research and policy, as well as theory relative to knowledge mobilization and communities of practice, both of which support collaboration and consultation for informed policy development. The authors present their findings from two investigations to test digital access to curriculum policies across Canada's provinces and territories through their Ministry of Education websites. Through this analysis, the authors provide evidence of the current affordances and barriers related to digital access to curriculum policies and offer suggestions to facilitate knowledge mobilization around curricular responses to child and adolescent health issues.*

### 1. INTRODUCTION

We live in an era in which we are increasingly mobile and virtually connected (van't Hooft & Brown-Martin, 2009) and we have the capacity to share information in ways that can benefit society, such as advocacy efforts for child and adolescent health issues. Most Canadian schools are connected to the internet (Plante & Beattie,

2004) creating the potential for sharing best practices in health education across the country. As the country faces significant issues related to child and adolescent health, a paradox exists; while many of the issues of children's health have been identified by global agencies such as the International School Health network (McCall, Rootman, & Bayley, 2005) or national agencies such as Participaction, the curriculum-based

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## **Multiple Solitudes**

responses to these issues are determined individually by the ten provinces and three territories through their curriculum policies. There has been a call for an international network for advocacy and knowledge exchange across sectors for more effective promotion of school health programs (McCall et al., 2005), proposing the construction of a global school health agenda connected to local learning communities. Here in Canada, although most Canadians have the opportunity to access an affordable Internet connection from home (Middleton & Sorensen, 2005) as well as from schools (Plante & Beattie, 2004), the education messages available digitally from provincial curriculum policies present a broken front that could be characterized more as *multiple solitudes* than a coherent national educational response to these health issues. This paper outlines research undertaken to determine the degree of accessibility available to educators and communities seeking to understand, create and share educational responses to child and adolescent health priorities such as: health, fitness, body image and media literacy in the pan-Canadian curriculum context.

## **2. CONTEXT**

### **2.1. State of Current National Curriculum Initiatives**

In the Canadian context, the responsibility for K-12 education including curriculum policy development has been devolved from the national government to the provincial and territorial authorities. National issues and concerns do exist; these concerns include children's mental health and body image concerns (e.g., Chaiton et al., 2009). Hoped-for interventions logically need to be targeted at all school-aged children and adolescents nationwide but the intervention and prevention curriculum policies to address national concerns are developed individually by the provinces and territories. To some extent, this local treatment of

issues is needed, as different cultural communities may have specific concerns and differentiated needs. A First Nations community, for example, may have different health priorities than an inner city community. In an era where some of the same social and health challenges exist globally for children, this distribution of educational responsibilities to the provinces raises the issue that provinces may respond in different ways, creating potentially different and possibly contradictory approaches to address shared national issues of children's health. Internet connectivity presents an opportunity for educators in all provinces to share K-12 curriculum interventions and responses to national health concerns. Provinces, territories, districts, and schools could address issues and through the internet, collaborate on and share their innovative responses to address national priorities. Research on curriculum-based and school-based interventions could also be shared in order to exchange knowledge to address health issues of Canadian children and adolescents.

One of the few national voices in the Canadian education system is the Council of Ministers of Education, Canada (CMEC). In the past, there has been some commitment to pan-Canadian curriculum initiatives by the CMEC. Protocols were developed to provide a framework for collaboration between provinces based on the acknowledgement of common educational goals and the importance of educational technology both in schools and in distance education (CMEC, 1997a). At the same time, a protocol was developed for collaboration on the development of common outcomes in Science education (CMEC, 1997b). Since that time, there has been no national agreement for curriculum outcome development in any other subject that has been reported.

More recently, the CMEC has instituted a pan-Canadian program of assessment of achievement with a focus on issues that fit the research agendas defined by the different provinces and that arise from those achievement data sets. The program is intended to investigate variables associated with

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