**Open call, special issue:**

**Cultivating empowerment in teacher education and schools for increased quality of life among students**

**Guest editors:**

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**Important dates:**

**15. April 2022: Submission of abstract**

**15. May 2022: Abstract feedback from editors**

**15. November 2022: Submission of article for peer review**

**15. January 2023: Deadline for peer reviews**

**15. April 2023: Deadline for revised submission**

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**Topics of interest to this special issue include, but are not limited to**:

• Comparative studies in the Nordic countries on pupils’ quality of life and life skills in school;

• Studies that focus on the role of teacher education in order to increase students’ competence in promoting pupils’ quality of life and life skills;

• Studies that investigate how schools work systematically to promote pupils’ quality of life and life skills;

• Studies that investigate didactic approaches that can help promote pupils’ quality of life and life skills;

• Studies that investigate gender differences related to pupils’ quality of life and life skills;

• Document analyses of key management documents in the subject area of the special issue;

• Theoretical contributions in the subject area of the special issue.

Submit your abstract via email to one of the guest editors: [kristin.e.bjorndal@uit.no](mailto:kristin.e.bjorndal@uit.no%20[kristin.e.bjorndal@uit.no]) or [yvonne.sorensen@uit.no.](mailto:yvonne.sorensen@uit.no%20[yvonne.sorensen@uit.no])

**Background**

Young people in Nordic countries have never been as well-educated and competent as they are today. However, research has shown that the steady increase in mental health problems among young people is one of the biggest challenges for public health in those countries (Nordens Välfärdscenter, 2017). World Health Organization (WHO) (1999, p. 3) defined mental health as “a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community”.

Since 1982, WHO’s Regional Office for Europe has collaborated with Health Behavior in School-aged Children (HBSC) to address young people’s well-being, health behaviour and social context in 50 countries. Findings from the HBSC studies are used to inform governments and the field of practice about ways to improve the lives of young people (Inchley et al., 2020). The findings from the latest HBSC studies have shown that life satisfaction among adolescents has decreased in most Nordic countries (Due et al., 2019; Inchley et al., 2020). A recent Nordic survey (Norway and Sweden) also reported that the global COVID-19 pandemic has led to a further and marked decline in quality of life among young people (Haugseth & Smeplass, 2021).

Quality of life is about what gives life value and meaning; it encompasses subjective and objective aspects of life. Subjective quality of life is about the individual’s functioning in daily life (such as the experience of mastery, meaning, belonging and commitment), positive and negative emotions (such as joy, sadness, anger and anxiety) as well as the individual’s experience, feeling and assessment of his/her satisfaction with life as a whole. Objective quality of life consists of key aspects of one’s life situation, such as freedom, security, health, community and self-development (Nes et al., 2018). Thus, good quality of life can be summed up by having life skills, being satisfied and active, having a community, having positive self-esteem and experiencing a basic mood of joy.

Quality of life can be seen in the context of empowerment. WHO (1998, p. 6) defined empowerment in health promotion as “a process through which people gain greater control over decisions and actions affecting their health”. Empowerment is about empowering individuals to take ownership of their life by supporting their inner resources by focusing on what they can actually do (coping). Empowerment is also about a person standing up to forces that cause inaction and impotence by focusing on what he/she cannot do (limitations) (Amundsen, 2019).

Schools are one of society’s most important arenas for quality-of-life promotion and health prevention among young people (Lillejord et al., 2018). Thus, thriving and mastering the academic challenges encountered in school are important aspects of a student’s experience of quality of life (Pettersen & Johansen, 2019; Uthus, 2017). Despite this, the latest HBSC report (2020) stated that young people in the Nordic countries and other countries feel pressured by schoolwork and the number of young people who report that they dislike school has increased. The report also noted that the school experience and school satisfaction of young people deteriorate with age and the experience of support from teachers and classmates decreases as school pressure increases (Inchley et al., 2020). At the same time, a systematic overview of the literature highlights that there is a clear correlation between long-term stress and serious health problems, and that schools are a key contributor to pupils’ stress levels. It has also been noted that while it is difficult to say how much of the stress reported by young people is due to school and how much is attributed to more general trends in society, schools must take pupils’ health complaints seriously (Lillejord et al., 2017).

The Nordic countries are members of the Schools for Health in Europe network foundation (SHE). Launched in 1991, SHE began as a network to support the WHO. In 2017, SHE became its own independent foundation. SHE’s goal is to improve the health of children and adolescents in Europe, with a particular focus on schools (SHE, n.d.). In the Nordic countries, different efforts are being made to improve the quality of life and health of children and adolescents in schools. The Swedish government has introduced a national mental health strategy for 2016–2020 (Ahnquist et al., 2017). In Iceland, the Department of Public Health and Well-being Directorate of Health in Iceland (DOHI) is responsible for safeguarding the public health of the Icelandic population and it has drawn up an action plan for all schools in Iceland for 2016–2020 (Guðmundsdóttir, 2021, pp. 1–47). In Denmark, since 2014, the Danish Ministry of Education has conducted annual national well-being surveys for children of all ages in public schools; schools use this tool to monitor the well-being of students, to make informed adjustments to their own related practice and to inform the education policy at the municipal level (Larsen et. al., 2020). In Finland, physical, mental and social health has been a separate subject in basic education since 2004 (Karlsen, 2016). In Norway, Public Health and Life Mastery (FoL) was introduced as an interdisciplinary topic in school in autumn 2020 (Læreplanverket, LK20; Utdanningsdirektoratet, 2017). In Norway, changes have been implemented related to the responsibility of schools and municipalities for the competence development of schools (Gjerustad et al., 2019), such as a decentralised scheme (DeKomp) for competence development in schools.

Promoting students’ quality of life requires the complex competence of both teacher educators and teachers. According to Lillejord et al. (2018), to help children and adolescents cope with their lives and become active and independent citizens a school’s thinking and practice must be changed so that it supports the active and self-realising nature of its pupils.

There is relatively little Norwegian research-based knowledge on topics as public health and life skills (Klomsten & Uthus, 2020) and quality of life aimed at schools and teacher education. It is also difficult to obtain an overview of research that has focused attention on pupils’ life skills and quality of life in the other Nordic countries. Against this backdrop, it seems relevant to invite contributions to a special issue that highlights how schools and teacher education can cultivate student empowerment to promote pupils’ quality of life through different perspectives, practices and didactic approaches.

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