

Introduction to Comprehensive School Health Promotion/Health Promoting Schools

The following summary has been prepared from several Canadian and international sources. In particular, the Consensus Statement on CSH that was published by several national organizations in 1990 and that is currently under revision was used for this overview.

School health promotion uses the setting of the school to promote the health of students, staff and the community as part of a community-wide population health approach. Learning and academic achievement is linked directly to the health status and health behaviours of children and consequently the social role played by formal schooling has included attention to wellness.

A comprehensive approach to school health promotion includes a broad spectrum of programs, activities and services that take place in schools and in their surrounding communities. In order to enable children and youth to enhance their health, to develop to their fullest potential and to establish productive and satisfying relationships in their present and future lives.

The programs, activities and services delivered within such comprehensive approaches to school health are the responsibility of young people, families and professionals, institutions, agencies and organizations concerned with children and youth, education, health, social services, law enforcement, the voluntary sector and the community as well as governments at all levels. Each of these individuals, organizations and government departments can potentially be involved in the delivery of instruction, services, social support or a healthy physical environment. Coordinating committees at all levels, from national to local school levels, are fundamental to sustainability.

Effective school-based and school-linked health promotion employs comprehensive approaches that:

- integrate our responses to several health issues within a holistic view of health and the whole child,
- favour values such as youth engagement, parent involvement and staff wellness,
- coordinates multiple interventions at all levels within several systems and agencies that serve children/youth and
- results in health-promoting school communities.

School health promotion and school improvement plans and strategies should strengthen the key capacities of mandated systems (education, health, others) so that they can work together and within their respective sectors more effectively to enhance the health of schools, homes and community environments in order that school and agency programs/preventive services become more health promoting and that health, social development, learning outcomes are improved.

Experience and research evidence strongly suggests that a comprehensive approach to school-based and school-linked health promotion can influence the health-related knowledge, attitudes and behaviours of students, as well as modify or alleviate other factors that compromise health. Expectations of the impact of the school setting must be realistic however, as the primary determinants of health status, such as family expectations and practices, developmental issues, genetics, and socio-economic, cultural and environmental factors have profound impact.

The Goals

The goals of comprehensive school health approaches are:

- to promote health and wellness
- to prevent specific diseases, disorders and injury
- to intervene to assist children and youth who are in need or at risk
- to help support those who are already experiencing poor health
- to provide an equitable playing field that addresses disparities and contributes to academic success

The Components

A comprehensive approach to school-based health promotion is designed not only to affect individual health behaviours, but also to modify the environments in which young people live and learn. Comprehensive school health calls for an integrated approach that engages the community at large and incorporates four components:

Instruction, including:

- a comprehensive, K-12 health curriculum
- a K-12 physical education curriculum
- a K-12 family studies/home economics curriculum
- the integration of health into other subject areas
- the planned use of other informal learning opportunities
- the development of awareness, knowledge, attitudinal change, decision-making, skill-building, behavioural change and social responsibility
- effective pre-service and in-service training for educators
- effective teaching/learning materials
- appropriate teaching methodologies that are culturally and developmentally sensitive, including use of the Internet and other media

Preventive Health Services, including:

- appraisals
- screening services
- early identification
- child protection services
- referrals
- guidance services
- psychological counselling

- social work services
- services for special needs students
- treatment, post-treatment support and rehabilitation services
- police services
- recreational services
- pre-service and in-service training of health and other professionals
- active coordination of services and programs

Supportive Social Support, including:

- role modeling by school staff and others
- peer support
- media cooperation
- community participation
- community development
- staff wellness programs
- appropriate school discipline policies
- effective school management practices
- active student participation
- extensive parental involvement

Healthy Physical Environment, including:

- safety procedures and regulations
- sanitation, clean water
- hygiene standards
- environmental health standards
- healthy food and nutrition policies and services
- smoke-free school policies
- accessible and sustainable environments that promote physical activity, safety and freedom from bullying or harassment.

Not all communities, agencies, governments or sectors will accept all of these components, terms, components or aspects of a comprehensive approach to school health programs. It is vitally important that constituents at every level and in each sector take ownership for school health promotion. This will require that they have the opportunity and obligation to develop their own approach, define their own models and select their own priorities consistent with the resources available to them.

Indeed, there are a variety of terms used to describe school-based and school-linked health promotion, including “Comprehensive School Health” (the Canadian term), a “Health-Promoting School (the European term) or “Coordinated School Health” (the American term). In England, the term used in policy documents is simply “Healthy Schools”. In Ireland and Greenland, they use the term “good school”.

Within Canada, Quebec the term that has developed is “Ecole et milieu en sante”. Saskatchewan uses “schools plus”, Manitoba uses “healthy schools”, the New Brunswick

program is called “healthy learners”, an Ontario pilot project used the term “living school”.

Similar terms such as the “community school”, a “full service school” and “effective schools” are also used but are sometimes actually based on distinct orientations that are compatible but different than school health. For example, the Community School denotes the school reaching out to be a service to the community, while CSH includes that ideas as well as the notion that community agencies should be serving the school. An effective school employs “whole school” strategies to be focused on academic success and health is a complementary but secondary goal. Full service schools are focused on the coordinated delivery of preventive health services in schools and this approach sometimes makes public health professionals nervous that they will be accountable for the actions of the health care system.

The Benefits

The attainment of these health goals will contribute to more effective schooling, higher academic achievement and enhanced equity in educational outcomes. The multiple interventions that are a part of this approach can enable children and youth to enhance their health, to learn and develop to their fullest potential and to establish productive and satisfying relationships in their present and future lives. A wide range of government health promotion and social development programs may be supported by health-promoting school communities. Ultimately, the comprehensive school health approach can reduce or defer health care and other human services costs.

The Organizational Capacities of Health and Education Systems

In order to support health-promoting school communities in a sustained manner, the organizational capacities of health and education systems (ministries, agencies, schools, professionals, communities) need to be strengthened in areas such as:

- comprehensive and coordinated policies on school health, health issues and the elements of school health promotion that are actively supported by senior managers
- assigned staffing infrastructure to support interdisciplinary cooperation at all levels
- formal and informal mechanisms for coordination and cooperation
- active knowledge transfer and exchange within and across sectors
- ongoing workforce development of health and education professionals through professional preparation programs and staff development
- providing regular and reliable data on the health status, determinants, behaviours, attitudes, skills and knowledge of children and youth as well as periodic surveys and self-assessments of policy/program capacity
- regular scans of the environments, trends and emerging issues that affect the health of children and youth