

# RECORD OF DISCUSSION School Health Coordinators' Committee Meeting January 10 2017

**Chair: Jennifer Munro-Galloway (ON)** 

# Participants:

Representative	Jurisdiction
Sanja Ristic	BC
Pat Martz	AB
Jeff Bath	
Jillian Code	SK
Jocelyn MacLeod	
Michelle Mougeot	
Paul Paquin	MB
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Ellen Coady	NL
Carol Ann Cotter	
Ian Parker	YK
Jennifer Shortall	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Regrets	
Scott Beddall	BC
Jennifer Wood	MB
Sterling Carruthers	PE
Kari Barkhouse	NS
Charlotte Borg	NU
Elaine Stewart	NT
Stacey Burnard	YK



#### **Record of Discussion**

#### 1. Welcome and Roll Call

Jennifer welcomed all to the call.

# 2. Review and Approval of Agenda

The Agenda was approved as written.

#### 3. Approval of Record of Discussion from December 13 2016 teleconference

The Record of Discussion of the December 13 2016 teleconference was approved as written.

#### 4. Update from Secretariat

- Joint SHCC-MC meeting in Yellowknife June 6-8 2017
- HBSC Questionnaire

In addition to the written update, Katherine provided the following:

a. Joint SHCC-MC Meeting in Yellowknife

A planning teleconference for the joint meeting will be held in early February with Rita, Sabrina, Elaine, and some NT colleagues. The face-to-face meeting will be held June 6-8 (half day on the 8<sup>th</sup>). Jennifer Munro-Galloway suggested that if anyone was tacking on some personal time for this trip we could perhaps organize a group outing or activity.

#### Discussion:

- The question was asked if the entire meeting will be joint or if there will be any separate discussions of the two groups.
  - Katherine responded that the planning committee does not have details worked out but it is likely most, if not all, the meeting will have the two groups together. This best fits the purposes of the meeting: to learn from work underway in the North, to see examples of collaboration of Health and Education, and to discover how communities have become partners in the work in Northwest Territories.
- Ian commented that he is very supportive of trip north and asked about a role for other territories.
  - Katherine advised that Nunavut has expressed interest in bringing the perspective of that territory into this meeting, and it might make sense to bring Yukon issues forward as well. She will provide further updates as planning progresses.

# b. HBSC Questionnaire



Katherine and Susan had a call with John Freeman to discuss the next round of the HBSC survey questions. He hopes to have survey collection begin in schools this coming October-November. There is time this round for discussion on optional packages, as the international mandatory questionnaire has already been completed. John may consult with stakeholder groups regarding having two versions of the questionnaire to avoid a lengthy single version that covers all optional questions. He would like involvement from JCSH-SHCC, as well as having Indigenous and youth perspectives and involvement by PHAC researchers. John hopes to have the optional questions finalized by April; to support this, it is hoped the first meeting of the JCSH Research Advisory Committee will take place late January-early February.

#### Discussion:

• Jennifer Munro-Galloway, Ellen Coady, Ian Parker will sit on the Research Advisory Committee. Other jurisdictions need to discuss representative names and will contact Katherine.

**Action:** School Health Coordinators interested in participating on the Research Advisory Council should send their names – or jurisdictional representative – to Katherine by January 13.

Action: Katherine will send out a meeting Doodle.

#### 5. SHCC Co-Chair

Jennifer advised that this month marks the end of her two-year term; thus, there is a need for a co-chair from another jurisdiction for the School Health Coordinators' Committee. As the representative from the lead province, Sterling will remain as the other co-chair. Both are happy to talk with anyone interested.

Katherine noted the School Health Coordinators' Committee Terms of Reference states the non-lead PT cochair must rotate every two years. Selecting a co-chair from a jurisdiction with more than one School Health Coordinator may present some challenges, but there are options that can be explored such as sharing co-chair duties by the jurisdiction's representative School Health Coordinators.

**Action**: Interested School Health Coordinators should reach out to Jennifer Munro-Galloway, Sterling or the Secretariat for information on the co-chair role and duties.

Action: Katherine will send out information on the time commitment required of the SHCC co-chair.

# 6. Working Group / Advisory Committee Updates:

• Wellness Education Environmental Scan



Katherine advised the scan was completed last in June 2016. A meeting of the Wellness Education Working Group resulted in a request for updates and, in a few cases, completion of the scan by provinces and territories. In light of the openness of the submissions, which are helpful to curriculum specialists throughout the country, this scan will remain on the private side of the website and shared only with working group members and colleagues on a need-to-know basis.

**Action:** Susan will send out the Wellness Education environmental scan for update completions – deadline February 10.

#### PMH Toolkit

Katherine advised the next meeting of the Positive Mental Health Toolkit Advisory Committee will be held January 16 to review the five modules. This takes the work on this to almost a full year of active engagement by committee members. When the advisory committee is satisfied with the modules, the full toolkit will be sent to all School Health Coordinators for review to ensure application in all jurisdictions.

# • Equity Working Group

This working group has discussed looking at JCSH tools and resources through equity and diversity lenses, said Katherine. The Positive Mental Health Toolkit revisions reflect the Advisory Committee's commitment that this be done well, and changes have been made in the revisions to reflect equity and diversity. We will look at what expertise we will engage to reflect diverse perspectives as we move forward on this work.

#### 7. Communications Committee

Susan advised an email went out last fall asking for a few volunteers for a meeting or two of this committee – three areas of review are needed: use of Annual Report and possible dissemination pieces, website, Communications Strategy update.

Action: Susan will send out an email request for a small committee to hold one or two meetings.

Action: School Health Coordinators are asked to contact Susan if interested in participating in this committee.

#### 8. Emerging Trends and Opportunities

Jennifer asked School Health Coordinators to each provide a short update, if they had something they wished to share.



<u>Health Promotion Canada</u>: Ian said the organization seeks to support health promotion practitioners through the development of discipline specific competencies. He may be able to have a member of the group participate in a monthly SHCC teleconference if others are interested.

- Pat is familiar with the organization, adding the AB chapter has involvement from a principle investigator for the Alberta Healthy School Community Wellness Fund is very involved.
- Jillian has heard of the group through her regional health authority counterparts. She would be interested in a presentation.
- Marlien is aware it is trying to establish a chapter in the Maritimes or Atlantic Canada and had a presence during the International Global Forum in Charlottetown in October 2016.
- It would be important to understand the connection with school health and ensuring school is the setting for discussion. It would be helpful to share JCSH's work on the CIM on CSH and Student Achievement.

**Action:** Ian will write an email of introduction to Health Promotion Canada suggesting contact with the Secretariat.

**Action:** The Secretariat will explore the group's work in school health with the national leads before possibly inviting them to attend a teleconference and share their work.

**Health Behaviour in School-aged Children:** Ian spoke with John Freeman about the possibility of a cross-northern HBSC survey during this upcoming round; there was inadequate Indigenous representation in the 2013-14 survey round and a northern perspective would help to correct this, given larger numbers.

**NL:** Carol Ann asked if any School Health Coordinators are planning to attend the PHE or the Dietitians of Canada conferences, both to be held in St. John's in June. Ellen advised the province is participating in a task force on the K-12 education system.

**ON:** The province is moving forward on daily physical activity (DPA) and school food and beverage policies. A legislative committee on Rowan's Law will meet soon. A new policy on conditions that do not have individual legislations – diabetes and seizure disorders are included – is underway. Jennifer noted that any further responses on injury prevention work in other jurisdictions will still be welcome. She would like to have School Health Coordinators let her know whether or not they have information.

**Action:** The Secretariat will upload the injury prevention responses into a document on the private side of the website.



**SK:** The province will host the 4<sup>th</sup> <u>Student First</u> anti-bullying forum in February. The theme is Our School Includes Everyone.

**AB:** The province's wellness education is part of the curriculum renewal now underway. A guiding framework includes competencies in personal growth and well-being. The province is also engaged with NT and NU in these processes; Elaine Stewart sits on the working groups. In other areas, the Shaping the Future annual conference will be held the end of January; Apple Schools has received a small grant, its first.

**BC:** The fentanyl overdose epidemic in the province is now a public health crisis. Some of the work is being done to provide resources in school, such as drug education, critical thinking to aid in prevention approaches, and an overdose prevention campaign kit. The crisis has impacted some schools. Sanja asked if other provinces / territories had initiatives underway.

- Paul said MB issued posters and information kits for schools in December.
- Jennifer noted that a meeting in the past couple of days was held at the Toronto mayor's office to discuss funding for overdose antidote for community health clinics identified to receive kits. That city is trying to prepare for the crisis it expects will come.

#### 9. Review of Action Items

- To review and update the Action Items table
  - Completion of 94 C2Action read and reflection on the two questions: (1) Why is this Call to Action being asked of us? (2) Would our nation be better or worse off if this Call to Action is fulfilled?
  - Explore having a standing item on education, health inequities, and building relationships through Indigenous perspectives in JCSH work.

Susan referred the group to the two above-noted items in the Action Items Table that came out of the October face-to-face meeting. Many School Health Coordinators have been part of conversations in their jurisdictions around a number of areas: consulting with elders and going to authentic resources; identifying how their section or ministry will address the Calls to Action, including in grant proposals.

Katherine noted that JCSH will continue to ensure we build understanding and acknowledgement of Indigenous perspectives on education, health inequities, and building relationships; we will consider whether maintaining a standing item provides the best response.

#### 10. Next Meetings

- February 14 2017 teleconference
- March 14 2017 teleconference
- April 11 2017 teleconference



May 9 2017 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

# 11. Adjournment

Jennifer thanked everyone for their participation during the meeting.

# Record of Discussion School Health Coordinators' Committee Meeting

February 14 2017 1:00 pm EST

Co-Chairs: Sterling Carruthers (PE), Jennifer Munro-Galloway (ON)

# **Participants:**

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Jillian Code	SK
Michelle Mougeot	
Jennifer Wood	MB
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Ellen Coady	NL
Shara Bernstein	NU
Elaine Stewart	NT
Ian Parker	YT
Jennifer Shortall	PHAC
Secretariat	
Susan Hornby	Secretariat
Regrets	
Scott Beddall	BC
Jeff Bath	AB
Jocelyn MacLeod	SK
Paul Paquin	MB



Kari Barkhouse	NS
Carol Ann Cotter	NL
Charlotte Borg	NU
Stacey Burnard	YT
Katherine Kelly	Executive Director

#### **Record of Discussion**

#### 12. Welcome and Roll Call

Sterling welcomed all to the call.

# 13. Review and Approval of Agenda

The agenda was approved as written.

# 14. Approval of Record of Discussion from January 10 2017 teleconference

The January 10 2017 Record of Discussion was approved as written.

#### 15. Update from Secretariat

In addition to the written update, Susan provided the following additions:

- a) Communications Committee: A small group is in place and the first meeting should be held in the next few weeks.
- b) HBSC RAC: The first meeting to discuss the 2017-2018 survey round was held February 1 and committee members are now consulting with colleagues on two of the optional packages of questions. JCSH will be consulted along with Indigenous leaders, youth leaders, and PHAC for ranking of the final set of packages.
- c) Joint Management Committee School Health Coordinators' Committee meeting in Yellowknife: The Secretariat has requested a high-level agenda from the planning committee for the purposes of initiating travel approval requests for this meeting.
  - 16. Presentation by Health Canada: "Update on Healthy Eating Strategy: Canada's Food Guide and Marketing to Children"

    Ann Ellis and Elaine Jones Mclean
    - To discuss the Healthy Eating Strategy and plans for revision of the food guide



Ann Ellis and Elaine Jones Mclean from the Office of Nutrition Policy and Promotion, Health Canada, gave a presentation on the Healthy Eating Strategy, sharing plans for revising Canada's Food Guide and providing an update on Health Canada's Plans on Marketing to Children (M2K).

Canada Food Guide Revision: Ann stressed the importance of shared roles and open communication with stakeholders in the revision. The <u>summary of evidence</u> gathered to launch the review of the Canada Food Guide is available and shows that dietary guidance can make an important contribution to nutritional health, but must be used and implemented by Canadians in order to do so. Canadians have changed food how they access information on healthy eating and the guide will reflect this in format and communications. The revised food guide will be released in a two-phased manner, with a guidance policy report and key messages in 2017-2018 and amounts and types of foods recommendations and general resources in 2018-2019.

#### Discussion on Food Guide revisions:

- The question was asked about timing of release of guidelines in the revised Canada Food Guide that will most impact schools, given that the guide is the basis of school food guidelines.
  - Ann responded that policies are not yet developed and those working on the revision want to ensure both critics and supporters are heard. There are regular discussions with the Federal Provincial Territorial Group on Nutrition and other organizations that inform school nutrition policy.
- i. It was asked that drafts or directions that may help inform potential revisions to school nutrition policies be shared when possible.

Marketing to Children: Elaine presented on the work underway to address current food marketing tactics directed to children and youth and the negative impacts of these tactics. There are a number of collaborations and formal commitments to promote healthy weights: FPT Ministers of Health; Standing Senate Committee on Social Affairs, Science and Technology; the World Health Organization; the Pan American Health Organization; and the Stop Marketing to Kids Campaign. Among policy considerations are the age at which children are exposed to unhealthy foods marketing; the scope of marketing, including schools; and how unhealthy food and healthy foods are defined or described.

One thing they have found important is to have consistent messaging around healthy and unhealthy food. They recognize the problems of inconsistent policies. To support this and continue connections with stakeholders such as JCSH, there are a number of events planned:

- Public webinar Feb 28: open to industry, healthy professionals, and public.
- Continuing policy consultations through to spring 2017. Looking to JCSH to participate in this
  consultation and will be in touch around this.



Action: Elaine will share info re webinar and consultations with Susan and Pat for sharing with SHCs.

#### Discussion:

- Elaine was asked if there is a way to involve students in the consultations. She responded that the
  group has very tight timelines. Nevertheless, they have been wondering about youth engagement and
  would be very open to suggestions.
  - It was suggested that youth engagement may be the way for JCSH to engage with this process. It was also suggested that time should not be an excuse for not engaging with students, that they must be involved. The JCSH members have mechanisms to do this quickly through youth advisory committees.
  - Jennifer Shortall advised that PHAC can play a coordinating role in supporting this connection.
  - There was support for continued conversation between JCSH and this group on engaging child and youth in food marketing to kids. There could be a set of key questions developed for school health coordinators to circulate within their jurisdictions and send back the responses.
  - Ann Ellis noted there is also a youth component to the Canada Food Guide consultations that would benefit from these links with JCSH.
  - To a question on whether school health coordinators should go through FPTGN reps to
    participate in consultations around these areas, Pat suggested that since JCSH has youth
    engagement expertise, it would be helpful to have optimal communications between FPTGN
    and JCSH. In addition, ONPP presents to the Council of Chief Medical Officers of Health.

**Action:** Pat will send FPTGN membership list to Susan for sharing.

# 17. Emerging Trends and Opportunities

Jennifer Shortall noted that Katherine is in London, ON this week giving a presentation on the new Positive Mental Health Toolkit to the <u>Canadian Conference of Promoting Healthy Relationships for Youth</u>. Shanna Sunley is presenting a poster during this conference on HBSC and healthy relationships. The poster was completed with the Queen's University HBSC team and was also presented to a science forum recently in Ottawa.

In addition, PHAC has developed a new teen guide on vaccines; they would like it distributed to networks for dissemination within jurisdictions.

Michelle advised the <u>SK 2016 Student First anti-bullying forum</u> was launched Feb 6. There has been strong interest from teachers in having access to keynote speakers and resources, for use both in classrooms and in communities. Information on the forum is available on the I Am Stronger website.



She also asked for any resources or updates on information about fentanyl, especially for the school-aged population. In addition, the province is working on child abuse legislation, specifically <u>Erin's Law</u> and would appreciate any work done in this area by other PTs.

**Action:** Michelle will send information to Susan for dissemination; responses will be posted on the private side of the website.

#### 18. Review of Action Items

To review and update the Action Items table

Sterling said the co-chairs had one expression of interest but could not commit at this time; they will send out another request. As per Terms of Reference and Agreement the SHCC is required to have a co-chair. He thanked Jennifer to remaining on until a new co-chair is in place.

Susan said the Positive Mental Health Toolkit is almost ready to be sent out to school health coordinators for review.

lan advised an email introduction has been made between Health Promotion Canada and Katherine.

Pat noted that the Shaping the Future conference in January included a meeting of DASH BC, Ophea, McConnell Foundation, and EverActive schools; this meeting discussed a national forum on comprehensive school health in 2018.

#### 19. Next Meetings

- March 14 2017 teleconference
- April 11 2017 teleconference
- May 9 2017 teleconference
- June 6-8 2017 joint Management Committee / School Health Coordinators' Committee meeting

All teleconference meetings begin at 1:00 Eastern Time.

20. Adjournment
Record of Discussion
School Health Coordinators' Committee Meeting
March 14 2017

Co-Chairs: Sterling Carruthers (PE), Jennifer Munro-Galloway (ON)

**Participants:** 

Representative Jurisdiction



Christie Docking	BC
Pat Martz	AB
Jillian Code	SK
Jocelyn MacLeod	
Jennifer Wood	MB
Jennifer Munro-Galloway	ON
Kari Barkhouse	NS
Ellen Coady	NL
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Steve Machat	NS
Sterling Carruthers	PE
Carol Ann Cotter	NL
Shara Bernstein	NU
Charlotte Borg	
Ian Parker	YT
Stacey Burnard	

### **Record of Discussion**

# 21. Welcome and Roll Call

Jennifer welcomed everyone to the call.

# 22. Review and Approval of Agenda

The Agenda was approved as written.

# 23. Approval of Record of Discussion from February 14 2017 teleconference

The Record of Discussion for the February 14 2017 teleconference was approved as written.

#### 24. Update from Secretariat

In addition to the written update, the following items were shared:

a. Joint Management Committee – School Health Coordinators' Committee meeting in Yellowknife: The next meeting of the planning committee will be held March 15 and a draft agenda will be sent to all members this week.



**b. Annual Report:** The 2017 Annual Report call for submissions was made during the teleconference; the deadline for sending drafts of jurisdictional submissions (prior to approval completion) is April 11. The timelines and guidelines documents will be sent to school health coordinators after the teleconference. School health coordinators were asked to comment on the length of the annual report: with the move to digital publishing the submission length restrictions were relaxed and the resulting report, before appendices, went from 41 pages in previous years to 54 pages last year. Susan asked if they would prefer to have a shorter report or maintain a less restricted length and add more aspects of their work.

#### Discussion:

- The more flexible length was made possible in 2016 by the decision following completion of the 2015 annual report to have no further formal print runs.
- It was suggested that the more relaxed length is easier for jurisdictions to select initiatives for inclusion, as they are guided by showcasing the work and not by word count.
- Deadlines for publishing have also become extended in the past couple of years and it is recommended that these return to, or close to, the longstanding July 31 deadline for completion. The July 31 publication date allows for the report to be tabled at and accepted by Deputy Ministers of Health during a meeting usually held in September, and then tabled at the Health Ministers meeting often held in October. The Education Ministers' July meeting is too early for report tabling, but the annual report is often on the agenda of a fall teleconference of Deputy Ministers of Education.

# 25. Core Indicators Model of Comprehensive School Health and Student Achievement; Health Behaviour in School-aged Children

- Next Steps Discussion with John Freeman
- a). HBSC: John thanked everyone for the comments on the two optional packages, and indicated that it was very encouraging to have 100% of jurisdictions responding. The questions on romance were not wanted and have been removed. The feedback on the suicide questions was mixed, with responses ranging from full negative to soft negative to positive. He met with PHAC March 2: those working in the area of tracking suicide trends at PHAC were hopeful of finding a way of getting these questions asked through the HBSC survey. John said he will not go back to the jurisdictions with firm no responses. He has decided the best way to manage the issue is to have a call with those jurisdictions with positive or soft no responses and see what they would like to do with these questions.

The other questions will be discussed with researchers in the next couple of weeks. They will take the information received from JCSH, PHAC, and researchers and decide on the core questions. The core questions and optional packages will then be sent to PHAC, researchers, JCSH, and youth participants by early April for ranking: one response per PT, youth participant, and researcher. Once the questionnaire selection decisions have been completed, the questionnaires will be distributed throughout the country, randomized by school.

**B). CIM**: John, Alicia Hussain, and Susan worked on developing an academic paper for publication in 2015. John has a research assistant who is pulling together the various pieces for both the academic paper and a conference paper. This work will put the CIM out to research audiences.

Among possible dissemination pieces for JCSH to assist practitioners in awareness and use of the CIM are the following suggestions:

- Additions of questions to help gather data on the CSH-Achievement connection
- A standardized workshop with core pieces involved to increase knowledge base



- The Students Commission and the Social Program Evaluation Group at Queen's did a piece of work commissioned by the YMCA of Greater Toronto, United Way Toronto, and the Ontario Ministry of Children and Youth Services called <u>Youth Who Thrive</u>. The advisory committee then commissioned Stoney McCart (Students Commission) to reach out to different audiences.
- In the same spirit of the work done to develop the Youth Who Thrive initiative, it is important to find ways of making the CIM relevant to practitioners. At this time, it is more of a policy piece. It might be helpful to get suggestions from the Youth Who Thrive developers.
- John also suggested that he can get in touch with knowledge mobilization expert Amanda Cooper who works at Queen's to help develop a KM strategy.

**Action:** Katherine will get touch with Stoney McCart on her work on Youth Who Thrive to gather dissemination and knowledge mobilization suggestions for the CIM work.

**Action:** John will get in touch with Amanda Cooper and bring KM strategy suggestions to SHCC for further discussion. He will also discuss further with Stoney McCart.

# 26. Emerging Trends and Opportunities

**PE:** On behalf of a curriculum specialist in PE, Susan asked if there was work going on in other PTs on teaching a CSH approach to students, or if students have been engaged in a CSH approach in terms of school wellness?

#### Discussion:

- In SK, CSH is listed in the curriculum, in terms of teaching wellness education using a CSH approach, but not for students as an outcome.
- In ON, the province's version of CSH is part of the outcomes; there are no learning
  expectations for students but it is used with an equity lens at a more global level.
- In AB, Jeff is working on curriculum; Pat will consult with him.

**ON:** Jennifer will compile the responses received on her request re student injury prevention and share with Susan for posting on the website.

**Concussions:** Jocelyn advised she has been in touch with Katherine regarding a Common Briefing Note on FPT discussions and progress re concussions.

- Katherine advised she has been communicating with the CMEC Secretariat regarding the request from federal Sport and Health Ministers leading the concussions work to have time on the agenda of the July Education Ministers' meeting in Charlottetown to discuss this issue and seek the ministers' endorsement of the work.
- The content of the briefing note will include the proposed agenda item on the CMEC meeting, expected outcomes of the meeting, and a background of the FPT Working Group on Concussions and Sport.

### 27. Review of Action Items

To review and update the Action Items table

The Action Items Table was reviewed.

#### 28. Next Meetings

- April 11 2017 teleconference
- May 9 2017 teleconference



- June 6-8 2017 joint meeting of Management Committee and School Health Coordinators' Committee, Yellowknife, NT
- July 11 2017 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

# 29. Adjournment

# Record of Discussion School Health Coordinators' Committee Meeting

May 9 2017 1:00 pm EDT

Co-Chairs: Sterling Carruthers (PE), Jennifer Munro-Galloway (ON)

# Participants:

Representative	Jurisdiction
Jeff Bath	AB
Jillian Code	SK
Jocelyn MacLeod	
Michelle Mougeot	
Flo Woods	
Paul Paquin	MB
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Carol Ann Cotter	NL
Ellen Coady	
Shara Bernstein	NU
Elaine Stewart	NT
Ian Parker	YT
Jennifer Shortall	PHAC
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Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Regrets	
Christie Docking	BC
Scott Beddall	
Pat Martz	AB
Jennifer Wood	MB



Kari Barkhouse	NS
Steve Machat	
Charlotte Borg	NU
Stacey Burnard	YT

#### **Record of Discussion**

#### 30. Welcome and Roll Call

Sterling welcomed all to the call. The group congratulated Paul Paquin, who is retiring June 30, and wished him well.

# 31. Review and Approval of Agenda

The Agenda was approved with the following additions: (1) an update following the presentation by Ann Ellis and Elaine Jones McLean of Health Canada to the SHCC February 14 2017 teleconference, entitled *Update on Healthy Eating Strategy: Canada's Food Guide and Marketing to Children;* and (2) an update on the CIM on CSH and Student Achievement.

#### 32. Approval of Record of Discussion from March 14 2017 teleconference

The Record of Discussion for the March 14 2017 SHCC teleconference was approved as written.

#### 33. Update from Secretariat

In addition to the written update, the following items were presented:

- 1. PHE Conference and meetings with NL groups May 4-6: Katherine thanked Carol Ann for her support and efforts to set up meetings with Department of Children, Seniors and Social Development representatives; members of the Youth Health Risk Assessment Committee; and Dr. David Philpott, Memorial University. Carol Ann advised the teachers attending the conference are very interested in JCSH resources and committed to using them.
- 2. Environmental Scans: See Item 6b.
- 3. Annual Report: Susan advised there are still nine jurisdictions to hear from regarding jurisdictional submissions. The length of submissions is more fluid than when the Annual Report was being printed and the publication has been later in the year in the past couple of years than was the case with the July 31 publication date in the first years. It would be helpful to aim for publication in time for the fall 2017 meeting of the Conference of Deputy Ministers of Health, often held in September. Given that translation and graphic services will take 6-8 weeks, and that the Management Committee needs two weeks or so of review of the draft version, the submissions should be sent in as soon as possible, ideally within the next month.



4. CIM update: Susan advised the next steps work on the CIM are underway. Katherine and John and Susan met in late April in Halifax to discuss dissemination pieces such as a slide deck, webinar, and journal article. In addition, some discussion is underway on the potential of a Research Group being developed of researchers throughout the country actively working in the area of comprehensive school health. This group would also support an area of the JCSH Strategic Plan not undertaken to date: Develop a comprehensive research and knowledge exchange strategy. The Secretariat will present further on this work during the face-to-face meeting in June.

# 34. Guest Presentation: The 'Essential Conditions' of Implementing Comprehensive School Health: Do these conditions hold true across Canada?" - Kate Storey, Genevieve Montemurro, Kacey Neely (U Alberta)

- Presentation and Discussion of research results
- Article link: <a href="https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-016-3787-1">https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-016-3787-1</a>

Kate provided an overview of the group's research on the essential conditions for implementation of comprehensive school health in Alberta schools tested. The research team is looking for the process elements that have been found to lead to successful implementation of CSH and found three essential types of conditions: (1) Core, (2) Contextual, (3) Process – how both core and contextual conditions operationalized.

As noted on the infographic included for this meeting's documents, seven core conditions were found in the study:

- (1) Students are change agents: They are the heart of the school community and their enthusiasm creates increased engagement, for them and their families.
- (2) School-specific autonomy: Interventions need to be flexible, based on strengths and assets and tailored to school-specific evidence.
- (3) Demonstrated administrative leadership: A number successful projects were guided and moved forward because of school leadership committed to the initiative.
- (4) Dedicated champion to engage school staff: In addition to leadership, a supportive champion in school, or parent acts as facilitator.
- (5) Community support internal and external relationships: Internal relationships need to be strong before engaging external supportive champions.
- (6) Evidence: Evidence specific to the school's context was required.
- (7) PD: Professional development for school staff helps understand the complexities of CSH.

Contextual conditions: (1) Time. (2) Funding. Helpful for facilitation but not essential. (3) Readiness.



#### **Discussion:**

- Regarding results for volunteer vs. paid position of CSH facilitator: Kate responded that there was
  a variety of what the CSH champion looked like in the schools studied. Some schools had a paid
  position plus support of the principal; others had seconded teachers with previous dedicated
  connection to CSH; still others had a non-paid paid position. Most data was collected in schools
  with a champions from nonpaid to .5FTE.
- Did the study findings show competition or disconnect between goals of CSH implementation and academic results? Kate responded that part of that debate is over understanding of and readiness for implementing a CSH approach. Some espoused the evidence that healthy kids learn better; the school communities that did not were less engaged. The administrators that were connected to CSH did so because of the link with learning outcomes. All partners used evidence to back up decisions.
- Evidence helps in promotion of a CSH approach, but there is less clarity on the how of building the approach in a school. Kate said all the schools studied were <u>Apple Schools</u> or part of the <u>Healthy Schools</u>, <u>Healthy Future</u> initiative funded by Alberta Health. The how was demonstrated through school autonomy: The initiative had to be school-specific, flexible, and focused on strengths and not deficits. One of the values was when the school realized they reached the home by reaching the kids.
- Smaller jurisdictions struggle with finding dedicated resources for CSH initiatives but have learned that, in the absence of a paid resource, dedicated champions are found in similar ways as for volunteer school clubs. Kate: The researchers also found this, but realize this study shows results only for the contexts in AB.

**Next Steps:** Kate said the research wants to move forward by interviewing stakeholders across Canada: what works, what's missing, what needs to be changed/refined. She suggested it would be helpful to reach out through JCSH members for interviews of them and others in the jurisdictions. Ethics approval has been granted. The team wants to make the work relevant beyond publication and enhance usability in school communities.

#### Discussion:

- Both individual interviews and focus groups are helpful in qualitative research; they have different purposes.
- There may be benefit in bringing this team back for further discussion, possibly for the fall 2017 SHCC face-to-face meeting.
- In addition to interviews, research from other institutions that may or may not be published and show similar/different results would also be welcome by the research team.



**Action:** SHCC will discuss further for possible roles; the Secretariat will follow up with Kate Storey and her team.

**Action:** School health coordinators are welcome to contact Kate with specific questions; Secretariat will circulate Kate's contact info.

# 35. Emerging Trends and Opportunities

- (a) **Follow-up to HC marketing to kids presentation:** Jennifer Munro-Galloway advised that a former colleague in ON is working with the Office of Nutrition Policy and Promotion of Health Canada and asked if JCSH would be interested in supporting the work of ONPP on marketing to kids, possibly through its involvement in student engagement. Jennifer advised that ONPP may do a scan of policies on marketing to kids in schools: this might be an area where JCSH can assist. Some of the areas to be covered in the scan include impact of the policies on signage, and other details; and what are some potential issues. ONPP would like to be in touch with the School Health Coordinators' Committee in the future on this matter.
- (B) **School responses to student declaration of transgender status**: Susan described the CBC article on the steps by a PEI family in maintaining education and school supports after their 11-year-old publicly self-identified as male. Is there interest in looking at school policies, guidelines, supports for transgender students and other gender or sexual diversity issues?

#### Discussion:

- Sterling: On PEI, this issue has been raised around school sport. The provinces does not have policies in place.
- Paul: MB has a policy that student may select sex-separated sport according to their gender identity. Development of the province's document was based on the NS document on gender nonconforming students; it is at the deputy minister level for review. The Department of Education is supporting some requests: the preferred name can be used on report cards with parent and student request.
- The equity scan has some of this information, but a review and the addition of not only policies but also teacher association documents and the information of diversity and respect leaders would be helpful.

**Action:** Secretariat will find gender and sexual diversity pieces in the equity scan and build a separate scan for this content, then share with school health coordinators for comment and additions.



#### 36. Review of Action Items

• To review and update the Action Items table

The Action Items Table was reviewed.

### 37. Next Meetings

- June 6-8 2017 combined face-to-face meeting of School Health Coordinators' Committee and Management Committee.
- July 11 2017 teleconference
- August 8 2017 teleconference
- September 12 2017 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

# 38. Adjournment

# **Record of Decision**

# **Pan-Canadian Joint Consortium for School Health**

# Management Committee / School Health Coordinators' Committee

**Combined Face-to-Face Meeting** 

Yellowknife, NT June 6-8, 2017

Chair MC: Imelda Arsenault (PE)

Co-Chairs SHCC: Sterling Carruthers (PE), Jennifer Munro-Galloway (ON)

# Participants:

Name	Jurisdiction
Christie Docking (SHCC)	ВС
Pat Martz (SHCC)	AB



Michelle Mougeot (SHCC)	SK
Jennifer Wood (SHCC)	MB
Jennifer Munro-Galloway (SHCC)	ON
Fran Harris for Chris Treadwell (MC) Marlien McKay (SHCC)	NB
Imelda Arsenault (MC) Sterling Carruthers (SHCC)	PE
Ed Walsh (MC) Ellen Coady (SHCC)	NL
Charlotte Borg (MC) Shara Bernstein, Daman Dhillon (SHCC)	NU
Rita Mueller, Sabrina Broadhead (MC) Elaine Stewart (SHCC)	NT
Karen McKinnon (MC) Jennifer Shortall (SHCC)	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Senior Advisor
Regrets	
Lisa Dominato (MC)	BC
Jessica Ellison (MC)	AB
Tanya Schilling / Flo Woods (MC)	SK
Vicki Toews (MC)	MB
MC representative	ON
Kim Barro (MC) Steve Machat (SHCC)	NS
Cathy Stannard / Gloria Coxford (MC)	YT



Ian Parker / Stacey Burnard (SHCC)	
iali Parker / Stacey burnaru (SHCC)	

**Record of Decision** 

**Pre-Meeting Dinner** 

Monday, June 5 2017

The group met for dinner, welcome, and introductions on the evening of June 5.

# Day One

Tuesday, June 6 2017

Detah - TRC Learning

Travelling by bus to Chief Drygeese Centre in Detah, the group participated in a full day of Residential School Awareness In-service training

Recognizing that many jurisdictions are exploring these issues in different ways, this day was designed to show Management Committee and School Health Coordinators' Committee the basis of the training that is mandatory in the NWT for all Department of Education staff, and all teachers in the territory. It was planned and delivered as a comprehensive experience to engage participants at



more than an 'informational' level through the several components of the full-day experience. These included

- The legislative and bureaucratic frame within which residential school development and policy were created - bureaucrats such as ourselves were the implementers.
- A shared role play activity and group circle debrief that explores the larger frame of colonization and its effects through the Blanket Exercise
- Small group conversations with former residential school students who both share their own stories and answer people's questions
- Presentation by a young person who explores the Intergenerational, and often invisible, effects of how the legacy of residential schools continues to be passed down through generations
- Opportunity to explore what reconciliation might look like in our own lives and work (this was picked up on as a substantial part of Day 2 of the agenda).

# **Day Two**

# Wednesday, June 7 2017

The day at the <u>Prince of Wales Northern Heritage Centre</u> began with a welcome from Minister Glen Abernethy, Department of Health and Social Services.

This was followed by a series of presentations by staff of the Department of Health and Social Services and the Department of Education, Culture and Employment.



Where available, the PowerPoint presentations are available on the private side of the JCSH website.

The Department of Health and Social Services led the morning presentations:

- Dr. Kami Kandola, Deputy Chief Public Health Officer
- Sara Chorostkowski, Manager, Mental Health & Addictions Unit
- Alex Wah-Shee, HSS Mental Health & Addiction Specialist

# Presentations featured the following topic areas:

- Overview of Health and Health-Related Behaviours of Children and Youth in the Northwest Territories
- Aboriginal Health and Community Wellness
   (AHCW) Initiatives targeted to NWT Children and Youth
- Mental Wellness in NWT Children & Youth
- Healing journey of a recovering Youth

The Department of Education, Culture and Employment led the afternoon presentations:

- Sophie Call, Director of Health, Wellness and Student Support
- Elaine Stewart, Health and Wellness Coordinator
- Raymonde Laberge, Teaching and Learning Coordinator

# Presentations featured the following topic areas:

- Education Renewal Framework / Commitment to Wellness
- Foundational Statements and Key Competencies
- Development process of new NWT Health/Wellness
- Curriculum and results of field testing



# **Day Three**

# Thursday, June 8 2017

# JCSH Meeting and School Visit/Experiential Learning

**Welcome:** Imelda welcomed all to the meeting and reflected on the power of the experiential learning experiences throughout this special combined meeting in Yellowknife.

**Agenda:** The agenda was compressed to focus on jurisdictional roundtables; previous feedback on face-to-face meetings has suggested these are an important focus for Management Committee and School Health Coordinators' Committee representatives and optimal time should be devoted.

# **Cross-Sector Engagement Successes and Challenges / Emerging Trends**

Roundtable of Jurisdictional Updates:

(In order of presentation):

NT: Following four years of planning, the territory has released a 10-year early childhood framework, combining the work of the Department of Health and Social Services (HSS) and the Department of Education, Culture and Employment (ECE). Junior kindergarten becomes part of the school system for the first time, effective July 1; the curriculum is entirely play-based for the four-year-olds in the program. The territory has 33 communities, many of them fly-in, and many with ice-road-only access in winter. Communities will make the decision on whether to have half- or full-day kindergarten programs, based on services capabilities. Junior kindergarten is fully funded, providing free access for all families. The territory will allow practitioners with a minimum two-year early childhood diploma to teach in the junior kindergarten program.

#### Discussion:



To a question on whether NT has trouble finding qualified educators, Rita responded that NT funds education authorities to the cost of BEd-trained teachers, understanding that higher education correlates with higher quality teaching. The larger centres have pressed for university-trained teachers in kindergarten with diploma-trained teachers acting as assistants. (Possibly did not capture this accurately).

The tabling of the Early Childhood Action Plan will frame much of the work of the education and health departments as well as the ministries' work with the NT communities. The Plan has been well received to date.

The territory is spending much effort on the early years as a way of strengthening its investment in Grades 1-12 outcomes. The strength of the two departments collaborating on this work is found in serving small remote communities and finding creative ways of serving these communities.

Much of Northwest Territory's health curriculum is from Alberta; that province is in the process of an education redesign and, for the first time, is including NT in the process. This collaboration is helping NT determine its JK-12 curriculum moving forward. It is developing a more holistic approach for health and wellness for students in JK-12. This work may allow the territory to be able to transfer the approach to other jurisdictions as they work towards their own more holistic education plans.

Other jurisdictions might benefit from NT's health and education's partnering work on its health curriculum renewal: A large portion of the funding for the renewal has come from HSS. Funding from the health department has also contributed to on-the-land programming, an important connection for Indigenous populations. Communities have experienced difficulties getting funding allocations to support on-the-land initiatives for education, healing; part of the funding has come from HSS. Many other funders have also gotten involved, including philanthropists, industry, Health Canada. The department has worked with the federal government funders to reduce the application process and has given responsibility to the Indigenous governments in the north to ensure this money gets to where it needs to go.



The partnering work of the two ministries in NT is broader than the school system; it incorporates connections for all students with language and culture-based funding to indigenize education for all students, and to ensure all students have the ability to learn the language of their communities. The departments also have worked on thorough and practical evaluation to look deeper at why and what is working and how this work continues to be shaped. All this because we believe all students throughout school year need rich cultural experiences on the land with elders. It all has to do with health and wellness.

**NB:** In the past year, the province released the 10-year Education Plan: <u>Everyone At Their Best.</u>
Wellness curricula is under redevelopment and, as is the case in the province with new curriculum, and will be electronically available. All teachers will have a laptop. Technology has impacted physical education as well, with PE teachers having iPads to allow students to measure their own performance and make corrections. The high school outdoor-ed curriculum has also been completed; it is an elective, but has proven popular and offered in a number of schools.

This year represents the last for in-service for principals on an LGBTQ resource that was developed in collaboration with Egale. The resource is available on the government website and includes testimonials from key individuals and links to related policies.

The province's Integrated Service Delivery Program (ISD) is continuing to receive much positive attention on a national and international scale: It has just received a national award in Toronto, (link to award?) and was the subject of a presentation in Paris.

Also investigating competency based curriculum. The Council of Ministers of Education, Canada (CMEC)'s work in this area is led by NB. (Missed details in this). Traditionally, the Francophone education sector wrote its own curriculum; the Anglophone sector wrote its curriculum and translated it for French immersion classes. Currently, the province is moving to a process of developing a competency-based curriculum for all students, with schools, the department of education, and the school boards coming together to co-create the curriculum. Drawing on the work



of Sharon Friesen (this may not be correctly stated), the province's curriculum specialists are assigned to work with one of the three design schools in competency-based curriculum. Moving forward, this work will be of interest to many.

The Department of Agriculture, Aquaculture and Fisheries' new food and beverage strategy includes aspects for schools, with recommendation that stakeholders form a co-op to leverage existing infrastructure in order to provide local foods. A government commitment to obesity and tobacco reduction strategy has involvement from numerous departments; there are 49 policy-driven actions supported by a sub-committee of ministers, the chief medical health officer, and Marlien to establish initiatives.

**NU:** The district education authorities, schools, and communities work closely with Department of Health program leads to run a number of after-school and weekend programs for children and youth. NU has adopted the community wellness plans developed in NWT, which are included in the renewal of the 10-year Nunavut Wellness Agreement which allows communities to receive multi-year funding for two-five year plans with full control over the projects. The community wellness plans opened up an opportunity for various stakeholders, including schools, to work collaboratively on the development of these plans and have conversation about space for programming in schools during non-instructional time. However, schools could still access funds to supplement their instructional time for IQ activities like gamutik making for boys and kamik making for girls.

The Inuutsiarniq guided literacy program is developed in partnership with the Department of Education to improve literacy rates in Nunavut. Through this partnership, over 300 Nunavut and Inuit-specific books have been developed for K to grade 2 students in Inuktitut, English, French, and Inuinnaqtun. This resulting partnership, the Inuutsiarniq Literacy Program, embeds healthy messaging across four strands (Nutrition and Life Skills, Tobacco and Addictions, Physical Activity and



Injury Prevention, and About Me, which incorporates age-appropriate mental and sexual health promotion).

For the Department of Education, one ongoing priority is the implementation of the recommendations of the inclusive education review. Among the recommendations is to increase services, supports and training. One key area is addressing the substantial rates of hearing loss in students and implications: Nunavut has one of the highest rates of hearing loss in the world, and 25 percent of students are hearing impaired. Sound Fields for Learning is a project partnered with Better Hearing in Education for Northern Youth. Teams went to 10 schools to deliver training and install amplification systems. Education is working to expand to all NU schools.

The territory has been working to improve resiliency in students. Last year, the Canadian Association of Suicide Prevention conference was held in Iqaluit. All school community counsellors attended. A sub-conference for youth was part of the full event. Through ongoing partnership with the Canadian Red Cross, all Grade 4 teachers and school community counselors participated in Be Safe training: this focuses on personal safety and healthy relationships with the intent of preventing child abuse. All the kits from the Red Cross have been translated and adapted for NU context. Other training initiatives include Respect Ed and social-emotional learning programs specific to NU: Social Decision Making, Social Problem Solving for K-9 (in approval process now). The adapted self-regulation program for the North, Northern Zones, is complete for K-8. Other SEL programs are under review to see how they could fill some gaps.

**ON:** A new division has been created in the recent reorganization of the Ministry of Education: Indigenous Education and Student Well-being. In this province of 72 school boards and 2 million students, the remote communities are sometimes the areas where program delivery challenges are more prevalent. For example, Ontario's Fresh from the Farm was born from the JCSH School Health Coordinator's Committee meeting when MB shared this initiative. After five years, ON is preparing



for a full provincial rollout. Because of the positive partnership with MB, that province is providing the Peak of the Market program to 10 ON northwestern school boards. What this meeting in Yellowknife has shown is that, translated to ON context, adaptation is possible but targeted efforts are needed to promote healthy eating culture in the remote and most northern schools.

Daily Physical activity (DPA) requirements during the school day have proven difficult to implement due competing priorities. Separate from the DPA requirement, the province is conducting gap analysis to develop performance measures on how to approach the 60 minutes of physical activity recommended for children and youth. DPA has been a mandatory requirement since 2005 for all students Grades 1-8 - 20 minutes of sustained moderate to vigorous physical activity during instructional time; this often gets dropped to achieve other curricular needs. The ministry is consulting with experts such as Mark Tremblay, CHEO; Ian Janssen, Queens; Scott Leatherdale, Waterloo; and Bruce Kidd, U of T.

#### Discussion:

- · Katherine advised that the ministers responsible for Sport, Physical Activity and Recreation (SPAR) are planning a research project on DPA around the country. A contract has just been awarded to do the framework.
- · It was suggested that JCSH host a teleconference on cannabis legalization for School Health Coordinators and colleagues.

Action: Secretariat will send out a Doodle for a dedicated teleconference on cannabis legalization.

**SK:** The Ministry of Education has been working on authentic engagement with First Nations and Métis people through an internal protocol for renewing Caring and Respectful Schools. Consultation with elders in the five main language group to ask what do First Nations and Métis students need have been valuable in improving the document. The elders will be called in to support work in many projects moving forward. One of the province's many responses to the Truth and Reconciliation



Commission's Calls to Action is to develop new online resources to support education in learning and teaching about the residential schools. These are available on the curriculum website. As well, <a href="Supporting Reconciliation">Supporting Reconciliation in Saskatchewan Schools</a> is a new website to support this work. It will be translated into French and has opportunities for partners to propose new content.

A number of new resources have been developed in the province. The new CSCH newsletter is published three times a year, and includes stories of where CSCH happening in schools. In Feb 2017, resources from the Students First Anti-bullying Forum: Our School Includes Everyone were launched on the I Am Stronger website: 2000 students participated in this forum. The ministries of health and education are working with the school divisions to deliver mental health training. A healthy snacks document was created by health and ..... – this is another new aspect of the strategic planning approach to bring CSCH more alive in SK schools. The province continues to seek assistance in this area of CSCH implementation.

**MB:** The province is reviewing its disbursement of Healthy Schools grants to improve equity of funding, with First Nations and Indigenous schools being underfunded. The document on support for transgender students is under review; it will be shared with JCSH members when the Department of Education completes the approval process. Some First Nations schools have been able to bulk purchase vegetables to provide a fresh food program in their communities. The Department of Education has begun a professional development book club pilot on the executive summary of the Truth and Reconciliation Commission report; it is working with non-government organizations to develop discussion questions. The club meets to read and discuss impacts of colonization on our work; it is hoped this will roll out in the department and become a core competency for people in policy positions. The minister of education has tasked an assistant to focus on obesity prevention; nutrition and food security issues will form aspects of this piece.



The MB First Nations Education Resource Centre provides the land-based curriculum. The centre holds a number of events annually, including a three-day research forum, a guide to Indigenous research and proper protocols, books on medicines, and anthologies of student writing.

Health promotion funding is shared between the health and education ministries to schools that do not receive other funding and to First Nations schools. Criteria for funding include initiatives on healthy sexuality, substance abuse and addiction, safety and injury prevention, mental health promotion, and nutrition. Schools and school divisions report at year end.

Action: Jennifer will send Susan the link to the land-based curriculum website.

**NL:** The provincial government has made public commitments to move forward in number of areas. Out of this is the move to full-day kindergarten, with the first graduates this year. There is also interest in junior kindergarten and the kind of work in this area by NWT. Egale Canada has collaborated with the province on supports for LGBTQ\* students. Earlier work was on the establishment of Gay Straight Alliances (GSAs), followed by the development of training for every NL teacher by the end of the school year 2018. There are 10 stand-alone lesson plans which allow teachers to embed them into the K-12 curriculum areas and discuss and support improvements in student safety and inclusion.

Another government commitment is to citizen consultation, shown in the release last November of The Way Forward: A Vision for Sustainability and Growth in Newfoundland and Labrador. In this, each department had to state how it would advance economic social policy in the province. The Department of Education and Early Childhood Development (DEECD) is committed to policies to support disengaged and disfranchised youth, including through the GED program and credit rescue and recovery. The Department of Children, Seniors and Social Development (CSSD) is committed to using the Healthy School Planner and planning to double the number of schools using the Planner in the next year.



The province has an all-party committee on mental health, with members from all three parties involved. A <u>new report</u> on mental health services in the province contains 54 recommendations. The departments of Health and Community Services, Education, Justice, and CSSD are collaborating on recommendations that have cross-overs to the education system. The Premier's task force on improving academic outcomes has a mandate to review a number of key areas: literacy, math, but also instructed to consult with public, teachers, students, advocacy, on inclusion, mental health, early learning. This report is expected by end June and should guide departmental initiatives for the next 5-10 years.

The SEAK Socially and Emotionally Aware Kids) Project is completing the second year of a 3-year Innovation Strategy funding through PHAC. DEECD is working with other ministries to scale up so the approach is embedded in work with children and youth. The province is also committed to supporting teachers so the initiative becomes sustainable. In the Health, Home Economics, Family Studies and Physical Education division, the mental health K-12 plan attempts to use a comprehensive school health approach. Health curriculum development in Grades 4 and 5 are in process and involve collaboration with provincial health experts. In Health 4, curriculum specialists partnered with Body Diversity NL group - how to factor in gender fluid concepts in puberty. The renewed clothing textile curriculum will come out this fall and features a new unit on cultural aspects that include relationships and family involvement as children take these pieces home for discussion of their cultures and traditions.

**BC:** The K-8 curricula changes support flex learning environments, with an aim of empowering healthy living lifestyle in students: mental, physical, emotional competencies. Bringing about the physical education competencies is challenged as curriculum in this area become broader with more curriculum supports, including inclusive components. The Ministry of Education is doing lot of work to incorporate inclusive elements in areas such as the SOGI (Sexual Orientation Gender Identity) 123 website. Action Schools BC has been updated to align more strongly with CSH with the addition of



mentorship and regional coordination components. The school fruit and vegetable program has run into some challenges as it was not successful enough in the most populated area of the province to support the program in the rest of BC. The Farm to School program, however, has received recent three-year funding to support sustainability. The province is working with teachers to implement a mindfulness program for all children and youth in the public school system.

**AB**: In June 2016, the Minister of Education announced the development of future K-12 provincial curriculum in six subject areas, including Wellness Education and Indigenous curriculum.

In-person sessions and online survey, which closed Friday, June 2, provided Albertans an opportunity to review and provide insights on the draft subject introductions and scope and sequences. The online survey and in-person sessions included questions for the future K-12 wellness-related curriculum that focus on comprehensive school health as part of the K-12 Health and Physical Education Introduction.

Education Supports-School Community Children and Youth, inclusive of mental health, appreciates the revisions to the JCSH Positive Mental Health Tool Kit given they both use and recommend the use of this tool kit. Education's School Nutrition Meal Program will see a province-wide rollout in 2017-2018 providing access to a full-meal/once a day, to schools with low SES status. The following are updates on health/wellness initiatives: Northlands School Division recently advertised for 10 new wellness champion positions; a province-wide review of public health nurses roles in schools has just been completed which also included the roles of the health promotion coordinators' (HPCs) positions. HPCs, are instrumental in promoting CSH; Alberta's Valuing Mental Health strategy has a DM's committee in place that consists of more than 200 community members, assuring the strategy is inclusive to all Albertans living with mental health issues. Education has representation on this committee; and the ministry Community and Social Services/Children's Services is collaborating on the national child poverty reduction strategy.



**PE:** The Department of Education, Early Learning and Culture continues to advance the School Goals Framework throughout the province. All schools have set three-year goals regarding High Quality Education, Public Confidence, and Well-being. The School Goals Framework is providing another opportunity to promote the use of various sources of student health behaviour data (e.g., SHAPES) and to promote the use of JCSH resources such as the Healthy School Planner and the Positive Mental Health Toolkit. The Department continues to move forward with support for social-emotional learning (SEL) including a recognition of current curricular outcomes and a new pilot to support the scale-up of PATHS (Promoting Alternative Thinking Strategies) within the Atlantic Provinces.

The Department of Health and Wellness is working on a new wellness strategy, as the current five-year strategy has expired. Schools continue to be a key setting for this work, which provides an opportunity for health promotion in addition to important clinical supports for mental health and addictions. A multi-department/agency collaborative will see a new Student Support Program roll-out over the next three years. This program will hire new mental health clinicians, public health nurses, and addiction supports within each family of schools to provide direct supports to students, and to support an enhancement of existing MAST (Multi-Agency Service Teams).

A 2007 Tripartite Partnership Agreement between Indigenous and Northern Affairs Canada, the Mi'kmaq Confederacy of PEI, and the Provincial Government supports collaboration within the areas of Education, Health, Child & Family Services, Justice, and Economic Development. Policy and Planning Forums (PPF) have been established to identify needs and develop collaborative workplans to address them. In April - an 'all forums' meeting was held to explore how each PPF is helping to address the TRC calls to action.

**PHAC:** The Indigenous early learning and childcare initiative is led by Indigenous and Northern Affairs Canada, Health Canada, the Status of Women Canada, and the Public Health Agency of Canada. In July 2018, Canada presents next report on United Nations Convention on the Rights of the Child. The federal government will communicate to the provinces and territories through Canadian Heritage.



Indigenous and early learning initiatives will be part of the Early Learning and Child Care work under Minister Jean-Yves Duclos, federal minister of Families, Children and Social Development. and early learning and child care part of ELCC work. It also takes in First Nations, Inuit, and Métis childcare initiative. National Indigenous organizations have been involved. Individuals and groups wishing to provide feedback are asked to go to the ELCC website. This has been a collaborative process. The Aboriginal Headstart programs will take part in roundtable collaborations to co-develop early learning Indigenous programs. The links are available on the website.

The Health Behaviour in School-aged Children is piloting this year's survey. PHAC will continue to provide feedback to cannabis legalization discussions from JCSH and other tables.

#### Afternoon

The afternoon and final portion of the three-day meeting featured a trip to the K'alemi Dene School, N'dilo to tour the school and take lunch with students.

This was followed by a cultural afternoon consisting of a woods walk to the BDene site for a series of cultural activities organized by Bobby Drygeese/BDene. The activities are designed to introduce visitors "to the Dene people and the significance of their land and traditions; share culture, art and foods. Listen to the beat of traditional drums and join the excitement of traditional Dene Hand Games" (from BDene website). Optional activities were opportunities to scrape moose hide and see where hides are smoked, taste fried bannock and see skins curing, and venture into the bush to seek out plants on a 'medicine walk'.



# Record of Discussion School Health Coordinators' Committee Meeting July 11 2017

# Co-Chairs: Sterling Carruthers (PE), Jennifer Munro-Galloway (ON)

## Participants:

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Jillian Code	SK
Michelle Mougeot	
Jennifer Wood	MB
Marlien McKay	NB
Sterling Carruthers	PE
Kari Barkhouse	NS
Shara Bernstein	NU
Daman Dhillon	
Elaine Stewart	NT
lan Parker	YT
Jennifer Shortall, with Suzie Wong	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Regrets	
Scott Beddall	BC
Jocelyn MacLeod	SK
Jennifer Munro-Galloway	ON
Steve Machat	NS
Ellen Coady	NL
Carol Ann Cotter	
Liza Manolis	YT



#### **Record of Discussion**

### 39. Welcome and Roll Call

Since neither co-chair was available for the beginning of the meeting, Katherine assumed the role of chair until Sterling arrived. Katherine congratulated Pat in her new role as Health and Wellness Manager for AB. Warm wishes were extended to Michelle who is leaving to return to her former position.

## 40. Review and Approval of Agenda

The agenda was approved as written.

## 41. Approval of Record of Discussion from May 9 2017 teleconference

The Record of Discussion of the May 9 2017 teleconference was approved as written.

## 42. Update from Secretariat

In addition to the written update, Katherine provided the following:

- 1. CASSA conference: Both sessions were very well received. Out of the presentation on the new Positive Mental Health Toolkit, Katherine suggested that the Secretariat develop a one-pager of the toolkit to support dissemination. The French toolkit is in the last stages of translation and web content completion and should be on the JCSH website soon.
- 2. CMEC meeting in Charlottetown July 20: During the working lunch on July 20, the Honourable Carla Qualtrough, Minister of Sport and Persons with Disabilities will address ministers of education on current iniatives to prevent and respond to concussions as well as the need to engage with the education sector. Katherine will present to CMEC on the work of JCSH: the time for this presentation has been reduced to allow for the concussions discussion.

# 43. HBSC Update

## Guests Dr. Will Pickett & Matt King

• Dating violence questions

For the duration of the time that HBSC co-principal investigator, Dr. John Freeman, is impacted by serious illness, Dr. Will Pickett, co-PI, and research associate Matt King will manage the project and be the contacts for JCSH.

Matt has received JCSH feedback on dating questions and then had rounds of discussion with students aged 12-18 on these questions. From the feedback, the 6 distinct questions have been kept but without the long descriptions (version 28a). Students responded the questions are too long and the examples were not helpful. The language of some items has been updated, such as the questions item on electronic communications (Q. 68-70), to reflect youth speech. The active transportation has been returned to the questionnaire: PHAC considers it important. The ladder question on socioeconomic status was replaced with the 2010 wording (Q. 91): feedback in general supported the JCSH advisory committee that youth would be uncomfortable with the wording of the draft version.

- The final wording of the dating violence 6-item question will be shared with JCSH.
  - Process update:
    - An important piece moving forward is for each province and territory to decide if it
      wants a representative sample size, leading to a PT report, and oversample, or a
      smaller sample for the national report only.



- Matt and Will are looking for updated school directories with 2016-7 school year breakdown of enrolment. They have not received any update emails sent to John, so ask that any of these be re-shared with them.
- Katherine asked Matt and Will to pass along to John the message that everyone sends him their best wishes for recovery.

**Action**: Katherine will share the sample size and school directory requests with the HBSC RAC, along with preferred meeting date and Matt and Will's contact information.

## 44. Yellowknife face-to-face meeting

- Key takeaways
- Possible next steps

Sterling noted everyone who attended came away with personal and professional reflections. We want to discuss how to apply what we have learned for JCSH work, engagement with others.

Katherine advised this may inform some discussions during our next face-to-face meeting, as well as the Strategic and Operating Plans.

- Marlien suggested it would be helpful to have the reflections written by those attending the meeting
  during the exercise led by Elaine available for planning next steps. The exercise was entitled *Person*and Co-constructed Reflections on the NWT Foundational Statements; four areas for reflection:
  Relationships, Ecological Understanding, Identity, and Development of Self. Attendees reflected on PT
  work and JCSH opportunities. Some sharing was done in pairs during this session but it would be
  helpful to look at these documents.
- This experience reinforces the need to provide Indigenous perspectives, resources on colonization, and any resources for schools. Jennifer Wood said her daughter's teacher admits she is uncomfortable talking about colonization and would be helped by having resources to assist with these conversations in classrooms.
- Jennifer Wood also asked if the Truth and Reconciliation Commission's Calls to Action are being
  addressed in curricula across the country. Sterling advised that he is the representative for PEI K-12 on
  CMEC's Indigenous Education Committee. During the CMEC meeting in July in Charlottetown, the
  council members will be approving the Indigenous Committee work plan. <a href="C2A#63">C2A#63</a> is educationspecific, but there are other efforts and resources that address colonization more broadly. Jennifer has
  access to many of these resources and will share them.
- Katherine advised the Secretariat has spoken with Kevin Lamoureux and he is interested in providing suggestions on improving Indegenous perspectives in the new Positive Mental Health Toolkit; this may include a separate module from him.
  - To a question on whether JCSH should be indigenizing our resources or applying a holistic persective to health and well-being of Indigenous students, Susan replied this question was asked of Kevin, and he replied that there will be missteps, but the important steps are to move forward; we will learn and get support for our efforts as we proceed.
- Michelle added that SK prioritizes the importance of authentic consultation, recognizing differences among responses in First Nations, Mètis, and Inuit peoples. A model might work with some peoples but not with others.



- Next steps for work in this area may come from the next face-to-face meeting: should we bring in speakers and should they be among those we know or have new speakers, discussions among ourselves.
  - Depending on the location of the next meeting the Secretariat may know of elders in the location.
- Elaine suggested our discussions focus around the CSH model of whole child needs. It would be interesting to use our four components and talk about how our work impacts holistic thinking. In discussions in Yellowknife, Marlien noted how social justice is embedded in NWT work. These discussions help make new connections to link the work we do with these broader areas.
- Sterling suggested a small committee of School Hhealth Coordinators and the Secretariat to look at the CSH framework, student health and well-being approaches, and JCSH work in advance of the next face-to-face meeting.

**Action:** Secretariat will put out a call for a committee to plan for CSH framework and whole child perspectives for the next face-to-face meeting: Interested are Elaine, Sterling, Jennifer Munro-Galloway, Ian, Jennifer Wood, Daman.

**Action:** Michelle will share work on a document she is developing – with support of Health Canada and AFN – on the First Nations Mental Wellness Continuum Framework.

**Action:** School Health Coordinators will share notes made or from recalled discussions during the Yellowknife meeting helpful for next steps planning with Secretariat.

**Action:** Jennifer Wood will share link to resources from the Association of First Nations: includes blanket exercise, overview Indian Act, work on Residential Schools.

### 45. Next face-to-face meeting

• Potential tie-in of face-to-face meeting with a national conference

Sterling noted Doodle poll has been sent out, along with options for possibly connecting to a conference. Katherine outlined four conferences being held in this fiscal year with relevance for JCSH work: Canadian Education Association (Oct), PHE (early Nov), PrevNet (later Nov), and Shaping the Future (Jan). Pat noted she has followed up with Brian Torrance re the planning for the Shaping the Future conference and involvement for the national syumposium by EverActive, DASH BC, SK in Motion, Ophea, and JCSH.

#### Discussion:

- The difficulty with attaching a face-to-face meeting with a national conference is that it is unlikely most School Health Coordinators will get approval to attend a conference. As well, the length of the conferences plus a meeting would mean that travel and or/meetings would extend into the weekend.
- It was recommended that a face-to-face meeting sooner than the new year, in October or November, is preferable for moving work forward from the Yellowknife meeting and the interest in Indigenous perspective and the TRC Calls to Action.

**Action**: Katherine will modify the Doodle options for the fall face-to-face meeting.

# 46. Gender Identification Environmental Scan

Turning responses into scan details

Susan asked School Health Coordinators for their views on the best way to present the information gathered from emails on this topic. A scan specific to sexual diversity and gender identification might hold the information with best access for updates and sharing.

School Health Coordinators on the call agree an environmental scan is the best approach.



**Action:** Secretariat will develop a scan and send to School Health Coordinators for feedback, additions, and changes.

## 47. Emerging Trends and Opportunities

There was no discussion on this item.

### 48. Review of Action Items

To review and update the Action Items table

The Action Items table was reviewed.

### 49. Next Meetings

• August 8 2017 teleconference.

Interest was expressed in cancelling the August teleconference, given one is usually cancelled during the summer months. Decision to cancel this meeting was made.

- September 12 2017 teleconference
- October 10 2017 teleconference (depending on face-to-face meeting dates)
- November 14 2017 teleconference (depending on face-to-face meeting dates)

All teleconference meetings begin at 1:00 Eastern Time.

## 50. Adjournment

Sterling wished everyone a great summer.

## **Record of Discussion**

# School Health Coordinators' Committee Meeting

September 12 2017

## Co-Chairs: Sterling Carruthers (PE), Jillian Code (SK)

#### Participants:

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Jillian Code	SK
Jennifer Wood	MB
Sterling Carruthers	PE
Ellen Coady	NL
Carol Ann Cotter	
Shara Bernstein	NU
Daman Dhillon	
Elaine Stewart	NT
Ian Parker	YT
Jennifer Shortall	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat



Regrets		
Scott Beddall	BC	
Flo Woods	SK	
Jennifer Munro-Galloway	ON	
Marlien McKay		
Steve Machat	NS	
Kari Barkhouse		
Liza Manolis	YT	

#### **Record of Discussion**

#### 51. Welcome and Roll Call

Sterling welcomed all to the call, and gave a special welcome to new co-chair Jillian Code (SK). Jennifer Munro-Galloway was thanked for her two and one-half years as co-chair.

### 52. Review and Approval of Agenda

The agenda was approved as written.

# 53. Approval of Record of Discussion from July 11 2017 teleconference

The Record of Discussion of the July 11 2017 teleconference was approved as written.

#### 54. Update from Secretariat

In addition to the written update, Katherine provided the following:

- 1. The vacant position with the Secretariat has been filled. The position title was changed to Research Analyst and this will assist JCSH in its goal of developing a comprehensive research and knowledge exchange strategy as well as the exploration of a holistic research approach in the area of comprehensive school health. The new secretariat member will be introduced during the October teleconference.
- 2. The SIECCAN survey is now on the website and will be open until the deadline of September 15. (Note: deadline has now been extended till October 06). Responses to the survey will help inform the new guidelines. Katherine and Susan are members of the Working Group which is revising the guidelines.
- 3. Susan advised the Annual Report is being sent to the graphics designer for publishing. A pre-graphics design version will be sent this week for the teleconference of FPT Deputy Ministers of Health on September 27. The completed product will be ready for tabling at the October 18 meeting of FPT Ministers of Health. The photos provided for this year's annual report will not be enough and archived photos will be used to complete the number needed.

# 55. Marketing to Children

**Guests: Elaine Jones-McLean, Alissa Wanless** 

• Update on Marketing to Kids (M2K) work



Elaine Jones-McLean provided an update on the work Health Canada has been doing on marketing to kids since their presentation to SHCC this past February. From the online consultations and webinars the team has analyzed the feedback and will provide a "What We Heard" report.

Elaine and Alissa also mentioned that they realized that changing the rules around marketing to kids could also have an impact on school-based food and beverage fundraising.

#### **Discussion:**

- Elaine Stewart mentioned that access to food and especially healthy food was a challenge in the north. The PHAC guests acknowledged that northern challenges needed to be considered in future.
- Jennifer Wood asked if First Nation schools had been consulted, and she offered to link Elaine
  Jones-MacLean with the Manitoba First Nations Education Resource Centre Inc.
  (https://mfnerc.org/).
- Jennifer Shortall commented that a policy change in marketing to kids might also impact outside
  of school fundraising such as the sale of Girl Guide Cookies.
- Sterling suggested that a one-pager outlining the issue would be a helpful first step to reach out and start the conversation on school-based food and beverage fundraising with P/T stakeholders.
- Elaine and Alissa agreed to provide a one-pager for School Health Coordinators to share with their PT colleagues. This document will serve as a communication tool in this request from Health Canada's Office of Nutrition Policy and Promotion (ONPP) for support from JCSH in understanding the current fundraising landscape in Canadian schools. It will also provide a background for the request for information, part of a Ministerial mandate around Restricting the Marketing of Unhealthy Food and Beverages to Kids (M2K).

**Action:** Secretariat will share the one-pager from ONPP with School Health Coordinators when received.

# 56. Fall 2017 face-to-face meetings

- Main focus
- Possible next steps from Yellowknife meeting

Katherine provided an update of the dates of the fall Management Committee and School Health Coordinators' Committee meetings. Both meetings will take place in Ottawa, with Management Committee's occurring November 22 and 23, and SHCC on December 06 and 07.

It was suggested that cannabis legalization remains a topic of focus for most provinces and territories. This is an agenda item for the Management Committee meeting and could be on the SHCC meeting as well. Given that the meetings are in Ottawa, a guest speaker from the federal government might be helpful; the July call on this issue revealed that most provinces and territories are waiting to see what resources will be coming from the federal government.

It was also suggested that Cindy Andrew, part of the JCSH Secretariat in the first mandate, has been working with the Centre for Addictions Research in BC and might be a helpful contact.

With regards to a discussion on next steps from the Yellowknife meeting, a small group had volunteered on the July call to help facilitate a discussion at the December face to face. Volunteers were: Elaine Stewart, Sterling Carruthers, Jennifer Wood, Ian Parker, Daman Dhillon and Jennifer Munro-Galloway.



**Action**: Jennifer Shortall will see if a guest speaker can be available for these meetings to discuss cannabis legalization.

**Action**: Katherine will send a doodle poll to those who volunteered to help plan the discussion about discussion re: next steps post Yellowknife.

# 57. Emerging Trends and Opportunities

• Gender and Sexual Diversity Environmental Scan (Outline attached)

Susan reported that she has updated the scan with the information from the Equity Scan to assist School Health Coordinators in completing the sections for their jurisdictions. She also noted that she shared the scan with an Ontario researcher working on a youth sexual health strategy and environmental scan. She will share that scan when completed.

### 58. Review of Action Items

• To review and update the Action Items table

The Action Items table was reviewed.

### 59. Next Meetings

- October 10 2017 teleconference
- November 14 2017 teleconference
- December 06 and 07 face to face meeting
- January 09 2017 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

**Action:** Katherine will send calendar appointments to all for the 2018 SHCC teleconferences.

### 60. Adjournment

Sterling thanked everyone for their participation and urged them to enjoy the remaining days of summer!

Record of Discussion School Health Coordinators' Committee Meeting October 10 2017

Co-Chairs: Jillian Code (SK), Sterling Carruthers (PE)

#### **Participants:**

Representative	Jurisdiction
Christie Docking	ВС
Pat Martz	AB
Jillian Code	SK
Jennifer Wood	МВ
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE

Kari Barkhouse	NS
Elaine Stewart	NT
Liza Manolis	YT
Jennifer Shortall	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Craig Watson	Secretariat
Regrets	
Scott Beddall	ВС
Flo Woods	SK
Steve Machat	NS
Ellen Coady	NL
Carol Ann Cotter	
Shara Bernstein	NU
Daman Dhillon	
lan Parker	YT



### **Record of Discussion**

### 1. Welcome and Roll Call

Jillian welcomed all to the call.

### 2. Review and Approval of Agenda

The agenda was approved as written.

## 3. Approval of Record of Discussion from September 12 2017 teleconference

The September 12 2017 Record of Discussion was approved without changes.

## 4. Update from Secretariat

• Introducing new Secretariat member - Research Analyst

Katherine provided a brief overview of the changes the Secretariat job descriptions leading to the current positions of Senior Advisor (Susan) and the new Research Analyst position (Craig Watson). She explained how this new position fits with our Strategic and Operational Plans.

Craig Watson introduced himself and shared a brief overview of his background.

Additional update

In addition to the written update, Katherine shared the following:

a. Follow-up from the September presentation by Elaine Jones-McLean and Alissa Wanless of Health Canada's Office of Nutrition Policy and Promotion: They have provided a one-pager and email to the Secretariat and it will be shared with School Health Coordinators.

**Action:** Secretariat will send out the one-pager from Health Canada to SHCC.

**Action:** SHCs and /or their ministry colleagues respond to Health Canada's request for PT information on school fundraising policies/practices by mid-November.

### 5. Planning for the December Face to Face

• Discussion of Draft Agenda

The draft agenda was distributed as part of the materials for this teleconference. Katherine advised that the Secretariat is working on the Management Committee face-to-face agenda; this meeting will be held in Ottawa November 22-23. School health coordinators are welcome to suggest agenda items for either meeting. In response to feedback, jurisdictional updates has been moved to the first day to allow sufficient time for sharing. A small committee will meet next week to discuss take-away learnings from Yellowknife and how these can frame that section of the agenda.

Progress on the Strategic and Operational Plans will take a role in this meeting as we are almost mid-point in the mandate: the comprehensive research strategy and resource updates and refreshes are part of this. In particular and following up on meeting in Toronto in September with Sharif Mahdy and Stoney McCart, the



Secretariat is looking at possible updating of the Youth Engagement Toolkit. A telephone call with the Students Commission is planned for later this week.

Of importance as well is our ongoing monitoring and capturing of progress as per our commitment to developmental evaluation and the evaluation framework. We need to have annual discussions with Management Committee and School Health Coordinators' Committee on directions moving forward. The FPT Working Group on Concussions is working on harmonized protocols and best ways to disseminate and engage key stakeholders. The co-chair of this group will present on recent work and seek feedback on engaging with the education sector.

Cannabis legislation is a current issue. We are looking into having a speaker from the Public Health Agency of Canada to address this item.

The Health Behaviour in School-aged Children survey process is moving forward. For the past few months, Dr. Will Pickett has been the interim contact for JCSH. We have learned through unofficial sources that the co-Principal Investigator with Will is now Dr. Wendy Craig and she may be our new contact. She is well known and respected through her work with PREVNet and familiar with JCSH work.

The agenda will be updated as new pieces or details come forward.

## Discussion:

- Sterling reiterated that he and Jillian will happily receive any agenda suggestions from school health coordinators.
- On a question of the HBSC process, it was noted that the letters to schools are usually available by this time and they are important to communication and obtaining support for this survey.

Action: Katherine: will follow up with Matt King to see when the letters will be ready.

### 6. Emerging Trends and Opportunities

**ON:** Jennifer advised that the changes to the daily physical activity (DPA) policies were released October 6. She will share this electronically with all. The major change is to remove the word 'sustained' from the longstanding requirement that all Grade 1-8 students require 20 minutes sustained DPA during the school day.

#### 7. Review of Action Items

To review and update the Action Items table
 Gender and Sexual Diversity Environmental Scan: There is no requirement that each section be completed; they are placed there as suggestions.

### 8. Next Meetings

- November 14 2017 teleconference
- December 6 7 2017 face-to-face meeting
- January 9 2018 teleconference
- February 13 2018 teleconference

All teleconference meetings begin at 1:00 Eastern Time.



# 9. Adjournment

Record of Discussion School Health Coordinators' Committee Meeting November 14 2017

Co-Chairs: Sterling Carruthers (PE), Jillian Code (SK) Participants:

Representative	Jurisdiction
Stephanie Glube for Scott Beddall	BC
Pat Martz	AB
Jillian Code	SK
Anna Grumbly	
Jennifer Wood	MB
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Kari Barkhouse	NS
Steve Machat	
Carol Ann Cotter	NL
Shara Bernstein Daman Dhillon	NU
Elaine Stewart	NT
lan Parker	YK
Jennifer Shortall	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Regrets	
Christie Docking	ВС
Ellen Coady	NL
Craig Watson	Secretariat



#### **Record of Discussion**

# 10. Welcome and Roll Call

Sterling welcomed everyone to the call.

# 11. Review and Approval of Agenda

The Agenda was approved as written.

# 12. Approval of Record of Discussion from October 10 2017 teleconference

The October 10 2017 Record of Discussion was approved as written.

#### 13. Update from Secretariat

Susan noted that, in addition to the written update, Katherine and Craig are attending meetings in Montreal and Ottawa this week, Katherine to the National Summit on Teacher Well-being and Craig to PREVNet's annual conference.

## 14. "Let's talk about drugs: addressing substance use in schools" - Guest: Cindy Andrew, CISUR

• A conversation about use of cannabis and other substances

Sterling introduced Cindy Andrew to describe the work of the newly-named Canadian Institute for Substance Use Research, formerly CARBC. The institute is housed at the University of Victoria. As evidence of the ongoing focus on risk management rather than health promotion in this area, the conference she is attending is primarily addressing the opioid crisis.

Cindy noted that the institute is very happy to share resources and tools from the centre. How schools, districts, and communities are rethinking approaches to substance use is happening throughout the country. Drug ed in schools is beginning to move away from an abstinence / stay away approach to other resources and contexts of inquiry. <a href="Debra Ellis - Lunch with Lenin">Debra Ellis - Lunch with Lenin</a> resource is one reflecting this new direction. Another resource is <a href="drugsanddriving.ca">drugsanddriving.ca</a>, also available on the CISUR website.

The Centre does not work with schools directly, but she and others work with those in BC school districts. Like JCSH, it develops tools and resources for use in schools.

Teachers in classrooms are the first line of support for students. But they need assistance from all others involved in this work. In addition, this is not a matter only for phys ed and wellness curricula, but also for many other subjects, including math, physics, and social studies. Slide 9 is CISUR's take on competencies kids need related to substance use and gambling. Slides 12 and 13, 15 and 16 offer useful teaching aids, such as drug history timeline. Part of everyone's responsibility is collective; to move away from teachers having to be substance use experts before they can teach.

Youth voice continues to have a significant, essential role in this conversation, she said: It is important to consider the implications of what youth are telling us about substance use.

- Youth are having many conversations about substance use, and use for many reasons; for a number, it is a response to trauma.
- Youth are also asking for opportunities for dialogue: for example, when students binge drink and no asks about their drinking behaviours
- Among the discussions needs to be looking at the positives of substances use.
- Where does tobacco fit in the conversation on substance use?
- How should provinces and territories respond to calls for focused attention to content –
   based curriculum, such as opioids or other individual substances?



- Cindy responded that rather than a 'what do we need to know about ...?' the
  preferred direction is broader, involving competency enhancements and decision
  making. Dissenting opinions make for opportunities for learning. She also noted
  that current research is using deterrence as a response to substance use concerns
  is not effective; it does not work.
- What is the evidence on the impact of zero- based campaigns?
  - There are evidence pieces found on the Healthy Schools site as well as the JCSH based substance use series of toolkits (2009). A short evidence review has recently been completed.
- An important concept in working with students in schools is their identity in drug use, a real struggle for them. Are there curriculum ideas around the identity of being a drug user?
  - The <u>iMinds</u> learning activities developed through philosophical approach will help with this.
- What is the evidence on teachers as best placed to help and support health literacy on substance use? Health teams are often asked to come in to schools; thus, evidence of a shift in teacher roles will be helpful to health professionals.
  - Cindy: An important part of the shift is the concept that everyone in this together. Not one group or another, but how are each best positioned to work together.

Cindy said she is happy to connect with School Health Coordinators individually and her slide deck may be shared within the jurisdictions.

In a different focus, Cindy is also working with the <u>Psychology Foundation of Canada</u> and this organization is putting out resources on youth stress management. This is an important part of substance use decisions. She asked if Atlantic Canada school health coordinators would consent to have her follow up for responses in this region. PE, NS, and NL agreed to participate in a follow-up.

Action: Susan will share evidence piece from CISUR with SHCC when received from Cindy Andrew.

# 15. Emerging Trends and Opportunities

National Child Day: Jennifer Shortall reminded everyone that Nov 20 is National Child Day. She encouraged everyone to talk about the <u>UN Convention on the Rights of the Child</u>. PHAC has a National Child Day website, with a variety of information pieces and activities.

AB: Pat advised the province has launched, on October 24, 32 lesson plans designed by the National Centre for Truth and Reconciliation approved for Indigenous learnings. These lesson plans are for Grades 1-9 social studies classes. These were dispersed throughout the province. Pat would like to know how wide is the dispersal throughout the country.

Sterling suggests that those on call find out who to share with in each PT.

Action: Pat will send link for AB lessons to boost Indigenous knowledges.

Action: Susan will send link to School Health Coordinators.

### 16. Review of Action Items

To review and update the Action Items table
 The Action Items were reviewed.

## 17. Next Meetings



Sterling advised that, as co-chairs, he or Jillian attend Management Committee face-to-face meetings. Please let him know if there are any areas he would like SHCs to bring forth on their behalf.

- December 6 7 2017 face-to-face meeting
- January 9 2018 teleconference
- February 13 2018 teleconference
- March 13 2018 teleconference
   All teleconference meetings begin at 1:00 Eastern Time.

# 18. Adjournment

#### **Record of Discussion**

School Health Coordinators' Committee Meeting December 06 - 07, 2017

Co-Chairs: Sterling Carruthers (PE) and Jillian Code (SK)

### **Participants:**

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Jillian Code	SK
Jennifer Wood	MB
Kari Barkhouse	NS
Marlien McKay	NB
Sterling Carruthers	PE
Ellen Coady	NL
Shara Bernstein	NU
Elaine Stewart	NT
lan Parker	YT
Jennifer Shortall / Matthew Enticknap	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Senior Advisor
Craig Watson	Research Analyst
Regrets	
Jennifer Munro-Galloway	ON





#### **School Health Coordinators' Committee**

### **61.** Welcome and Introductions

Sterling welcomed all to the meeting.

### 62. Review and Approval of:

Agenda

The agenda was approved as written.

November 14 2017 Record of Discussion

The November 14 2017 Record of Discussion was approved as written.

#### 63. Review of Action Items

To review and update the Action Items Table

The Action Items Table was reviewed.

# 64. Update from Secretariat

To highlight recent JCSH activities

In addition to the written update, Katherine provided the following overviews:

A. From Management Committee meeting:

Renewal of the invitation to Quebec to join the JCSH: There was agreement in starting the process of again inviting Quebec to join, this time going through contacts with senior bureaucrats to bring the invitation to join forward. Katherine has made some initial contacts. There was a suggestion from Management Committee that a representative of Quebec Health or Education be invited to attend the next face-to-face meeting.

#### Discussion:

It was suggested that the FPT Health Support Committee member from Quebec might be able to assist with advancing the invitation to Quebec to join JCSH.

#### B. Annual report

Susan reviewed the changes to this year's Annual Report, some of the uses made of it, and suggestions from the Management Committee meeting. She and the graphics designer have plans to review the format and layout of the report for next year's publication.

- The infographic in the Executive Summary works well
- Consistency in headings and submissions are/would be helpful
- Might it be possible to have a theme for the annual report, although this would be problematic if emerging issues occur at a national or a PT level through the year
- One jurisdiction finds the best way to prepare the submission for the JCSH annual report is to take the press releases for both ministries and use these as foundation: easier to go through the approval process



**Action:** A small group of School Health Coordinators will work with the Secretariat to support the Annual Report work

**Action:** The Secretariat will pull out each PT and the PHAC submission and make a short cover piece - 2-3 page PDF.

## C. Knowledge Exchange from Secretariat Meetings:

Katherine was asked for outcomes and information stemming from her participation in the National Summit on Teacher and Staff Wellbeing, and on the Partnership Symposium on Cannabis Public Education and Awareness. She replied the national summit was co-sponsored by the McConnell Foundation through its WellAhead program and McGill University's Faculty of Education and the website is helpful for information sharing on this issue..

#### Discussion:

- There is still some work coming out of the WellAhead project in BC.
- WellAhead is moving into a couple other provinces: AB is one.
- Teacher and staff wellbeing is understood as an ongoing concern throughout the country. The average teacher in AB coming into the school system is lasting only 3-4 years.

**Action**: Katherine will share the report from of this meeting.

**Action:** Katherine will send list of attendees to the National Summit on Teacher and Staff Wellbeing summit when they are available.

**Action:** Katherine will continue to share information from cannabis awareness and stakeholder meetings.

# 65. Jurisdictional Updates

 Discussion of initiatives, emerging trends, priorities and challenges in provinces and territories

**NL:** The release of the <u>final report</u> of the Premier's Task Force on Improving Educational Outcomes has 82 recommendations, some with health curriculum implications. The health sector report <u>Towards</u> <u>Recovery: The Mental Health and Addictions Action Plan for Newfoundland and Labrador</u> is also an outcome of the province's release last year of <u>The Way Forward: A Vision for Sustainability and Growth in Newfoundland and Labrador</u>. The curriculum related recommendations in <u>Towards Recovery</u> adopt a comprehensive school health approach. The commitment to social-emotional learning is significant in both reports. Ellen was asked to present to the Council of Atlantic Ministers of Education and Training (CAMET) on how curriculum can be a strength in mental health promotion; she discussed through a comprehensive school health lens. The School Health Coordinator representation in NL will change; Carol Ann Cotter has moved to a community file and with the new Management Committee member representing the Education sector, the Health sector will take the lead at the SHCC table. The new SHCC representative is not known at this time.



**NB**: The province is working with its partners to develop a Community of Practice on mental health promotion in all settings, including schools. Staff of the Healthy Learners in School program are involved. We are reviewing the school grants process is under review to embed the results of the provincial student wellness survey and the Canadian Student Tobacco, Alcohol and Drugs Survey. Because the districts have a large number of schools, we are exploring other options to provide grants, e.g., by school clusters. The Student Wellness Survey is completed on a three-year cycle with students Grades 4-12; Grades 6-12 students are surveyed one year; Grades 4 and 5 and their parents the following year. With the change, students will be surveyed once for both surveys. The surveys are important sources of information also to NB communities; the community health profiles are populated (in part) by their results.

**Action:** Marlien will send link to community profile.

NS: There is positive collaboration between the department of Education and Early Childhood Development, school boards and the Nova Scotia Health Authority – the areas responsible for ensuring the implementation of the JCSH and Health Promoting Schools in the province. Momentum is improving in establishing partnerships and governance structures to continue to move CSH forward. A senior official table has been established with decision makers provincially between DHW, DEECD, NSHA, IWK, DCS to provide leadership and cross government and health authority approaches in school health issues forward. There is a particular emphasis in the province on the provision of services in schools including mental health services. Presentations and discussion have been held to frame services as an aspect of CSH with CSH being the umbrella however this has not yet been formally adopted.

**SK:** Mental health issues remain a significant concern in the province, and there is interest in upstream approaches. Interest is expressed in finding out what mental health activities as well as programs and approaches are used in schools throughout the country. Saskatchewan Health Authority officially launched operations on December 4, 2017. Operations of the 12 former Regional Health Authorities have transferred to the Saskatchewan Health Authority.

Action: New scan request for Mental Health activities in schools

**MB:** Stephen Howell has been hired as the new curriculum consultant, the position formerly occupied by Paul Paquin. The new deputy minister of education is Jamie Wilson, until recently MB's treaty commissioner. He is committed to innovation. An interdepartmental working group on data collection in schools, gap areas and coordination to make data usable has been started by Manitoba Health, Manitoba Education and Training and Healthy Child Manitoba. Apple Schools is in the Swan Valley school division; it is an expensive but impressive initiative and is shown as a way to get upstream mental health, nutrition and physical activity promotion in schools, especially in rural schools. Schools in NWT and northern BC will be included in this group in order to have a cohort of 10.



PHAC: Canada's next report to the UN Committee on the Rights of the Child will be submitted in 2018. The overall report is finalized and submitted by Heritage Canada with federal input being collected by the Department of Justice and PHAC and the provincial/territorial being collected by Heritage. Provincial/territorial consultation will take place through the Continuing Commission of Officials on Human Rights. The questions will be sent out mid-December. PHAC has been working with the Students Commission in this area, and may use their child and youth report as annex to its final report. The Rights of the Child website has been updated, with links to other areas, conventions, and treaties. A lot of this work plays out in PTs, not federally; it is difficult to give a comprehensive overview without reaching out, and PHAC wants to make sure PT information is included. Indigenous and Northern Affairs Canada will be undergoing some changes with the biggest being a division into two departments – Indigenous Services and Crown-Indigenous Relations and Northern Affairs. Currently the First Nations and Inuit Health Branch, Health Canada will be moving to Indigenous Services, however the off-reserve component of Aboriginal Headstart will remain with PHAC at this time.

**Action**: Jennifer will look into acquiring the contacts for the CCOHR and distribute them to JCSH members.

Action: Jennifer will check on PT links on Rights of Children website.

**BC**: In partnership with WellAhead, the Ministry of Health is supporting a coaching initiative for recipients of regional grants offered through Healthy Schools BC. The grants and the coaching initiative will be evaluated. While mental well-being has continued to be a key priority for the education sector, staff wellbeing has been raised as a key component. The Ministry of Health continues to support the implementation of BC's new physical and health education curriculum through Healthy Schools BC and Action Schools! BC. Sexual health and mental health are areas which teachers are asking for increased supports, which were suggested to include free online teacher resources and a professional mentoring network to protect against teacher burnout. The SOGI (sexual orientation and gender identity) 123 initiative of the BC Ministry of Education has been received very positively; 9 districts participated in the initiative last year and more than 50 are participating this year. The new Ministry of Mental Health and Addictions will set the strategic direction for mental health and addictions and provide leadership in response to the overdose emergency. The Ministry of Health will continue to oversee operations, including service delivery and operational policy.

YT: Education and Health have strengthened the collaboration of these two ministries. The 10-year mental health strategy is now in its second year, with mental health, child services, and addictions services under one branch. The school food and beverage policy remains a work in progress. The SHARE (Sexual Health and Relationship Education) Program has gotten very positive uptake, driven by teachers, especially in rural communities. The territory has sexual assault rates three times the national average; one of most important responses is comprehensive sexual health. In HBSC work: this is the first time doing a tri-territorial approach. Engaging with First Nations partners to review and finalize the questionnaire has led to important, but yet difficult, discussions. The suicide questions will not be included but the questionnaire also is more reflective of norther contexts and less colonial in wording.



Moving forward on suicide and sexual health questions was difficult as adults are often implicated in the responses. However, Yukon has started on this work, with leaders who want to normalize these discussions and issues.

**AB:** The Education curriculum, inclusive of wellness, is undergoing revision, with K-4 on track for release in the fall of 2018. Bill 24 was passed earlier in November. This bill supports Gay Straight Alliances and was contentious for its protection of students' privacy and confidentiality. The provincial government has just released the results of the school nutrition pilot of 14 school boards in 2016-2017; the \$10 million expansion has implemented the nutrition program in all of Alberta's school districts. The medical management, care and support for children and students in education programs in under review to determine delivery of services in schools. Emerging topics of interest include: concussion management; access to defibrillators in schools; and legalization of cannabis. Among the celebrated accomplishments of the past year is the launch of the University of Calgary Werklund School of Education's new Bachelor of Education requirement: Creating Healthy School Communities. This is the first university in the country to have comprehensive school health as a graduation requirement.

**NU:** The Education and Health departments are working to implement the recommendations of the 2015 review of inclusive education, with financial and human resources used to hire new staff and provide support for training and resources for school staff. One of the new staff is a behaviour and social-emotional learning coordinator, tasked with developing a safe and caring schools framework. There are also two new deaf and hard of hearing specialists, to support the school aged population. Prevalence rates of hearing loss in the territory are high. There is a hearing loss project, led by Health with collaboration from Education, with a screening project to collect baseline hearing rates in six communities in the north. So far it appears that around twenty-five percent of the school-age population in Nunavut has significant hearing loss: partly genetic, partly infections, still uncertainties on the causes. This clearly impacts teaching of these students. The Department of Education has increased funds for educational support services, with a major partner being Ongomiizwin Indigenous Institute of Health and Healing at the University of Manitoba, been contracted to support with OT and SLP services. Through the ongoing partnership with Red Cross, the territory is planning youth conferences to develop collective efficacy in students as well as teachers: the focus is positive health, resiliency, bullying prevention, and suicide prevention.

**PEI:** Other departments have become more involved in supporting student health and wellbeing: Agriculture and Fisheries have committed funding to local food initiatives in schools, while school board projects consider alternative lunch programs. Other departments, including Justice, along with Health and Education, have provided funding to student wellbeing teams in families of schools: teams are composed of mental health and addictions workers, youth outreach workers, and comprehensive school health nurses. This initiative strives for a balance between clinical and health promotion and will move on its agenda over three years across all schools in province. The next collection of SHAPES data will take place next year; among the emerging topics are sleep and sedentary time use. The survey will pair with CSTADS and will be conducted with Grades 5-12 students. An expanded advisory committee includes



other researchers, home and school association, other departments, and non-government organizations.

**NWT:** The territory is working with school-based teams to develop a compassioned-informed approach to education and, in doing so, invited internationally-recognized trauma specialist <u>Kim Barthel</u> to provide a session with program support teachers, administrators, and other frontline people. The health and wellness curriculum is looking at competency-based outcomes: networking to create, evaluation of knowledge, and understanding complexities. The curriculum developers want students to be involved in this process, and the team has been led by their questions and interests. Residential school training is now ready to go government wide.

## 66. 2015-2020 JCSH Operational Plan: Moving Forward/Next Steps

- Follow-up from Yellowknife
  - How what we saw, heard and experienced influences our work going forward
  - To discuss the following areas of the Operational Plan
    - 1E. Strengthen inclusiveness in the work of JCSH to support the needs of diverse populations
    - 1E.4 Engage expertise to increase knowledge of First Nations/ Inuit/ Métis lens within comprehensive school health
    - 1C.3 Seek and advance partnership opportunities specific to northern and remote communities

Elaine provided an overview of the experiential learnings that took place at the face-to-face meeting of Management Committee and School Health Coordinators' Committee in Yellowknife in June. She said the day closed with a sense of moving forward in reconciliation. The meeting included a session in which participants reflected on how these learnings and the work of reconciliation impacts on personal and professional levels as well as in the work of JCSH. For discussion is the question of whether there is interest in something such as a scan or other resource or product coming out of the work done during this meeting.

- Many family members and personal contacts are not aware of the impact and legacy of the residential school system. This was seen as something each individual can encourage in personal conversations.
- New funding projects by PHAC reflect impact of each of these projects on Indigenous youth.
- In NL's clothing and textiles courses, some of the language was exclusionary and reflected only
  machine sewing; now it is representative of methods of making, and varies depending on
  methods in communities. Professional Learning for teachers included a session in leather work
  and beading; expertise provided by an artisan recommended by The Native Friendship Centre.
- In AB, grants now must respond to the Truth and Reconciliation's Commission Calls to Action.
- The question was asked if JCSH should look at including members of Indigenous communities/ groups to the table, or if one meeting each year should include Indigenous partners.



- Because Kevin Lamoureux spoke to this table in 2016, he was invited to the NB Wellness Conference in the spring of 2017 and participants responded to the very positive tone of his address.
- There might be an opportunity to document reconciliation initiatives through a comprehensive school health lens, in a positive voice, with first peoples' principles of learning in health.
- In MB, there is an obligation to review grants through an equity lens. A book club started by Jennifer Wood reviews the entire 600+ page executive summary of the Truth and Reconciliation Commission's report; participants may meet to work on this during work hours.
- The question was asked whether JCSH should develop a position statement on reconciliation and the impacts of residential schools on positive mental health.
- In PEI, work with Indigenous education partners begins with a focus on simply starting to move forward, rather than not moving for concern of making mistakes.
- In SK, there is concern the Calls to Action have become only a checklist; however, they have also changed conversations and made more holistic the ways in which work is carried out.
- It was suggested that if a face-to-face meeting takes place in Winnipeg, that it include a visit to the National Centre for Truth and Reconciliation.
- It is important to recognize that authentic engagement with Indigenous peoples in decision-making means that government must relinquish some power. There is also an impact on how accountability is measured.
- How do we decolonize our work, given that we have an ethical and moral obligation to do this.
- The question was asked whether the acknowledgement of traditional territory before meetings is a standard or an example of tokenism.
  - Suggestions: this is a beginning step and should be standard; a practice that should be in place; there are imaginative ways to show and give space to connect to the land on which meeting on, through a piece of poetry, or something tactile, but when starting out, sometimes words are helpful.
- Tokenism can be addressed through approaches that are more reflective of First Nations ways of meeting; for example, if elders are invited, it is important to provide the time and space they take for them to speak, regardless of government timeframes and agendas.
  - As a follow-up, how do governments / jurisdictions alter the time framed agenda approach in meetings to provide elders invited to address a meeting with a no-timelimit space. There is some precedence in making meeting agendas more flexible; some meetings with youth have reflected this flexibility when their participation levels cannot be predicted in advance.
- It was asked how can we be allies for Indigenous peoples, what does that look like in practice?
- Possible next steps include a repository or scan of tools and resources gathered for this work in each PT.
  - Sterling advised that CMEC has an Indigenous education subgroup; this group is
    planning a scan early in the new year of K-12 curriculum development work. There may
    be pieces from this that can help populate the above scan / repository.
  - Regarding a repository; it was suggested the work be unpacked through the lens of the CSH framework. What are the policies and practices undertaken? Is curriculum



developed along with space of vulnerability? Is the work shifting the conversation from disadvantage to privilege? Using a case study approach is a possible entry way into this work.

- There is opportunity here to incorporate partnership pieces.
  - Shara advised that northern communities seem more willing to enter into partnerships, provided the partners meet the needs of the community. She recommended the movie: <u>Angry Inuk</u>. Inuit people don't communicate same way as many other peoples: much is nonverbal.
- It is important to make space for the really good pieces happening.
- It is also important to be able to offer those stumbles and recovery after stumbling. How might we share these stories?

**Suggestion:** Katherine asks if SHCC wants to develop a work group that would allow for knowledge exchange every couple of months for those who want to join. Rather than a formal group, it would be more a platform for conversation and discussion for all who want to join in and share.

**Suggestion:** Kevin Lamoureux has a new role with the <u>National Centre for Truth and Reconciliation at</u> the <u>University of Manitoba</u>. Is there interest in engaging him in more ongoing dialogue? The Centre has expressed interest in working with JCSH.

• Jennifer Wood noted this university has done a lot of work on wellbeing and well becoming. **Suggestion:** That SHCC have its next meeting in Winnipeg.

## 67. 2015-2020 JCSH Operational Plan: Moving Forward/Next Steps (Continued)

- To discuss the following areas of the Operational Plan:
- O 2A.1 Support a coordinated research agenda for comprehensive school health Katherine and Susan explored some ideas for a coordinated research agenda with Dr. John Freeman before he passed away. Craig's work as JCSH research analyst addresses this area. Some suggestions from previous meetings and from the recent Management Committee meeting include (1) reviewing research funding parameters from CIHR, CPAC, and other funders; (2) having someone from CIHR to address the next face-to-face meeting of Management Committee.

For first steps, it is important to consider what a research agenda would look like and how we move this forward.

- Identify and prioritize research needs. Could we do a Survey Monkey to see what we have needed as research pieces?
- Do we know the current research agenda around CSH? Craig has started an inventory of research pieces and researchers.
- Katherine and Susan had discussed with John the idea of identifying a group of researchers and bringing them together as a core research network.
- There seems to be a divide in what policy/practice and what research community are interested in. What is JCSH interested in? When we find this out, then match with research community.



Part of researchers focus is based on funders' requirements, but really need to begin with policy and practice trends.

- Mental health promotion is a need that seems to cross all areas: policy, practice, and research.
- Another interest is in moving past the 'what' of CSH: how to dig deeper, to build capacity in
  jurisdictions, to evaluate work planned, approaches, policies, and to build in action research
  work.
- It would be helpful to find out what interesting and emerging pieces of research are happening in each PT.
- A possible network JCSH might explore to inform our next steps is the frailty (for seniors)
  network in New Brunswick; this is an opportunity for groups to sit together and discuss interest
  areas.
- There are no post-secondary institutions in the territories. Is there a way to expand student
  engagement with results of HBSC data, to establish knowledge exchange of student response to
  data and research on an ongoing basis. How do we increase student agency around their data?
  The Students Commission conference will be held in the new year; it is unknown if this might be
  an area of interest for this venue.
  - o In the Yukon, the last HBSC survey lead to making these conversations meaningful in communities.
- There is interest in alternative approaches to research and evidence, in discussion of what is meant by evidence. It was suggested Dr. Jon McGavock is exploring this area.
- It is a good idea to engage end users / stakeholders / students.

**Action:** The Secretariat will develop a survey of research interests/ suggestions and send to practitioners and policymakers, as well as other stakeholders. Then we could discuss use of results with researchers.

**Action:** Marlien will send frailty network link.

Action: School Health Coordinators will send any ideas for research agenda work to the Secretariat.

- 1D.1 Identify opportunities for engaging and partnering with additional government sectors, e.g.:
  - Agriculture
  - Sport and Recreation

Katherine advised that the sport and recreation ministries are interested in engaging with education specifically around physical activity. She has been asked to be part of a working group to oversee the development of a framework for this engagement. Initial work on how to proceed with the development of a framework been completed by PHE Canada (chosen through an RFP). A report this work entitled the Education Sector Initiative Project Framework Phase One is in draft now. SPAR has allocated a small budget for Phase Two, the development of a high level framework that would look at best ways for collaboration with the Education that could result in enhanced quality and quantity of PA/PE/PL programming.

**Action:** Katherine will share the draft report on Phase One when it is accepted by the committee. **Discussion:** 



Other sectors that JCSH should identify for engagement, partnering:

- Agriculture: Canada's food policy, agriculture food policy, food security, local food in school, school food programs
- School sport is connected with various ministries throughout the country
- Tourism and recreation supports after-school initiatives in some PTs
- Sustainable development does a lot work in schools in MB
- Ministries responsible for crime prevention are also involved in schools.
- To what end do we explore partnerships with other ministries
- Social determinants of health approach leads to many between ministries connections

Action: Connect with Agriculture Canada to see if there are implications for schools in work, food policy

## 68. JCSH Resources: Current Status and Next Steps

#### PMH Toolkit

- Launch of Revised Toolkit
- Addition of Indigenous Module

Katherine advised the Positive Mental Health Toolkit is launched and on the JCSH website in English and French. The Secretariat has presented on it to a number of conferences, all with very positive feedback. CASSA, CSBA, and CTF are promoting it among their members. As well, Management Committee is very supportive of an additional module on Indigenous perspectives. Katherine will call for a small advisory committee to support Kevin Lamoureux's development of this module.

**Action:** Secretariat will put PMH toolkit slide deck on private side.

### • CIM: CSH and Student Achievement

Susan advised that, from the meeting she and Alicia Hussain held in November, Alicia will be developing a four-page summary of the CIM work with suggestions for principals and school health champions on making the connections between CSH and student achievement in schools.

#### Discussion:

• It was suggested the language be such that other administrators and ministry leads would see the CSH and achievement connections shown in this work.

### Healthy School Planner

Katherine noted that the term pillars is being changed to components where CSH is referenced throughout the Planner. She asked if there is interest in any further refresh.

- Kate Storey's work on essential conditions of CSH may bring forth areas that should be incorporated in the HSP
- Although the district-level tool was ruled out, there remains the sense that having this capacity
  to show school health elements at a district level might enhance buy-in at that level.



**Action:** Katherine will review the previous decision re a district-level tool, to see if there could be an opportunity to revisit.

#### YE Toolkit

- Individual Modules
- Youth Who Thrive Module

The Students Commission has been updating the research review from work done last year by Stoney McCart and John Freeman. As well, the toolkit will be broken into individual modules, with the addition of a new module providing the implementation of youth engagement: Youth Who Thrive. This work should be completed in the next couple of months.

## 69. Developmental Evaluation

Next Steps for measuring progress

The Evaluation Framework was finalized a year ago. The Secretariat has been working with Jamie Gamble to use the framework in monitoring and measuring JCSH progress. We have gathered considerable data through the numerous work areas: annual report, meetings of SHCC and Management Committee, Secretariat Update. We will be also conducting focus groups and an online survey in the next year.

### Discussion:

There is value in revisiting the Evaluation Working Group.

**Action:** Secretariat will send out request for WG members.

#### 70. Presentation from FPT Concussions Group

**Jocelyn East** 

Next Steps in collaborating with Education

The presentation from Jocelyn is available on the private side of the JCSH website, as part of the package of materials for this meeting.

Providing information by teleconference during the presentation was Stephanie Cowle of Parachute. This organization has produced a number of guidelines on assessment of, and dealing with, concussions, including the Canadian Guidelines on Concussion in Sports. This will be posted on the public side of the JCSH website.

Parachute recognizes a gap in applying return-to-school strategy in real world setting and has received a grant from PHAC to explore this further. Ophea and JCSH have been asked to participate in the project which will involve a pilot with two or three provinces and one or two school boards in those provinces to study facilitators and barriers to implementation of the protocol. This will allow them to develop resources in collaboration with the school boards and provide staff training and evaluation. The goal is to find case examples of how school boards can apply protocols while recognizing their own contexts and feeling supported in their work.



#### 71. Cannabis Legislation

## Paul Spendlove /Adrienne Mertin, Health Canada

The presentations from Paul and Adrienne are available on the private side of the JCSH website, as part of the package of materials for this meeting.

### Discussion:

- The question was asked if education materials will include information on the impact of mixing cannabis with tobacco and the use of cannabis concurrently with alcohol.
- It was noted that public awareness information is not the most effective form of education; more work on interventions in schools would be helpful, as part of an approach that includes work on resiliency and skills building.
- It was suggested that schools are looking for ways to make health initiatives not simply one
  more thing educators need to include; ways of incorporating cannabis education into
  curriculum is helpful.
- Another need area is to have students themselves able to discuss substance use in their lives, including cannabis and binge drinking rather than bringing in addiction counsellors to talk to them.
- The targeting of key messages to various age groups is helpful.
- One of the important takeaways from the meeting in Yellowknife was that if communications and promotion of supports are developed for small and remote areas and they work there, then these can more easily be expanded to support large urban centres; this is preferred to the more standard way of developing supports for urban areas and hoping to compact for small communities.
- It was suggested that resources be made available directly to children and youth from Grade 5 up, to focus on student agency. It was reinforced that targeting messaging to youth age 13-15 is not young enough; children in Grades 4-6 should be the focus.
- Additionally, it was suggested that rural and remote communities be supported in developing their own messaging.

## 72. HBSC update from Queens' University

## Will Pickett and Wendy Craig

Wendy and Will introduced the session by noting they want to ensure the HBSC data provides optimum benefit, not just for research purposes, but to be more effective to practice. Through previous HBSC surveys, Wendy's team has coded all the policies at the provincial and school level on safe and accepting school policies. They are also doing a similar one for healthy foods in schools. Will has been co-PI of HBSC for a number of years. He and Wendy were accepted formally as co-PIs for Canada at a recent meeting in Croatia.

They reviewed where matters stand throughout the country at this time regarding recruitment of survey participants:

**NL:** Starting to request permission at board and school level.

**NS:** Everything through Education has to be approved through the Inclusive Education committee. HBSC has been positively received, though approvals have not been completed yet. Military and veterans' families are of particular interest in NS and may enhance approvals.



**PE:** HBSC has been approved by the ministry; Sterling has been working with Matt on wording for letters to schools; this worked well for recruitment in the last cycle, as it provided a way to show the context for PEI.

**NB:** Collaboration efforts include working to align questions from the student wellness survey with HBSC, as occurred with CSTADS. HBSC and the provincial group working on this feel they have permission to recruit but have to work with surveys. Queens will do the best it can from Queens side and NB will try to explore options. Wendy: acknowledged the team is hearing the need to look how we align with other surveys.

**MB:** Historically, the province has not participated because of youth health survey; that last collection was in 2013. Met with Healthy Child Manitoba and have approval to go ahead with representative sample this time. Have letter drafted and signed by education; with approval from health side, the next step is to get it out to schools. Education want some way of seeing benefit; most benefit seen now on health side.

**SK**: Ministry of Education has provided support and communications; like others, also have survey fatigue in this province. Will: we acutely aware of survey fatigue, and trying to work with others.

**AB:** Approvals now at ministers' level. Hoping will be ready to go shortly. This cycle could give us trends data. Data sharing agreements will be in place next fall. Won't ask for changes to questions this cycle; for next cycle may have suggestions for changes.

**BC:** Ministry of education colleagues may be looking after getting approvals in this province. Will: also know competing surveys is the challenge in BC: McCreary, CSTADS, couple of others. Have approvals in BC, asked to avoid schools in lower mainland. Not going into Vancouver is a challenge.

YT: Tri-territorial work this year. Try to do census survey. Only jurisdiction in Canada to do a detailed PT report; includes urban-rural differences. Showing results for communities is helpful. Only soft releases, given results of challenges in the territory. Have discussions with stakeholders, making presentations across health and education about YT results compared with Canada. Issues around passive-active consent. FN communities do not support passive response; however, lose a lot of kids with active consent.

**NWT:** Data collection there includes EDI and MDI; this first time of overlap with HBSC. All superintendents are aware HBSC survey will be coming next year. Territory wants to move forward with improved knowledge mobilization; possible case studies how to approach this. Would like researchers to work with this. Would like data to be possible for use by students in inquiry investigation. Have data from 1995 - pre NU - with potential for conparison. For next round, would have some schools interested in HBSC in electronic format. Internet access and privacy may be issues, but schools used to this process from MDI. Interested in responses for every question. Would like to be in position, as Yukon has been, of getting a special report.

**NU:** Helpful working with territories together to increase relevancy of questions. Challenged for sufficient numbers last round; think it will be improved this time. Challenge will be developing implementation plan. Want to diminish school burden.



- Wendy: future planning includes the following areas: diversity, make data meaningful, integrate with other data collections, get information to knowledge users so they can articulate what they want to know, then incorporate that for planning for next round.
- This point responds to tension between provincial data which goes to schools, up to districts. HBSC doesn't come down to level where schools see themselves. Is there way to bring the data results to more local level.
- The flip side is that provincial surveys do not allow for national, international comparisons. When provincial mental health results are not great, it is helpful to see the other jurisdictions with similar results; also see where provincial data differs from national.
- Wendy: can we find way to discuss how to use data in different ways. Contextualization is difficult.
  - would be interesting to do. How is one PT doing really well compared with another?
- Wendy: how do we build capacity to use data effectively?
  - One of issues is that regions in BC are very different from each other. Would be up to the health authorities and school districts in how this data comes alive.
  - That is what resonates with schools in PEI; education leaders see differences in their students from the provincial sample.
  - NB makes an effort in school boards to show how data can be used, present data relevant for that region, what is happening in a community. The Health Council does community health profiles; brings data to community level.
  - In NU, the Compass report has been well received by Department of Education: the data has created conversations.

### 73. Emerging Trends

#### **Comprehensive School Health as a focus:**

**AB:** The McConnell Foundation has held a meeting in AB. Focus was mental wellness in students. There are discussions where a McConnell representative feels that many involved in school health initiatives do not see themselves in CSH. Kate Storey's research on essential conditions supports a CSH approach.

Action: Consider inviting the McConnell representative to a SHCC face-to-face meeting.

**NS:** Stan Kutcher's work in developing <u>'Go-To'Teacher</u> has influence is NS.

**NL:** GoToTeacher is a program that fits into the CSH framework, but it is not the framework. The SEAK model used in NL has a CSH approach.

**Action:** Ellen will share the Tier 1,2,3 approach used in the PATHs (Promoting Alternative Thinking Strategies) program, an initiative of SEAK based on a CSH approach.

Action: Secretariat to organize a teleconference on the 'Go-To' Teacher training.

Action: Ellen will share Tier 1,2,3 approach used in the PATHs (Promoting Alternative Thinking

Strategies) program, an initiative of SEAK based on a CSH approach.

#### **Sexual Health:**

**YT:** Sexual health and the ties to mental health, including issues of consent, personal boundaries are of substantial concern in the territory. Lesson plans for K-3 have been developed. Katherine advised that SIECCAN guidelines going through rewrite.



**MB**: An NGO partner, <u>Sexuality Education Resource Centre</u> in Winnipeg, provides age-appropriate sexual health and relationships education.

**AB:** The website, <u>teachingsexualhealth.ca</u> questions why sexual health discussions don't begin in kindergarten, when body parts are being named, rather than Grade 4.

**NL:** Educators are provided with website support for curriculum implementation of sexual health components, developed with collaboration from the health authorities.

## **Healthy Eating / Physical Activity Trends:**

**BC:** Healthy eating, physical activity focus is diminished with efforts concentrating on mental health and sexual health.

MB: Similar movement in MB

**PE:** Conversations in school trends all about mental health. This is also reflected in other jurisdictions.

Action: Get update on what modules in HSP being completed

## 74. Meeting Reflections – Takeaways from this meeting / Action for 2018

Appreciation for the SHCC and for the face-to-face meetings was expressed. Members find that both formal and informal conversations during the meetings help to inform their work.

Moving forward: Katherine will send out a Doodle for the next face-to-face; time recommended is in the second half of April, with a plan to meet in Winnipeg.

## 75. Next meetings

- Teleconferences 2018 second Tuesday 1:00 PM Eastern
- Spring face to face

# 76. Wrap-up and Concluding Remarks

Jillian and Sterling thanked all for their participation and wished everyone a safe return home.