



**Record of Discussion
School Health Coordinators' Committee Meeting
January 9, 2018**

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

Participants:

Representative	Jurisdiction
Christie Docking	BC
Jillian Code, Naomi Shanks Anna Grumbly	SK
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Kari Barkhouse	NS
Ellen Coady	NL
Ian Parker Liza Manolis	YK
Jennifer Shortall	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Secretariat
Craig Watson	Secretariat
Regrets	
Scott Beddall	BC
Pat Martz	AB
Jennifer Wood	MB
Steve Machat	NS
Carol Ann Cotter / Jaime Collins	NL
Shara Bernstein / Daman Dhillon	NU
Elaine Stewart	NT
Liza Manolis	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 December 6-7 2017 face-to-face meeting

The Record of Discussion from the December 6-7 2017 face-to-face meeting was approved, with changes sent to Susan.

4. Update from Secretariat

The Secretariat Update was provided in verbal form. The written update will begin for 2018 with the first meetings and activities this month.

Katherine provided update on the following matters:

1. ONPP – School-based fundraising / engagement with JCSH: Alicia Wanless of the Health Canada Office of Nutrition Policy and Promotion (ONPP) sent an update advising they have connected with representatives from all 12 jurisdictions on this issue as well as on the implications for schools if restrictions to marketing of unhealthy food and beverages were to include all school-based food and beverage fundraising activities. Once these conversations are complete, ONPP will develop an overview, including a table of existing or developing school food guidelines or policies and will disseminate with JCSH.

2. A **webinar** on [Selecting and Assessing Health Equity Tools](#) will be held January 22 between 1-2:30 p.m. Eastern. The webinar is sponsored by the National Collaborating Centre for Determinants of Health (NCCDH).

3. The **CPHA Expert Reference Group on Cannabis** is looking at tools needed by health promotion specialists. To inform this work, meetings will be held in the next few months throughout the country: January 17 in Iqaluit, February 21 in Winnipeg, and February 23 in Calgary; dates are still to be set in other cities.

4. **NS youth health clinics** – the Secretariat has spoken with Michelle Amero from NS Department of Health on the models of youth health clinics in Canada. Kari noted there is considerable political attention to the model of wrap-around services in schools. She and Steve are attempting to incorporate a CSH approach in this model. Katherine advised that NS has funding for new clinics and they want to see what models are used in other jurisdictions in the country before they move forward. Before making a decision on keeping their current model or developing a new one, they would like to hear what is working in other PTs. IF School Health Coordinators have links to youth health centres in their PTs, Michelle would appreciate receiving them.

- Sterling can provide Kari with links to work going on in PEI.



- Marlien: In NB, the Healthy Learners in School program guidelines, with public health nurses assigned to districts, and the Integrated Service Delivery model are complementary pieces. Neither is a school or a youth health centre.
- Kari: It would help to get other perspectives; the province is finding difficulty moving beyond a service delivery approach.

Action: Secretariat will send out request re this.

Action: School health coordinators can reply directly to Michelle and include Secretariat

5. **'GoTo'Teacher training:** Katherine has sent out the Doodle in response to interest in this initiative. She asked for suggestions on the objectives of the call.

- In NL, it is being adapted for mental health promotion, but this product is directed to mental health disorders.
- Many are not familiar with the tool; there is interest in seeing how it would align with the CSH model, and where it would fit along the mental wellness-mental illness continuum.
- The modules for [Mental Health in High School Curriculum Guide](#) are online and free. All guidance counsellors in NL have received the training. The 'GoTo'Teacher training may be for a different tool.

Action: Katherine will send out date for this teleconference once the Doodle has been completed.

6. **Annual Report / Jurisdictional Communication Document:** Susan explained the short PDF sent to School Health Coordinators of a front piece from the Annual Report with the individual jurisdiction's submission. This was an action item from a suggestion during the December face-to-face meeting. This can be changed to meet the needs of a province or territory. Any school health coordinator wanting a document for his/her jurisdiction is asked to contact Susan.

There is also the need to set up Annual Report committee in the near future, given the call for submissions will be sent out in early March.

Action: School Health Coordinators interested in the short jurisdiction-specific Annual Report document will email Susan.

Action: The Secretariat will send out a call for School Health Coordinators to sit on an Annual Report Advisory Committee.

5. **Roundtable discussion of key takeaways from December 2017 meeting**

- *Next Steps*
- *Priorities*

A short discussion exploring next actions moving forward following the December 2017 face-to-face meeting yielded the following suggestions:

- Priorities include where the comprehensive research agenda development will move the

work of JCSH, as well as ongoing work and collaboration with Kevin Lamoureux.

- A need for consideration of suggestions for Annual Report – both completion and communication
- A discussion group around Indigenous actions for JCSH and the new composition of the Evaluation Working Group were also suggested.
- Given the short timeframe between completion of the Record of Discussion from the face-to-face meeting and this teleconference, it was suggested that SHCs choose a couple of areas they see as early priorities for 2018.

Action: SHCs will go through the December 2017 Record of Discussion and Action Items Table and highlight their priority areas.

6. Emerging Trends and Opportunities

IQOS (stands for I Quit Original Smoking): Sterling asked if other School Health Coordinators are familiar with this device. Marlien: it is a device that heats tobacco, is available at this time in the US, and is promoted by tobacco industry.

7. Review of Action Items

- *To review and update the Action Items table*

Jillian noted the number of items created as the result of the December 2017 face-to-face meeting.

8. Next Meetings

- February 13 2018 teleconference
- March 13 2018 teleconference
- April 25-26 2018 face-to-face meeting
- May 8 2018 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

9. Adjournment

Jillian thanked all for their participation.



**Record of Discussion
School Health Coordinators' Committee Meeting
February 13, 2018**

Co-Chairs: Sterling Carruthers (PE), Pat Martz (AB)

Participants:

Representative	Jurisdiction
Pat Martz	AB
Jillian Code Naomi Shanks Anna Grumbly	SK
Jennifer Wood Stephen Howell	MB
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Steve Machat	NS
Ellen Coady	NL
Daman Dhillon	NU
Elaine Stewart	NT
Ian Parker	YT
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Craig Watson	Research Analyst
Regrets	
Christie Docking Scott Beddall	BC
Kari Barkhouse	NS
Carol Ann Cotter	NL
Shara Bernstein	NU
Liza Manolis	YT



Record of Discussion

1. Welcome and Roll Call

Sterling welcomed all to the call. He advised that there will be a change in co-chair, as of this meeting. Jillian has had to step down; she is changing positions and will now be in an acting director's role and will be sitting at the Management Committee table. Pat Martz has accepted the role of co-chair for the next two years. All congratulated Jillian and Pat on these changes.

2. Review and Approval of Agenda

The agenda was reviewed and accepted without change.

3. Approval of Record of Discussion from January 9 2018 teleconference

The Record of Discussion of the January 9 2018 teleconference was accepted without change.

4. Update from Secretariat

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

A. Evaluation: As part of our work with the Developmental Evaluation approach that has been adopted to record, monitor, and evaluate the work of JCSH, the Secretariat spent a day meeting with Jamie Gamble of Imprint Consulting to look at the Evaluation Framework and move things forward. As a result of this meeting, the Members Survey has been drafted and will be reviewed by members of the Evaluation Working Group prior to being sent to School Health Coordinators, Management Committee members, and Management Committee Alternates for completion.

B. Shaping the Future Conference: Katherine gave a presentation on the Positive Mental Health Toolkit. There were well over 100 participants attending this session; there is much interest in the toolkit. A highlight of the conference was a presentation from Charlene Bearhead; she was the first education lead for the National Centre for Truth and Reconciliation (a position now held by Kevin Lamoureux).

C. Meeting Part Two of Healthy School Communities - A Better Way Forward : Attached to the Shaping The Future conference was a day-long discussion led by PHE Canada, along with Ophea (ON) and Ever Active Schools (AB) to continue discussion begun last November prior to the national PHE Canada conference on how to improve linkages and collaborations of those organizations working in the area of comprehensive school health. Katherine has been involved in meetings of the stewardship group. The group wants JCSH to be engaged with them. This meeting was also attended by CASSA (Canadian Association of School System Administrators), and by researchers Antony Card and Kate Storey, and invitations to participate were sent to other national groups such as the Canadian School Boards Association. The group wants to improve sharing of information and resources among those working in CSH. The group is considering calling itself the Canadian Alliance of Health-Promoting Schools. Katherine will keep School Health Coordinators informed, with possible updates to the Management Committee and School Health Coordinators' Committee face-to-face meetings.

Discussion:

- The drivers are PHE Canada, Ophea, Ever Active Schools, and DASH BC.
- There is no agenda outside of sharing information. However, discussion has suggested creating a formal membership with Terms of Reference and possibly a membership fee.
- In this group, the members appear to be weighted in the central southern Canada experience. It was expressed that this should not lead to further isolation of the experiences of northern territories and northern provincial regions.
- National groups have been invited to participate in this early phase, including CASSA, CSBA, CAP, CTF, and School Sport Canada.
- Some of the initiative for this group has come out of a series of pre-sessions of the Shaping the Future conference in AB each year, where CSH stakeholders from throughout the country would be invited to discuss CSH initiatives, research, and implementation issues.

Action: Katherine will share the report from the November 2017 meeting of this group with School Health Coordinators.

D. SIECCAN: The Sex Information and Education Council of Canada has formed a working group to develop the next iteration of Canadian guidelines for sexual health education. The findings of the survey conducted last summer have been shared with working group members, which includes Katherine. The working group will meet in late February in Ottawa.

E. The CPHA Cannabis Project Expert Group will meet in late February in Toronto to discuss what health promotion practitioners need for materials to guide education and support in light of the legalization of cannabis later this year.

Action: Katherine will share information coming out of this.

F. Face-to-face agenda: School Health Coordinators' Committee meeting in Winnipeg April 25-26. The draft agenda is now ready to be shared. This agenda, along with a tour of the Human Rights Museum on Day Two, will require two full days. Thanks was extended to Jennifer Wood for her help in developing this agenda and for suggesting meeting spaces.

Discussion:

- This agenda should provide an opportunity for discussion of how these experiential pieces, particularly over last year and moving to this meeting, connect with our Operating Plan. Out of the many areas of discussion, it is important to establish tangible actions.
 - Katherine advised that this area will form part of the discussion with Kevin Lamoureux with time on the agenda also for group discussion.

Action: The Secretariat will send out the draft agenda to School Health Coordinators.

5. Working Groups and Advisory Committees

- *Next Steps*
- *Priorities*

There have been a variety of working groups and advisory committees over the years; the only one that is active now is the Evaluation Working Group and it is just now being reactivated with a call for the first meeting. The School Health Coordinators were asked for their views on benefits and challenges of participating in working groups, advisory committees, and discussion forums. Do these help support/advance work in the jurisdictions?

Discussion:

- Ian advised that involvement in these groups assists him in his work in the Yukon by enhancing opportunities to speak more broadly about JCSH and also about the issue being supported by the working group / advisory committee.
- Over the years, these groups have been helpful in providing those JCSH members involved in the group the opportunity to participate in the initiative or resource in more depth; they have also assisted in moving the work along more quickly and efficiently.
- Resources such as the Positive Mental Health Toolkit have changed considerably because of the involvement of the ministries: it is a good example of policy, practice, and research all working together.
- Marlien noted that the groups have provided an opportunity to ensure NB voice and needs are expressed in JCSH work.

B. Evaluation Working Group / Surveys

Although a question on the surveys will inquire about research priorities and interests in the jurisdiction, Katherine added a reminder to complete the email request for this information, in order to inform the research agenda area of the Operating Plan.

Discussion:

- A question on the research priorities of other stakeholders is included in the partners / stakeholders survey. This will be held for a few weeks to await some clarification on the plans for the Alliance, discussed above.

6. Emerging Trends and Opportunities

Front of Package Nutrition Labelling: Jennifer Shortall asked School Health Coordinators to complete the survey from Health Canada on this if possible. In addition, those in Health Canada working on this would like the opportunity to address the School Health Coordinators' Committee at an upcoming teleconference. Jennifer is willing to facilitate this if there is interest.

UNCRC: In addition, Jennifer noted that the federal government is working on the next report to the United Nations Convention on the Rights of the Child. This report is due in July. Provincial/territorial input will be added over the coming month. She will continue to provide updates on this work.

Assessment Tool – PMH Toolkit/Healthy School Planner: Sterling asked if the completion of the assessment in the toolkit by a school would be reflected as completion of the PMH module in the Healthy School Planner. Katherine responded that while the school will receive a report in either case, the toolkit assessment is not captured by the Planner.



7. Review of Action Items

- *To review and update the Action Items table*

The Action Items table was reviewed.

8. Next Meetings

- March 13 2018 teleconference
- April 25-26 2018 face-to-face meeting (April 10 teleconference cancelled)
- May 8 2018 teleconference
- June 12 2018 teleconference

A question was asked on the location of the fall face-to-face meeting.

All teleconference meetings begin at 1:00 Eastern Time.

9. Adjournment

**Record of Discussion
School Health Coordinators' Committee Meeting
March 13th, 2018**

Co-Chairs: Sterling Carruthers and Pat Martz (AB)

Participants:

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Anna Grumbly Naomi Shanks	SK
Jennifer Wood Stephen Howell	MB
Carol Ann Cotter Ellen Coady	NL
Shara Bernstein	NU
Elaine Stewart	NT
Ian Parker	YK
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Scott Beddall	BC
Jennifer Munro-Galloway	ON
Marlien McKay	NB
Sterling Carruthers	PE
Steve Machat Kari Barkhouse	NS
Daman Dhillon	NU
Liza Manolis	YK
Jennifer Shorthall	PHAC

Record of Discussion

1. Welcome and Roll Call

Pat welcomed all to the call.

2. Review and Approval of Agenda

The agenda was approved as written.

3. Approval of Record of Discussion from February 13th, 2018 teleconference

The Record of Discussion from February 13th, 2018 teleconference was approved without change.

4. Update from Secretariat

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

1) SHCC Face-to-Face Meeting: The agenda is almost finalized and will feature the following: a tour of the National Centre for Truth and Reconciliation, and presentations by Kevin Lamoureux and Niigaanwewidam Sinclair (Day One) and Jon McGavock and Rob Santos (Day Two).

2) Management Committee Face-to-Face Meeting: This will feature presentations by Jamie Gamble (Imprint Consulting) on Developmental Evaluation, Alex McKay from SIECCAN, and Charlene Bearhead on Indigenous well-being. An invitation has been sent to Quebec to have a representative from the Department of Health attend as an observer.

5. NB Community Profiles: How Student Wellness Survey Supports Schools and Community Profiles - Michelina Mancuso

Katherine introduced guest Michelina Mancuso, Executive Director of Performance Measurement for the New Brunswick Health Council. Michelina's slide deck was shared with the School Health Coordinators prior to the call.

The New Brunswick Health Council partnered with New Brunswick's Ministry of Education for this project and the data was aligned with New Brunswick's 10-year education plans (one plan for the Anglophone sector and one for the Francophone sector).

The New Brunswick Health Council worked with Statistics Canada and other groups to populate the information into the 33 community profiles and empower individuals with information about their region. The Council has worked with communities to show that working on protective factors is more beneficial and cost-effective than responding to risk factors.

Using this model allowed provinces to highlight changes in areas such as resilience at the community level, as well as highlighting areas of concern by respective populations (ie-

Indigenous, LGBTQ, students experiencing food insecurities, students with special needs).

Discussion:

- A number of School Health Coordinators said they would be contacting Michelina with jurisdiction-specific questions.
- The most striking finding was that a comprehensive approach looking at mental fitness needs using self-determination components showed impacts at the school level- less absenteeism, better school connectedness- and also at the family level.
- Yukon is trying to link HBSC with the [40 developmental assets](#) model, in making connections of protective and risk factors with assets
 - Michelina indicated that this is possible to do
- Some questions looked for ways to connect jurisdictional surveys and use of purchased school-based programs such as [Our School](#) with urban-rural or cultural contexts.

6. Annual Report 2018

Susan has reviewed last year's submissions has updated the criteria for the upcoming Annual Report Submissions. Criteria, guidelines and pertinent timeframes (deadlines, etc) will be forwarded to the jurisdictions.

Craig will facilitate the Annual Report process for this upcoming year.

The jurisdictions were reminded of the importance of adhering to submission deadlines.

7. Emerging Trends and Opportunities

Manitoba:

Concussion legislation will soon be passed for all school divisions in the province. Each school division will be required to have concussion protocol for all School Sport and Physical Education related activities.

Newfoundland:

The jurisdiction is starting the process of implementing several action items from their two major reports.

Healthy Schools Teams are currently working on SEL initiatives.

Yukon:

Working with the last couple of data collection sites for the HBSC.

There has been some push-back from All-Genders Yukon in regards to their sexual health

teaching resource. They are currently working to make this as inclusive as possible.

8. Review of Action Items

The action items table was reviewed.

9. Next Meetings

- April 25-26 2018 face-to-face meeting (no April 10 teleconference)
- May 8 2018 teleconference
- June 12 2018 teleconference
- July 10 2018 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

10. Adjournment

Record of Discussion

**School Health Coordinators' Committee Meeting
Winnipeg, Manitoba
April 25th – 26th, 2018**

Co-Chairs: Sterling Carruthers (PE) and Pat Martz (AB)

Participants:

Representative	Jurisdiction
Christie Docking	BC
Pat Martz	AB
Anna Grumbly	SK
Jennifer Wood Stephen Howell	MB
Marlien McKay	NB
Sterling Carruthers	PE
Jaime Collins	NL
Shara Bernstein	NU
Elaine Stewart	NT
Ian Parker	YT
Matthew Enticknap	PHAC
Secretariat	
Katherine Kelly	Executive Director
Susan Hornby	Senior Advisor
Craig Watson	Research Analyst
Regrets	
Jennifer Munro-Galloway	ON
Kari Barkhouse	NS

Record of Discussion

1. Welcome, Acknowledgement, and Introductions

Sterling welcomed all to the meeting and read the acknowledgment to the land. Everyone introduced themselves and gave a brief overview of their respective work roles. It was noted that Ontario's absence from the meetings was a result of the pending election call in the province.

2. Review and Approval of:

- **Agenda**
The agenda was approved as written.
- **March 12th, 2018 Record of Discussion**
The Record of Discussion from the March 12th, 2018 teleconference was approved as written with modifications from Marlien regarding the New Brunswick Health Council and the NB Community Profiles piece.

3. Review of Action Items

The Action Items Table was reviewed and updated.

Annual Report Committee- Sterling, Ian and Pat volunteered to serve on this committee.

Environmental Scan- There was a request last year to have a scan of mental health school-based activities, programs, and approaches. Capturing all such programs may prove cumbersome. It was suggested that the scan cover those that offer early phase intervention with ways of framing them more holistically.

<p>Action: Susan send out a request to complete a scan of mental health school-based activities, programs, approaches that feature early phase intervention.</p>

Cannabis Legalization Work Plan- Sterling will contact School Health Coordinators for possible Ministry of Education plans, in advance of cannabis legalization, to review curriculum outcomes, policies, and teacher professional development items, in addition to other pieces.

Action: Secretariat will compile SHCC responses and post on the private side of the JCSH website.



4. Update from Secretariat

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

A. Standing Senate Committee on Cannabis (Bill C-45)

Katherine was called to be a witness to the Standing Senate Committee on Cannabis (Bill C-45) on behalf of the JCSH (April 19th in Ottawa).

Action: Katherine will forward the presentation speaking points to the SHCC.

B. FPT Working Group on Concussion

Katherine updated the group on the results from the recent “Return to Learn” pilot project done by Parachute Canada in New Brunswick and PEI schools.

The FPT Working Group is currently focused on next steps for engaging with the Education sector and Katherine asked the SHCC what they felt should be the next steps/approach in regards to a roll out within the Education sector.

Discussion:

- Concussion work and related policy should be framed around a mental health perspective.
- Concussion work and policy is jurisdiction specific and policy change will be considered individually. The FPT Working Group must approach the jurisdictions with the “Ask”- not the other way around.
- There will be new concussion legislation coming in Manitoba in the spring and schools will be required to have specific concussion protocols in place. This will have implications for educators and administrators and their awareness of concussion occurrences on school grounds through play, and the impact on school performance. Return to Learn and Return to Play protocols will be standardized.
- Ontario has also put forth legislation requiring school boards to develop and maintain a policy on concussions

C. Alliance on Health Promoting Schools (“A Better Way Forward”)

Katherine updated the group on recent meetings with this group (led by PHE, OPHEA, DASH and EAS). During the last face-to-face meeting in Lake Louise, the group looked at developing a “Terms of Reference” and there will be a follow up meeting prior to the CASSA conference in

July.

Discussion:

Katherine was asked to keep JCSH members apprised on progress and next steps.

D. Youth Resilience Steering Committee

Katherine has been invited to be part of a steering committee that will help guide a new knowledge mobilization project that is looking to increase Canadian school stakeholders' engagement in adapting effective comprehensive positive youth development interventions. The project is being led by PHAC, in conjunction with Dr. Claire Crooks and Dr. Deborah Chiodo from Western University.

5. Jurisdictional Updates

Nunavut: As a key priority, there is a new focus on wellbeing and self-reliance of youth (that lends itself well to a CSH approach). Following the 2015 inclusive education review, two new full time positions were created- a SEL Coordinator and a Counseling position. Schools will create a policy framework on positive and safe school environments, and the framework will point them in a "wellness as essential to learning" direction. Departments of Education and Health are collaborating with a publishing company (Inhabit Media) to develop literacy picture books for young readers that will be used in schools to promote wellness. The books are culturally relevant, produced in all 4 languages and address varying themes- such as physical activity, oral health and SEL learning topics.

Yukon: Collaboration and partnership between the Ministries of Health and Education has never been stronger in Yukon and it is beginning to play out in very practical ways. The SHARE (Sexual Health and Relationship Education) resource is being embraced by teachers and is linked to comprehensive sexual health- including the need to address the instances of serious sexual assault. Ian Parker was recently afforded the opportunity to present to the YNTEP (Yukon Native Teacher Program) and indicated it was an excellent opportunity to address pre-service teachers and promote Comprehensive School Health.

NWT: In a joint effort between Ministries of Education and Health, there is a plan in place to hire 42 mental health counselors and 7 clinical supervisors over the next 4 years and place them in elementary and high schools across the NWT. Several of the smaller schools will be serviced and supported by the Northern Therapeutic Counseling Service (NTCS). The territory is currently working to implement new integrated services for children and youth with the support of Dr. Bill Morrison and Dr. Patti Peterson from University of New Brunswick. The new health and wellness curriculum is focused on competency-based outcomes and an understanding of health complexities within their own communities.



Pan-Canadian

Joint Consortium for School Health

Governments Working Across the Health and Education Sectors

○

NL: The Premier's Task Force on Improving Educational Outcomes report includes a pilot project in 40 schools to begin this fall that will place reading specialists, resource teachers and instructional assistants in the schools. A new interdepartmental committee has been formed to address cannabis legalization. Work is currently underway in the province to update the School Food Guidelines.

NB: New Brunswick has been working concertedly to strengthen the relationship between Health and Education Ministries. Education intends to send two senior level representatives to the next Management Committee meeting. A renewed healthy eating policy will soon be released by the province. There has been a significant focus on data and indicators (working with school districts and leveraging the New Brunswick Health Council) - linking these indicators with the Education Plan for the province.

PE: Preparation for the legalization cannabis is currently a priority area within education. In an effort to address mental health literacy training, 30 teachers were trained by Dr. Stan Kutcher on his "Go To Teacher Training" resource. Student Well Being Teams are currently being integrated into PEI families of school. PEI's Department of Agriculture and Fisheries has funded the Public Schools Branch to implement a food initiative to improve school lunch choices using locally sourced food.

MB: Healthy Child Manitoba just released the Grade 5 mental health census and there are plans to do a Grade 8 follow-up to determine the status of mental health. A mental health and addictions strategy is being release. A civil service transformation strategy is underway which includes work on reconciliation. The response to the HBSC survey has been very positive. Two schools have been accepted to be part of the Apple Schools pilot. Concussion legislation is expected to pass in the spring session and schools will be given assistance in developing concussion protocols. A diversity consultant will be leading a session this summer on a transgender student strategy.

SK: Education is currently renewing the Caring and Respectful Schools framework using a CSCH approach. As a result of the school shooting in La Loche, crisis and emergency response guidelines are being developed. A gender diversity portal will roll-out in the Fall with several modules. In anticipation of the legalization of cannabis, public education and harm reduction strategies are being rolled out. The children's advocate released a study indicating that First Nations and Metis graduation projections will not be met. The Nourishing Minds document is currently being reviewed.

BC: Ministry of Education will be holding a provincial student health conference. Superintendents are looking to invite mental health counselors. Key speakers will be Drs. Stan Kutcher, Bill Morrison and Patti Peterson. SOGI (Sexual Orientation and Gender Identity). SOGI 123 (www.sogi.education.org) has been well received. The Auditor General is currently

reviewing how Education and Health are working together in regards to physical activity and healthy eating, with report recommendations due out in May.

AB: A review of K-4 curriculum review has been submitted to the Minister's office. Regional collaborative service delivery in schools has had a budget increase. Education has piloted a food and nutrition program and it has been widened to all school districts. There has been a budget increase for new playground grant. There has been a budget increase for Alberta Health Services mental health capacity building grants for schools. Alberta Health Services has the lead on developing messaging for cannabis, essentially this information will be added to the drugsafe.ca site as the central hub for health information related to cannabis (health effects, lower-risk use).

PHAC: Planning for the legalization of cannabis has been a significant focus. Responses from the SHCC to the UN request on bullying has been very much appreciated. PHAC is now working with the Students Commission on the Rights of the Child. Recruitment for HBSC has gone very well and Suzy Wong (current analyst on the HBSC file) would like to determine how jurisdictions use the HSBC data. Autism Spectrum Disorder prevalence estimates have just been released with 1 in 6 youth in Canada being diagnosed. PHAC is looking to gather more data from P/Ts. The RCMP has been active with the youth engagement committee addressing issues on cannabis. A Youth Ambassadors Campaign addressing cannabis issues will be launched over the summer.

Susan noted that a Management Committee member suggested that it might be beneficial for Management Committee members and School Health Coordinators to prepare written jurisdictional updates (approximately a paragraph in length), in an effort to ensure that these pieces are being accurately captured.

6. Developmental Evaluation

Katherine and Susan updated the group on the developmental evaluation process and what next steps might be. Jamie Gamble presented at the most recent Management Committee meeting and his slides were presented and reviewed by the SHCC. Susan reviewed the draft of a collaboration rubric with the group.

Action: Susan to send out the draft of the collaboration rubric to the SHCs prior to the next SHCC teleconference.

7. Research Agenda

The group further explored ideas related to a coordinated research strategy and reviewed the documents that Craig has compiled. The documents are based on feedback from the SHCs, highlighting what they view as research priorities, as well as what research around CSH currently exists in each jurisdiction. Suggestions on potential researchers/research partners respective to each jurisdiction is also highlighted in the documents.

Discussion:

- The research/research agenda must be practice and policy relevant.
- A key component is the ability to influence the funders (CIHR, SSHRC, etc) and explore their priorities.
- Connect with researchers to determine if their work would fit with current research priorities

8. National Centre for Truth and Reconciliation (NCTR) (Kevin Lamoureux and Dr. Niigaan Sinclair)

School Health Coordinators met with Kevin Lamoureux and Dr. Niigaan Sinclair at the National Centre for Truth and Reconciliation in order to more deeply explore the Calls to Action using United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) as the foundational document. Kevin advised that, as stated in the 46th Call to Action, UNDRIP is the bare minimum as a foundation for reconciliation.

Among their points are the following:

- The [7 Sacred Teachings](#) is the governing structure for the NCTR
- A key requirement for reconciliation is to change school culture
- How we value knowledge from Indigenous peoples is founded on relationship. Intellectual Indigenous traditions have not been provided the recognition that is needed. It is quite likely that Indigenous knowledge will save us all: consider teachings on soil and water.
- Living responsibly requires all to recognize we live on treaty lands, and being good relatives.
- The pin of the NCTR shows the flame as the spirit of reconciliation. What do we bring to the flame? The depiction of two birds on the pin shows that reconciliation is a mutual process. It is not the responsibility of Indigenous peoples to carry reconciliation; it is the responsibility of all. The small flame represents the spirit of children: all children, but also the children who did not make it home from residential schools.
- Among the archival work of NCTR is to track through grounds looking for human remains: children lost whose remains were never recovered.
- If reconciliation is done in the right way, all children will find greater sense of belonging, identity, relationship, inclusion.

Discussion

- JCSH wants to move towards action, but is there a risk when non-Indigenous people take action? Does this contribute to continuation of colonialism?
 - Kevin: Reconciliation is activity for all, and in many ways non-Indigenous people should take the lead to reconsider colonial power structures. In these ways, privilege can empower to create change. Yet, non-Indigenous people must also

- know when to step aside for the voice of Indigenous people to speak, guide, and educate.
- It is best to use the voices of local Indigenous people when educating on reconciliation
 - As JCSH, we struggle with next actions. Yet, the CSH framework is already in place; look at the four components to express areas of the Calls to Action.
 - What is the best approach to working on the Calls to Action within the time constraints faced by all?
 - Kevin: go back to UNDRIP for guidance, especially Articles 13 and 24: start with languages, start with health services. What we create space for and what we allow is telling in this work. Health services are the bare minimum of equality. Language is identity.
 - Ensure you know [Section 35](#) of the Canadian Constitution – this includes medicines, being able to practice smudging, it goes to the fundamental sense of belonging.
 - We also must work towards improving education outcomes for children in care.
 - The CSH framework is about changing culture to improve school experience for all children, supportive environments; it links well with the Circle of Courage and the Social Determinants of Health.
 - It would be an important step for JCSH to create a Position Statement of who we are and what we do in relationship to all provinces and territories, looking at CSH and embedding it with the Circle of Courage and UNDRIP principles. The Position Statement could create space for schools to frame culture as foundation, or fundamental to school values. It could begin with such: As a collective, this is what we know to be true:...
 - The following School Health Coordinators volunteered to be on this Advisory Committee: Jennifer Wood, Anna, Pat, Ian, Elaine, Shara, and Sterling.

Action: An SHCC Advisory Committee will begin a draft Position Statement.

Action: Katherine will set up a call with Kevin and two colleagues from NCTR to discuss next steps and develop an Indigenous module for the Positive Mental Health Toolkit.

9. Guest Presentation: “The Role of Settlers in Reconciliation” (Dr. Jon McGavock)

Katherine introduced Dr. John McGavock, Associate Professor, Department of Pediatrics and Child Health at the University of Manitoba. Dr. McGavock provided the group with a brief overview of his work at the University of Manitoba on chronic non-communicable diseases, including diabetes. Among his key statements are the following:

60% of the Indigenous youth with Type 2 Diabetes reside in houses with an annual income of less than \$15,000. “Settlers wouldn't be here if not for the Indigenous people who assisted, fed, and clothed them. And then we destroyed them.” Diabetes, health, education deficits in Indigenous youth are not the result of genetics, but of colonialism. Researchers tend to look at

problem areas, risk factors of individuals; where they should look are the strengths, through a positive or strengths-based lens.

Research funders are changing practice and calls for proposals to reflect the need for a changing lens: CIHR has embraced two eyed seeing. He called on everyone to embrace two lenses, Indigenous world view and settler world view.

Among his suggestions for School Health Coordinators are to bring treaty and Indigenous perspectives into their work and meetings:

- Review and be aware of the Indigenous Wellness Framework
- Bring in opening prayers, smudging ceremony, elder to group when meeting
- Use the Circle of Courage as a model of wellness
- He sees the 7 Sacred Teachings in schools he visits; he suggests that all seven teachings are relevant for JCSH and the School Health Coordinators' Committee
- Learn about Indigenous culture and practices in your community
- Say where you are from through treaty perspective

Discussion:

- If making commitment to embed Indigenous cultures in school communities, there is a need to know the treaty area, and to find elders and knowledge keepers and ask them how to embrace culture change in school.
- Jon was asked how this work has led to changes in himself: he said he had always believed that anything is possible if one just worked hard enough. Since exercise improves health, everyone just needs to exercise. He was not aware of the impact of trauma on individuals. He needed to confront and challenge his assumption that people just need to change behaviour. Addiction is grounded in trauma.
- How can we use Indigenous perspectives and teachings to address the stress that kids feel? Teaching self-regulation for kids is helpful. Stories heard from some elders - Laurentian U Echo website - cultural renewal for resilience. Finding who you are - could be culture, church, sport, art. A powerful part of the Circle of Courage is generosity. These are not taught in school, but if school is where you belong and kids do not see their lives and culture in those schools, why would you go to school? When kids are kicked out of class, they are removed from their group: this is not a supportive environment.
- Reframe conversations and lessons: For example, when Jon discusses physical activity needs of students, it is used as a source of resilience, a source of healing, social emotional wellness. Not weight loss.
- When asked how to navigate one's clumsiness about learning this way now, and not earlier in life, Jon responded that it is important to be uncomfortable, to stumble. Learn to listen. Be aware of the time it will take to move from racism and internalized assumptions to changes in attitudes, to relationship in togetherness.

- In the same light, responding to statements such as 'this isn't on me' requires behaviour change. We benefited and continue to benefit from that from the sense that 'this isn't my fault, I wasn't responsible'. Making change might mean giving up opportunities to speak in order to make space for others. Look at changing how we work to make space for Indigenous partners.

Action: Susan will send the SHCs the slide deck from Dr. McGavock's presentation.

Action: Susan will post all articles and books referenced in the presentation on the private side of the JCSH website.

10. Next Meetings

- A. Teleconferences 2018- second Tuesday at 1:00 PM Eastern
- B. Fall face to face

11. Wrap-up and Concluding Remarks

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

**Record of Discussion
School Health Coordinators' Committee Meeting
June 12th, 2018**

Co-Chairs: Pat Martz (AB), Sterling Carruthers (PE)

Participants:

BC	
AB	Pat Martz
SK	Anna Grumbly, Jocelyn MacLeod
MB	Jennifer Wood
ON	Jennifer Munro-Galloway
NB	Marlien McKay
PE	Sterling Carruthers
NS	Kari Barkhouse
NL	
NU	Shara Bernstein, Daman Dhillon
NT	Elaine Stewart
YT	Ian Parker, Liza Manolis
PHAC	Matthew Enticknap
Secretariat	Katherine Kelly, Susan Hornby, Craig Watson



Record of Discussion

1. Welcome and Roll Call

Sterling welcomed all to the call.

2. Review and Approval of Agenda

The agenda was approved as written.

3. Approval of Record of Discussion from April 25th and 26th 2018

The Record of Discussion from the April face-to-face meeting was approved without change.

4. Update from Secretariat

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

1) Youth Resilience Steering Committee

Katherine attended the first meeting of the Youth Resiliency Steering Committee. This committee has been tasked to help guide a new knowledge mobilization project that is looking to increase Canadian school stakeholders' engagement in adapting effective comprehensive positive youth development interventions. The project is being led by Dr. Claire Crooks and her associate Dr. Deborah Chiodo from Western University. Funding is provided by PHAC.

Action: Katherine to send meeting slides to the SHCC

2) Cannabis

OPHEA has been funded by PHAC to develop cannabis resources for schools and educators. The JCSH has been supportive of this initiative and will liaise with Chris Markham and his team to ensure that these tools and resources can be disseminated and used by all jurisdictions.

Action: Katherine to send OPHEA project outline to SHCC

3) Fall face-to-face meeting

The Secretariat recently had very productive discussions with Jamie Gamble regarding the Developmental Evaluation process. The Secretariat has concerted evaluation work planned for the next several months and this will be shared during the fall face-to-face meeting. The fall meeting will tentatively be held in late-November in Ottawa.

Action: Katherine to send out Doodle to the SHCC to determine potential meeting dates

5. HBSC Study (Guests- Dr. Will Pickett, Queen's University and Suzy Wong, PHAC)

A) Will Pickett provided an update on the HBSC recruitment phase and some of the challenges they have been working through. Overall, the number of completed questionnaires that have come back from across the country is approximately 23,000 with an additional 4,000 anticipated.

Country-wide, data collection is as follows:

Yukon- Data collection is complete, 2000 questionnaires have gone out

NWT- Data collection is close to complete, 3100 questionnaires have gone out

BC- Data collection ongoing, 1600 questionnaires have gone out. Will noted there is a currently significant survey burden/fatigue happening in BC and they have a contingency plan in place to address that for some school areas

AB- Data collection ongoing, 3800 questionnaires have gone out

SK- Saskatchewan has experienced some challenges in this survey round

MB- Data collection ongoing, 3600 questionnaires have gone out

ON- Data collection ongoing, 5400 questionnaires have gone out

QC- Data collection ongoing, 3200 questionnaires have gone out

NB- Data collection ongoing, 800 questionnaires have gone out

NS- Data collection complete, 3200 returns are being processed

PE- Data collection complete, 3200 returns being processed

NL- Data collection ongoing, 3200 questionnaires have gone out

Dr. Pickett noted that among the PT-specific challenges: Some fall data collection will occur, where school decisions to participate were made in April-May. This also occurred during the 2009 and 2013 collection years. The HBSC team was requested to eliminate recruitment of schools in Vancouver and Victoria in BC this year due to a number of other surveys underway. A fall data collection is possible in SK; contribution to the national, but not a provincial, sample is anticipated. A special data collection protocol is underway in NU and being submitted to NU research ethics and the Arctic College. NB is on target to participate in the national sample.

In terms of broader challenges for the HBSC:

There have been several regions where survey burden/fatigue has been a significant issue for the school jurisdictions. The HBSC team is working with colleagues, including those on other surveys to respect their needs and find a solution that supports all.

In an effort to obtain a subset for military veterans' children, there is an oversample of schools serving military families. The team will have new collaborators to work with the data, given the interest in this area.

Issues around licensing in NWT have been worked through, thanks to assistance from Elaine Stewart, the Aurora Institute, and others.

The HBSC is grateful to JCSH for support of this study. It has been a challenging year since the death of longtime national lead, Dr. John Freeman, but the team feels things are going well. They want to note they are very thankful for the excellent working relationship with the JCSH and each PT.

Timeframes for release of the national data is anticipated by mid-fall.

B) Suzy Wong (Senior Policy Analyst, PHAC) provided a review of her role as the PHAC lead on the HBSC. She understands use of HBSC data varies considerably among the PTs, and would like to discuss with each what's working and not working in their respective PTs. Suzy will send out an email and try and arrange times that work for all.

Discussion: Agreements for data use: PHAC will send out to PTs for signing.

In addition to survey burden that occurs throughout the country, there is an interest in considering if any other factors are in place that lead to greater resistance in some PTs than in others. Suzy will follow up with School Health Coordinators and keep the Secretariat informed on how this is going.

6. Annual Report 2018

Susan provided an update on the progress of the 2018 Annual Report. Currently, eight draft and/or approved jurisdictional submissions have been received with five still outstanding. Draft submissions are very welcome as we are able to review them and provide any suggested modifications or format changes. The request for photos is still being made; these add much to the look of the Annual Report.

The Annual Report Advisory Committee had a productive teleconference on June 5th. Discussion pieces are with committee members for their review and feedback. Some items may be able to be tweaked for this report, while other ideas will be used in the coming years.

Action: Outstanding draft reports must be submitted as soon as possible

7. Developmental Evaluation- Collaboration Rubric

Prior to the June teleconference, Susan sent out the draft collaboration rubric and asked that it be completed by the SHCC. This rubric is one of the key data collection pieces for the Developmental Evaluation and is intended to provide an opportunity for jurisdictions to reflect on their connection and collaboration between the health and education ministries, and also on the work on CSH within their jurisdiction. Feedback received was helpful yet minimal and Susan asked that the group please complete the rubric (for those who have yet to do so) and send it back.

Action: Susan to re-send the draft collaboration rubric to the SHCC

Action: SHCC to send completed collaboration rubric to Susan

8. CIM- Next Steps

Susan explained that the drafts of three documents based on the work to date of the Core Indicators Model of CSH and Student Achievement were sent to School Health Coordinators when the May teleconference was cancelled. There has been limited feedback, and this is helpful. However, further feedback is needed to inform actions moving forward with this important work.

9. Emerging Trends and Opportunities

ON: Jennifer Munro-Galloway reported that the transfer of power following the recent provincial election will take place June 29.

10. Review of Action Items Table

The action items table was reviewed.

Susan noted that there is one scan, on mental health work, that is current in the Action Items Table but interest in cannabis might suggest a scan on this issue, to be completed at this time. The suggestion was made to move forward with the cannabis scan at this time and work on the mental health resources scan next. No contrary suggestions were advanced.

Action: Susan to send out template for completion of an environmental scan on cannabis

11. Next Meetings

- July 10 2018 teleconference (Canceled)
- August 14 2018 teleconference
- September 11 2018 teleconference
- October 9 2018 teleconference

All teleconference meetings begin at 1:00 Eastern Time.

12. Adjournment



Record of Discussion
School Health Coordinators' Committee Meeting
 August 14th, 2018

Co-Chairs: Pat Martz (AB), Sterling Carruthers (PE)

Participants:

BC	Christie Docking
AB	Pat Martz
SK	Anna Grumbly, Jocelyn MacLeod
MB	Jennifer Wood, Stephen Howell
ON	Jenifer Munro-Galloway
NB	
PE	
NS	
NL	Jaime Collins
NU	Shara Bernstein
NT	Elaine Stewart
YT	Ian Parker, Liza Manolis
PHAC	Jennifer Shortall
Secretariat	Katherine Kelly, Susan Hornby, Craig Watson

Record of Discussion

1. Welcome and Roll Call

Pat welcomed all to the call.

2. Review and Approval of Agenda

The agenda was approved as written.

3. Approval of Record of Discussion from the June 12 2018 teleconference

The Record of Discussion from the June teleconference was approved without change.

4. Secretariat Update

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

1) Fall face-to-face SHCC Meeting

The November 28th & 29th face-to-face SHCC meeting will be held at the Lord Elgin in Ottawa. The meeting agenda is currently being fleshed out, with a concerted focus being placed on the Developmental Evaluation process. Jamie Gamble will conduct a workshop with a focus group to further our work on the Developmental Evaluation.

2) Statement on Indigenous Perspectives

The committee working on a Statement on Indigenous Perspectives and Comprehensive School Health has developed a draft. Discussion on the Statement will be held with the full SHCC prior to finalization of the document.

5. Cannabis Education Resources – Greg Sam (Projects Leader, Ophea)

Greg Sam provided the SHCC with an update on the cannabis education resources for schools and educators that they are currently developing (with funding from PHAC). Work began on this project this past spring, 2018, with the project going through a thorough program development approach consisting of: research and needs assessment, concept testing, development and review, pilot testing, launch, and monitoring and evaluation. This will be an 8-12 month process as it relates to this type of approach and cycle. Ophea determined that this would need to be a phased approach, in order to allow for adequate timelines that would assure they were providing in-depth resources for the targeted audience of educators. In the interim, with legalization quickly approaching in October, Ophea looked to provide a more simplified approach in terms of providing content to their educator audience. The initial few months would be a research and needs assessment- an internal review, literature review, and an environmental scan of existing web materials and content to determine what cannabis resources and supports educators need. This allowed Ophea to connect with key partners and work together in creating knowledge translation supports and outputs. Partners included: CAMH, School Mental Health Assist, Ontario School Health Management in Public Health Network, Canadian Students for Sensible Drug Policy, PHE Canada, Ontario Public Health Unit Collaboration on Cannabis, and the Canadian Centre on

Substance Use and Addiction. This summer, Ophea will work with CAMH on the knowledge translation component, using the knowledge-to-action model and from there a simplified resource page based on the current conversations with partners and key findings from the research and needs assessment. The resource page will be housed on Ophea's teaching tools website. This resource will be available in the weeks prior to legalization.

Discussion:

-What Indigenous partners has Ophea been working with in regards to these resources?

Ophea is not working with Indigenous partners at this time on this project; however, once the simplified resource page is established, they will be forming a partner advisory committee.

-How will Ophea navigate the different P/Ts' needs and take on the resources (curriculum changes, ages, etc)?

Ophea is still targeting its primary audience of principals and educators in these early months, which allows them to keep their ear to the ground and address key questions that emerge.

-How will Ophea address secondary audiences (outside of the targeted educators), such as parents, parents groups and students (i.e. - audiences who may not want the information mediated by a teacher voice, and approach the educators seeking resources for their own reference)?

The target for the teaching tools are the educators and, based on user data, Ophea doesn't typically direct materials to students themselves (although students are open and welcome to access the site). Ophea has committed to looking at secondary audience resources.

-Policy development: In developing policy guidelines for cannabis, given that there can be medically indicated cannabis needs for students and staff, is there exemplary policy that jurisdictions can refer their schools to as they develop their own?

Currently, there are no specifics as to exemplary policy or content that they would showcase. The teaching tools site is currently geared primarily towards the target educator audience. It comprises resources that would support them directly in the classroom and typically they do not branch out beyond that scope. The priority is to address the granular on-the-ground needs that an educator would require.

-What are the projected timelines for the release of resources?

The simplified resource page is scheduled to be available as of the first week of October.

-Is Ophea aligned with Health Canada or PHAC on the cannabis legislation that they have been working on?

There is currently no direct alignment with Health Canada and PHAC; however, Greg will share with colleagues information on the federal work underway on cannabis.

6. Developmental Evaluation

Susan provided an update on the progress of the Developmental Evaluation process, and more specifically, the importance of the collaboration rubric as one of the key data collection pieces. The collaboration rubric provides an opportunity for jurisdictions to not only reflect on their historical connection as members of the JCSH and CSH work within their jurisdiction, but also enables jurisdictions to determine what they view as optimal involvement as it relates to their respective contexts- thereby helping to guide potential new directions.

7. Annual Report 2018

Susan provided an update on the progress of the 2018 Annual report. The format of the report has been modified for this year. More specifically, the front section of the report has been pared down slightly in an effort to remove any overlap. The Secretariat is also exploring ways to make the design and flow of the report more inviting and easier to navigate. In addition, rather than asking for and using photo submissions from the jurisdictions this year, the idea of using stock photos is being explored, in an effort to support the visual of the annual report, improve the overall quality of the images, as well as tasking the SHCC to a lesser degree. Photos that have already been submitted by jurisdictions are very much appreciated and will certainly be used where applicable.

8. CIM – Next steps

Susan thanked all those who have provided feedback pertaining to the draft CIM guides. Susan noted that the CIM guides are another key piece in highlighting a clean and essential link between the health and education sectors within our schools, and support the work of educators and health professionals.

9. Emerging Trends and Opportunities

PHAC

PHAC's Youth Policy & Partnerships Unit met recently with colleagues from Health Canada who are working on the cannabis file. HC is currently working with an agency called Inventa to develop and implement an experimental events tour ("Pursue your Passion") aimed at educating youth and young adults about the health effects of cannabis, and to encourage them to seek out other outlets to manage the stresses of life. These "interactive activity zones" are being brought to music festivals, fairs, sporting events, and other celebrations across the country, and include rock climbing walls, a digital graffiti wall and digital technology that shows how cannabis affects the brain. "Ambassadors" at the events will speak with young people about positive and healthy lifestyle choices. Health Canada has approached PHAC with the possibility of bringing these events into the schools and are looking to possibly align with the JCSH to do so.

Action: Jennifer to verify whether there would be a cost associated in bringing this to schools

Action: Jennifer to verify whether they are planning to bring the tour to remote locations

NT

There is now a joint initiative between education and health to increase the capacity of counselling staff to respond to the needs at the school level, both for students and staff. There is a new division coordinator that is focusing solely on the supports for mental health activities in schools.

NL

An education action plan that has come from the “Way Forward” document has just been released with CSH highlighted throughout the document.

ON

Ontario remains in a period of transition post-election. There will be a public consultation this fall to address the sex education curriculum.

MB

Manitoba has recently had a cabinet shuffle. Former Minister of Health, Kelvin Goertzen, has moved to Education and will oversee the K-12 education review, which will begin this fall. The new Minister of Health is the former Minister of Finance, Cameron Friesen.

BC

Ministries of Education and Health have co-presented to a Select Standing Committee on Public Accounts in response to the release of the audit report- [“Promoting Healthy Eating and Physical Activity in K-12: An Independent Audit.”](#) The audit report has been released and is publicly available.

10. Review of Action Items

The Action Items table was reviewed.

A) Environmental Scan on Cannabis

Susan updated the SHCC on the status of the environmental scan on Cannabis that was sent out in June. National and research resource pieces continue to be added to the scan and the SHCC were encouraged to submit relevant pieces to the scan as they see fit.

B) Annual Report Advisory Committee

One of the key recommendations from the Annual Report Advisory Committee was to connect research to some of the initiatives outlined in the jurisdictional reports that have been submitted. The intent is to highlight the work being done in the jurisdictions and connect them to best or emerging practices, and current research on health and well-being and achievement of students.



11. Next Meetings

- September 11 2018 teleconference
- October 9 2018 teleconference
- November 13 2018 teleconference
- November 28-29 2018 face-to-face meeting

All teleconference meetings begin at 1:00 Eastern Time.

12. Adjournment

**Record of Discussion
School Health Coordinators' Committee Meeting
September 11th, 2018**

Co-Chairs: Sterling Carruthers (PE), Pat Martz (AB)

Participants:

BC	Christie Docking
AB	Pat Martz
SK	Anna Grumbly, Jocelyn MacLeod, Naomi Shanks
MB	Jennifer Wood
ON	Jennifer Munro-Galloway
NB	Marlien McKay
PE	Sterling Carruthers
NS	Natalie Bakody
NL	
NU	
NT	
YT	Ian Parker, Liza Manolis
PHAC	Jennifer Shortall
Secretariat	Katherine Kelly, Susan Hornby, Craig Watson

Record of Discussion

1. Welcome and Roll Call

Pat/Sterling welcomed all to the call.

2. Review and Approval of Agenda

The agenda was approved as written.

3. Approval of Record of Discussion from August 14 2018 teleconference

The record of discussion from the August teleconference was approved without change.

4. Secretariat Update

The written Secretariat update was presented.

5. Cannabis

A) PHAC Youth Resiliency Project- Dr. Claire Crooks (Centre for School Mental Health- UWO)

Dr. Claire Crooks provided the SHCC with an update on the PHAC Youth Resiliency Project. This project was initiated by PHAC in light of upcoming legalization of recreational cannabis in Canada and the existing high prevalence of cannabis use among Canadian youth. The project is intended to ensure that educators are well versed and knowledgeable on positive youth development (student attitudes, social skills, self-management skills, etc), rather than being solely focused on cannabis-specific prevention programs and “knowledge-only” interventions. At the outset, the project engaged a national steering committee (the JCSH Executive Director is a member of the Steering Committee), conducted key stakeholder interviews and conducted a thorough literature review. This input led to the establishment of key messages that can be used effectively to help reinforce views on cannabis use and prevention among youth and young adults. Three key messages were developed, and for each of the key messages, issue briefs are being developed and will contain a short summary of the key research findings for educators. These pieces are being developed in an open-sourced manner to allow partners (ie- the JCSH) the opportunity to co-brand them and adapt them into their own respective communication. A workshop/focus group has been conducted with educators and the pieces will also be sent to national steering committee members for input and feedback, with the intent of having the resources available to share this fall.

B) “Pursue Your Passion”- Mélanie Kuiack, Health Canada

Mélanie Kuiack provided the SHCC with an update on the [“Pursue Your Passion Tour”](#) as a follow up to the slide deck/presentation that was provided to the SHCC prior to the teleconference. Health Canada contracted Inventa to develop an approach aimed at reaching youth and young adults (age range of 13-24), educating them about the health effects of cannabis, and encouraging them to develop the skills necessary to help them make positive decisions for their health and safety. The tour launched in July of this year and made stops across the country at

music festivals, fairs, sporting events, and other celebrations. Provinces included: NB, NL, NS, QC, ON, SK, AB and BC. Currently, the tour is making stops at university and college campuses in several provinces across the country. The tour engages youth through onsite “interactive activity zones” where they are encouraged, through participation at several different creative, physical, and digital stations, to make healthy lifestyle choices. “Ambassadors” at the exhibit engage youth in conversations about the health impacts of cannabis. To date, the tour has had over 52,000 “engagements” (ie- tour “Ambassadors” engaged in conversation with a participant over 52,000 times onsite since July). Currently, Health Canada is looking to tailor the tour to high schools across the country. A proposed schedule with potential dates (between October 2018 and March 2019) has been put together that would allow for the tour to visit each province and territory. In advance of the proposed schedule, a communication package and informational video is currently being developed for schools, school administrators, and local health units that outlines pertinent details of the tour. The aim is to have the communications and promotional material ready for the last week of September. Health Canada has reached out to government communications representatives in each province and territory and is now looking to align with the JCSH to more specifically identify and prioritize school boards and potential schools/venues interested in hosting the tour.

6. Statement on Indigenous Perspectives and Comprehensive School Health

Jennifer Wood updated the SHCC on the progress of the draft “Statement on Indigenous Perspectives” that the working group has been developing. More discussion on the Statement will be held with SHCC at the November face-to-face meeting.

7. Annual Report 2018

Susan provided an update on the progress of the 2018 Annual Report. Several jurisdictions have been in contact with Susan regarding the Annual Report Advisory Committee’s recommendation for this year’s report to have a lead-off section in each submission highlighting the range of initiatives involving CSH in the country (with idea to use specific highlights in the executive summary). An accompanying recommendation from the Advisory Committee was to connect research to some of the initiatives outlined in the jurisdictional reports, to better show the connection between health, well-being, and student success and achievement. The graphics and formatting for this year’s report will be completed in-house with the help of My Linh, as the graphic designer that has worked on the report for the past several years is unable to do so this year, due to prior commitments.

8. Emerging Trends and Opportunities

PHAC

The Office of Nutrition Policy and Promotion will be providing an update to the JCSH on the revisions to Canada’s Food Guide, as well as the marketing of unhealthy food to children in schools. Health Canada is very grateful to the JCSH for all the contribution and support in this work. In addition, The Office of Nutrition Policy and Promotion has reached out to the Canadian Teachers’ Federation with the aim of contacting teachers regarding the revision of Canada’s Food

Guide, and exploring the potential of having teachers participate in the monitoring of marketing of unhealthy food to children in schools.

9. Review of Action Items

The Action Items table was reviewed.

10. Next Meetings

- October 9 2018 teleconference
- November 13 2018 teleconference
- November 28-29 2018 face-to-face meeting
- December 11 2018 teleconference (may be cancelled due to proximity to face-to-face meeting)

All teleconference meetings begin at 1:00 Eastern Time.

11. Adjournment

**Record of Discussion
School Health Coordinators' Committee Meeting
October 9th, 2018**

Co-Chairs: Sterling Carruthers (PE), Pat Martz (AB)

Participants:

Representative	Jurisdiction
BC	Christie Docking
AB	Pat Martz
SK	Anna Grumbly, Jocelyn MacLeod, Trisha Wolbaum
MB	Jennifer Wood
ON	Jennifer Munro-Galloway
NB	Beth Morrison
PE	Sterling Carruthers
NS	Kari Barkhouse
NL	Ellen Coady
NU	Shara Bernstein
NT	Dene McDonald
YT	Ian Parker
PHAC	Jennifer Shortall
Secretariat	Katherine Kelly, Susan Hornby, Craig Watson

Record of Discussion

1. Welcome and Roll Call

Sterling 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 11th, 2018 teleconference

The record of discussion from the September teleconference was approved without change.

4. Secretariat Update

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

1) Partnership Symposium on Cannabis Education and Awareness

Katherine attended this symposium in Ottawa led by PHAC and Health Canada. This symposium provided an overview of the public health approach to legislation and regulation of cannabis, with a specific focus on community based projects for youth and Indigenous populations.

2) Cannabis Education Resources (Ophea)

The first phase of this project is now complete and the cannabis education resources for schools and educators are now available.

Action: Katherine to send out the link to resources to the SHCC

5. HBSC Study Update (Dr. Wendy Craig & Dr. Will Pickett, Queen's University)

Dr. Wendy Craig and Dr. Will Pickett provided an update on the HBSC study. This has been a challenging survey round; however, data collection has gone well in most jurisdictions. The HBSC team is grateful to JCSH for their ongoing support of the study. The HBSC team has been trying to obtain an oversample for military veterans' children. The HBSC team was requested to eliminate recruitment of schools in many of the major urban areas of BC (Vancouver and Victoria) this year due to a number of other surveys underway. A number of school boards in BC have been approached for a fall data collection and response at the school board level has been good. Will is in the process of contacting school district administrators in Saskatchewan in the hopes that a small sample could be secured to contribute to the national sample. The HBSC team have put together a modified plan to collect data in Nunavut for this survey round. This modified plan is a more community-based, personal approach, and is respectful of the new guidelines for working with highly indigenous populations. This is now at the approval stage with the territorial government. It is anticipated that it will be December before they begin collecting data in a small number of schools.

Discussion:

-Survey burden has been a significant challenge for schools in Saskatchewan. Saskatchewan primarily uses the “Our School” survey, and schools are able to access the data right away about their school/school division as a whole. The SAYCW Youth Health Survey is also available in the province, and funding opportunities are provided with this particular survey. School divisions have been encouraged to administer the SAYCW survey on opposing cycles to the HBSC.

-The jurisdictional report process will begin in November, and reports will be delivered one at a time, based on completions.

-Wendy reminded the SHCC that should they want to see changes made to the template used for the last report, the HBSC team would be happy to discuss and accommodate to ensure that jurisdictions are getting what they want. Katherine relayed to Wendy that there is a JCSH HBSC Research Advisory Committee in place to support the HBSC team. This RAC can help in regards to report completion, themes and topic areas.

Action: Katherine to send out a Doodle poll and set up a JCSH HBSC RAC call

6. Annual Report 2018

Katherine provided an overview of the acceptance process for the annual report. The report must be accepted by both health and education tables – i.e. on the Education side, by the Advisory Committee of Deputy Ministers of Education (ACDME) and on the Health side by the FPT Conference of Deputy Ministers of Health (CDM). An FPT Deputy Ministers of Health teleconference will take place in November or early December and the ACDME will meet in December. The process of having the JCSH annual report added to the respective agendas is underway.

Susan advised that the draft report is near completion, and will be sent to the SHCC as well as the Management Committee shortly for final review and feedback.

7. Environmental Scans

Susan will send out the latest version of the current environmental scan on cannabis to the SHCC. Jurisdictions are encouraged and welcome to submit further updates and relevant pieces to the scan as they see fit. The scan will be updated as submissions are received. The SHCC discussed possibilities for the next environmental scan, including school-based mental health programs/activities and approaches, sexual health/sexual health curriculum/gender equity, or possibly a broadened version of the cannabis scan to include a mental health research piece.

8. Emerging Trends and Opportunities

NL

A draft foundational document on SEL has been developed as a result of the work coming out of [Pan-Canadian Joint Consortium for School Health](http://www.jcsh-cces.ca)

the “Towards Recovery” report and the “Premier’s Task Force on Improving Educational Outcomes.” A platform for online professional learning for teachers has been developed.

NS

A new initiative called project [“Uplift”](#) has been launched. This comes out of the work of Dr. Sara Kirk (Dalhousie University), and aims to work with Nova Scotia’s Health Promoting Schools infrastructure to address critical health issues among Nova Scotia youth. Nova Scotia will also be piloting a new model for youth health centers in four high schools. The pilot project will see stakeholders help develop a consistent approach to youth health centers across the province.

PE

Sterling reminded the SHCC that the deadline for accessing the Drug Free Kids Canada “Cannabis Talk Kit” for free is approaching. Sterling has compiled a cannabis resource repository to support principals, teachers, and school based clinicians.

Action: Susan will add the repository to the environmental scan on cannabis

NB

A new school concussion policy is currently being developed. Resources and supports in regards to the new enhanced public school nutrition policy are being provided to schools.

ON

To prepare the education sector for the legalization of recreational cannabis, the Ministry of Education has developed resources for parents/guardians, youth, and educators. “Rowan's Law Day” is commemorated on the last Wednesday in September to raise awareness about concussions and concussion safety. The first Rowan’s Law Day was September 26, 2018. As of September 1, 2018, schools are expected to have policies in place to support students with prevalent medical conditions (anaphylaxis, asthma, diabetes, and epilepsy). To support school boards with developing and implementing their policies, the Ministry of Education worked with health-based organizations to provide tools and resources, including new resources for parents/guardians.

Action: Jennifer will share pertinent links to the above updates with the SHCC

MB

The Winnipeg Regional Health Authority’s Mental Health Promotion team has been working with schools on the Healthy School Planner and the Positive Mental Health Toolkit in an effort to help schools plan and assess. A tangible guide for using the PMH Toolkit is being developed. Manitoba has recently met with the McConnell Foundation and are looking to other jurisdictions for input on their interactions to date with the McConnell Foundation and the WellAhead project.

Action: A further call will be set up with interested jurisdictions to discuss ministries’ experiences to date with McConnell’s WellAhead project

SK

Considerations and questions have been sent out to school divisions in an effort to support them as they prepare for their own local school division/school policy related to cannabis.

Saskatchewan's Comprehensive School Community Health e-newsletter will also focus on cannabis related issues and will be available by the end of October.

AB

Three online resources related to cannabis have been developed for educators. A two year grant (2018-2020) has been given to Alberta's Injury Prevention Centre for the revisions to the Alberta Safety Guidelines for Physical Activity in Schools (2013). These revised guidelines will be inclusive of concussion guidelines/protocol and include the Safety Guidelines for Secondary Interschool Athletics in Alberta (therefore, an all in one document versus multiple documents). This work is a tri-ministry collaboration between Health, Education, Culture & Tourism.

BC

BC's Ministry of Education is expanding their ERASE strategy and it will broaden to include positive mental health, anti-violence, online safety, substance use, and SOGI. The Ministry of Mental Health and Addictions is working to release their provincial mental health strategy, with a focus on child and youth mental health. SOGI continues to be supported provincially by the Ministry of Education and has become an election issue for the upcoming superintendents' election. SOGI 1 2 3 is still viewed as a success in the province, with 57 of the 60 school districts participating. "Get Cannabis Clarity" website is being developed for youth, parents, and allies. School information guides are being developed in partnership with Canadian Institute for Substance Use Research. "Action Schools! BC" is being redeveloped, with the focus shifting to developing physical literacy, increasing physical activity, while building connections to positive mental health. Type 1 Diabetes student safety framework is being updated.

NU

Two new SEL programs for youth are being launched, with a specific focus on emotional regulation, relaxation, and mindfulness. These are evidence-based programs that have been adapted by an Inuit advisory group to ensure they are cultural/trauma-informed models. The resources will be launched this fall in all four official languages. The Department of Health, in collaboration with the Department of Education, ran a large scale hearing screening project last year in six communities (at the elementary school level).

NWT

A multi-department working group on cannabis has been formed. Health and Social Services is currently working on a cannabis education poster series project. Through a joint partnership between Health and Social Services and Education, Culture and Employment, a new program has been developed, with the aim of strengthening the counseling services provided by the Child and Youth Care Counselors within schools and communities. The program will roll out over the next three years, and will start in two regions this year.

YT

YT is looking to have their extended HBSC report finalized by February or March of 2019. Cannabis lesson plans have been developed and have been received favorably by teachers. The “Pursue Your Passion Tour” will arrive in YT in January or February. Teachers in YT are also now requesting messaging and resources on vaping. YT is currently looking to develop one resource that would contain 3 separate modules on tobacco, cannabis and vaping. Positive youth development would be the overarching theme throughout the resource.

PHAC

The Office of Nutrition Policy and Promotion has sent updates out pertaining to the revisions to Canada’s Food Guide, as well as marketing of unhealthy food to children. Updates will be forwarded along to the SHCC. Several jurisdictions have been referencing the recent “A common vision for increasing physical activity and reducing sedentary living in Canada: let’s get moving” framework, and the SHCC discussed engagement with the framework specific to their jurisdiction.

9. Review of Action Items

The action items table was reviewed.

10. Next Meetings

- November 13 2018 teleconference
- November 28-29 2018 face-to-face meeting
- December 11 2018 teleconference (may be cancelled due to proximity to face-to-face meeting)

All teleconference meetings begin at 1:00 Eastern Time.

11. Adjournment

**Record of Discussion
School Health Coordinators' Committee Meeting
Delta Ottawa City Centre
November 28th & 29th, 2018**

Co-Chairs: Sterling Carruthers (PE), Pat Martz (AB)

Participants:

Representative	Jurisdiction
BC	Christie Docking
AB	Pat Martz
SK	Trisha Wolbaum
MB	Jennifer Wood
ON	Jennifer Munro-Galloway (Teleconference)
NB	Marlien McKay
PE	Sterling Carruthers
NS	Natasha Warren for Kari Barkhouse
NL	Tom Mugford
NU	
NT	Denine McDonald, Gillian Dawe-Taylor
YT	Liza Manolis
PHAC	Jennifer Shortall, Matt Enticknap
Secretariat	Katherine Kelly, Susan Hornby, Craig Watson



Record of Discussion

1. Welcome, Acknowledgement and Introductions

Sterling welcomed all to the meeting and read the acknowledgment of the land. Everyone introduced themselves and gave a brief overview of their respective work roles.

2. Review and Approval of Agenda

The agenda was approved as written.

3. Approval of Record of Discussion from October 9th, 2018 teleconference

The record of discussion from the October teleconference was approved without change.

4. Secretariat Update

In addition to the written update, the following was discussed:

It was noted by several of the School Health Coordinators that the new post-conference takeaway reflection pieces that Susan has embedded into the Secretariat Update are very useful and appreciated.

5. Jurisdictional Updates

NWT

A new Mental Health Coordinator will work as part of the territorial based support team. The coordinator will work in mental health literacy, case conferencing, mental health protocol support around crisis management, school mental health protocol planning, and student safety plan development. Work is being done with the [My Voice, My Choice](#) campaign steering committee. There has been a redesign to the Health and Wellness curriculum. This is the last year of a pilot for a wellness curriculum (grades 4-6), and outcomes are currently being written for grades 7-9. This curriculum is focused on competency-based outcomes and an understanding of health complexities within their own communities. Child and youth care counselors employed by Health are being deployed in schools. The counselors are starting in two regions, and will eventually scale up to ten regions. Work is being done with Northern Counseling and Therapeutic Services for small schools that are not large enough to support a counselor in their school. NWT will be working with Dr. Stan Kutcher to help indigenize the teen mental health curriculum. An Opioid Task Force has been formed in collaboration with the RCMP, the Department of Justice, and the Department of Social Services. A multi-department working group on cannabis has been formed. Health and Social Services is currently working on a cannabis education poster series project.

NL

A provincial Comprehensive School Health Forum is currently taking place in Newfoundland & Labrador, featuring Dr. Kim Schonert-Reichl, University of British Columbia, as the keynote speaker. Led by the Ministries of Health and Education, this is a government-wide forum, focused

solely on Comprehensive School Health: how to define CSH in plain language, share what is current in CSH, and determine next steps. The provincial strategy, [The Way Forward](#), has three areas of focus where schools are engaged to support changes in students: healthy active living, healthy tomorrow, and healthy communities.

NB

Changes to the province's school nutrition policy are underway. The NB Student Wellness Survey is currently in its fifth cycle, conducted every 3 years in collaboration with the Department of Education & Early Childhood Development. The survey is participated in by all schools, and is used to support policy and program planning across government departments, including development of community health profiles. For example, an infographic was developed to show hot spots for cannabis use, where there are issues and how to support and build on protective factors. In collaboration with the Department of Health, the Department of Education & Early Childhood Development hosted a forum on cannabis, and brought in Dr. Harvey Milkman who did work in Iceland. He feels NB has many of the elements of success that worked in Iceland - NB currently has smoking rates of 5% - lowest in Canada.

NS

There have been a number of changes within the Education system in the past year, with the most significant change being that there are no longer school boards in the province. In their place, there are now regional centers for education that are now accountable to the Department of Education. Health and Education have collaborated to develop a new physical activity framework for the province. The framework is currently in draft form. Nova Scotia will also be piloting a new model for youth health centers with the aim of developing a consistent approach across the province. A new funding consortium which spans university, government, schools and community is working to raise private sector funds to match PHAC funding.

PE

Progress is being made on a new School Food Strategy that will increase students' food literacy, provide fresh, local, and healthy food at school, and lead to revision of the current school nutrition policy. Partners are exploring potential infrastructure models- such as nonprofit operated centralized kitchens that deliver to satellite schools with a pay-what-you-can model. Three events have been held to engage students in 'school food' conversations. PEI's Department of Education, Early Learning & Culture continues to work in partnership with multiple departments to support the provincial [Just the Facts](#) campaign and to implement the 'cannabis information sharing' work plan. Health Canada-funded [Pursue Your Passion](#) events were held at two high schools. Student e-cigarette use is of great concern for school staff and parents. The 2016-17 Canadian Student Tobacco, Alcohol and Drugs (CSTADS) survey results showed that 17% of PEI high school students used e-cigarettes in the past 30 days – compared to 9.8% in 2014-15. In partnership with the PEI Tobacco Reduction Alliance (PETRA), an educational campaign is being developed targeted at youth and adult influencers; entitled "*Vaping: Know the Risks*", this initiative will include a web site, info-graphics, and a tip sheet regarding how to talk to youth about vaping.

YT

HBSC survey results are expected within the next month. Results will be shared with all youth groups who participated; the ministries gained a lot from the last youth sessions. There is significant interest from upper levels of government in regards to the importance of the data, and how it can be better used to shape services and interventions. Yukon's Health Promotion Unit is working with schools on e-cigarettes issues; this includes conversations with students and critical thinking work. Cannabis and fentanyl resources for educators are in development.

MB

In advance of the education system review in the fall of 2019, MB education has started to publish standardized test scores from school divisions. The review will seek to improve test scores, literacy, and numeracy. The Apple Schools pilot is up and running in the Swan Valley School Division, with school health facilitators within the schools. A guide for schools to set up a mental health promotion action team and school plans, based on the Positive Mental Health Toolkit, has been developed by the Winnipeg Regional Health Authority. A letter of intent will be submitted to PHAC's Mental Health Promotion Innovation Fund (MHP-IF).

SK

The "Nourishing Minds" nutrition policy document has been updated and revised, and will be released in January 2019. As a collaboration between Education, Health and Parks, Culture & Sport, the "Inspiring Movement" policy document is being revised; the focus is on supporting kids to be active in school, including before and after time periods. Work is currently being done around cannabis education for schools and parents. The mental health strategy is more on service provision, less on upstream approaches.

BC

Health and Education are continuing to act on the recommendations brought forth from the recently released Office of the Auditor General's report – [Promoting Healthy Eating and Physical Activity in K-12: An Independent Audit](#). BC's Ministry of Education has expanded their [ERASE](#) strategy and has broadened to include positive mental health, anti-violence, online safety, substance use, SOGI (sexual orientation and gender identity), bullying, and violence. The Ministry of Mental Health and Addictions is working to release the provincial mental health strategy, with a focus on child and youth mental health. [SOGI 1 2 3](#) continues to be viewed as a success in the province, with 57 of the 60 school districts participating. [Action Schools! BC](#) is being redeveloped, with the focus shifting to developing physical literacy and increasing physical activity while building connections to positive mental health. BC's Division of Population and Public Health continues to work on a wellness strategy. Building on the coaching initiative offered by Healthy Schools BC and WellAhead in the 2017-18 school year, DASH BC and WellAhead are continuing to offer mental well-being coaching to teams of school district and health authority members focused on staff wellbeing. A totem carved by two artists from the Tsawout First Nation was raised in front of the building housing the Ministry of Health, to honour government's commitment to ongoing and meaningful reconciliation with Indigenous British Columbians. The

pole's theme is "Crossing Cultures and Healing." A school food environment scan will be conducted in January and sent to all school administrators, principals, and superintendents.

AB

The [Valuing Mental Health Strategy](#) and the [Chronic Conditions and Disease Prevention and Management Strategy](#) are two examples of where the school health coordinator works to embed the Comprehensive School Health framework to demonstrate how every initiative can benefit from this framework. Cannabis and vaping continue to be a priority area, with vaping/e-cigarettes currently at ~25%. The Department of Justice recently connected with the Medical Officer of Health to address the issue of the number of youth being apprehended for the stealing of vaping equipment. The latest draft K-4 curriculum is now available online at new.learnalberta.ca. The curriculum working groups have gathered again to look at the scope and sequence for the grades 5-9 curriculum.

PHAC

PHAC, along with the Department of Justice, held a 'child rights impact assessment' workshop for federal colleagues, facilitated by UNICEF Canada and the Canadian Coalition for the Rights of Children. Canada's next report to the UN Committee on the Rights of the Child is slated to be submitted in December 2018. PHAC is providing funding to deliver and evaluate two school-based programs that aim at promoting the physical and mental health of those who have experienced family violence: The [Mind Up for Young Children](#) program, led by Western University, is a mindfulness-based education program that weaves social-emotional learning into 15 teacher-led lessons; and [Fostering Open expression among Youth \(FOXY\)](#), a Northwest Territories school-based program for Indigenous and northern teenaged girls. Through Canada's Strategy to Prevent and Address Gender-Based Violence, PHAC will be supporting the delivery and evaluation of programs aimed at preventing teen/youth dating violence, including school-based programs. The report on the Aboriginal Head Start in Urban and Northern Communities (AHSUNC) will be completed soon and shared. From a question, it was suggested there may be a possible intersection of local and school food for the national food policy, to reinforce impact from school health perspective. There also may be an opportunity to look at the intersection of food security and poverty reduction work, again from a school perspective.

6. International Union of Health Promotion in Education (Liane Comeau, Executive Director)

Liane provided an overview of IUHPE and its current work, priorities, and strategies. The IUHPE is an independent organization that promotes global health and well-being, and looks to contribute to the achievement of equity in health, between and within countries. The Secretariat is supported by a large global working board and several interest groups, networks, and regional committees. IUHPE collaborates with people and organizations with common goals, which facilitates the exchange of ideas, information and experiences.

The network is inclusive, rather than focused on a specific population or dimension of health, and brings together people with complementary ranges of interest- encouraging exchanges across sectors that can lead to co-benefits within each sector. Current priorities include addressing

social determinants of health, championing sustainable development, strengthening health promotion systems, and preventing non-communicable diseases.

To support their work in capacity building and training, a competency framework for health promotion has been developed, and serves to drive IUPHE's educational initiatives. The framework includes advocacy as a competency, and a training piece in the realm of advocacy has been developed.

There is an accreditation system that accompanies the competency framework. School health promotion professionals can receive IUHPE accreditation by meeting specified competency-based criteria. This accreditation system also provides global accreditation of health promotion courses that are assessed as meeting the specified competency-based criteria. UNESCO Chair for Global Health and Education has just been launched (October, 2018), with IUHPE being a founding member. The Chair aims to generate research linking health and education and has aligned with the SHE Network (Schools for Health in Europe). The "Healthy Settings" group is a global working group made up of researchers and practitioners with a particular interest in the school as a health promoting setting.

Discussion:

- IUHPE accreditation could potentially be aligned and adapted with Health Promotion Canada's accreditation system

7. Canadian Alliance for Healthy School Communities (CAHSC)

Katherine provided an overview to the SHCC on the current status and recent developments of the Canadian Alliance for Healthy School Communities. Currently, PHE Canada is acting as the Secretariat for the CAHSC (for 2018-2019). Ever Active Schools, DASH BC, Ophea and CASSA have committed to moving forward with the formation of the Alliance. Other members will be recruited accordingly as the alliance develops with the hope that all provinces and territories are represented around the Alliance table. A draft "Terms of Reference" document was recently developed. Involvement with the Alliance could potentially afford the JCSH the opportunity to strengthen existing partnerships, and influence initiatives related to comprehensive school health with researchers, practitioners and NGOs.

Discussion:

- What is the cost benefit analysis? There has been no cost to the JCSH, as Alliance meetings to date have been attached to/in coordination with other national meetings.

-There appears to be a lack of Indigenous voice within this group. How can we ensure equal voice around this table for all jurisdictions and federally funded Indigenous schools?

-One jurisdiction has expressed concern, given that it is the sole funder of one of the organizations involved with the Alliance. With JCSH alignment, it may appear to be a conflict of interest.

- Provinces without NGO bodies as part of the Alliance have expressed concerns.
- One option may be to have the JCSH align with the Alliance as an ex-officio member.
- It was suggested that School Health Coordinators have a discussion with their Management Committee member on this issue in advance of the upcoming Management Committee meetings.

Action: Katherine to prepare a CBN for the Management Committee in advance of the upcoming meetings

8. Indigenous Perspectives

1) Statement on Reconciliation (Working Group)

Jennifer Wood provided the SHCC with an overview of the draft “Statement on Reconciliation” developed by the Working Group . The purpose of the statement is to set direction for the work of the JCSH and provide a tool for all to take back to their respective jurisdictions.

Discussion:

- What are the next steps for the JCSH, given the actions outlined in the statement?
- Completion of the Indigenous module for the Positive Mental Health Toolkit will be a very important preliminary step.
- The statement could facilitate a conversation about how to advance some aspects of the work of the JCSH, and build on work that has already been done.
- If the statement is to be endorsed at the Management Committee level, what will the process be for release of the statement and housing of the statement?
- Next steps will be to bring the statement to the upcoming Management Committee meeting for review, discussion and/or decision.

2) PMH Toolkit- Indigenous Module (Kevin Lamoureux)

Katherine provided the SHCC with an update on the status and progress of the Indigenous Module for the Positive Mental Health Toolkit that Kevin Lamoureux agreed to complete last year. Kevin has recently stepped away from his current job with the University of Winnipeg to complete his PhD; however, he has remained committed to directing the work on the module. The NCTR will be affiliated with the work, and the contract will be with the University of Winnipeg. Kevin will work with students to parcel out the work, and develop components of the

module. The Secretariat will provide support to the work as the draft is developed.

9. JCSH Tools and Resources

1) CSH Approach/Framework

Pat Martz led a discussion on Comprehensive School Health as an approach and/or framework, and how the framework is described and used in the jurisdictions. The SHCC discussed how to best support the framework and be consistent across jurisdictions in the messaging around a Comprehensive School Health approach.

Discussion:

-This CSH framework came from the Ottawa Charter for Health Promotion. In order to advance issues and challenges, a comprehensive approach was needed, rather than looking for one single solution.

- In order to advance our work, it is helpful to look at all aspects of the framework.

2) Healthy School Planner

Katherine provided the SHCC with an update on the Healthy School Planner, the gaps that have been identified, and potential options to address the changes needed. A working group was formed to discuss the HSP and, more specifically, it focused on the Foundational Module. It was suggested that the module had too many questions, was too lengthy, and contained language that was perhaps too complicated.

Discussion:

-Katherine will present a workshop on the Healthy School Planner at the upcoming “Shaping the Future” conference to get a sense of what changes practitioners feel are needed.

-It was suggested that the questions related to the CIM could be brought into the Foundational Module, in an effort to highlight the connections between comprehensive school health and student achievement.

-Work by Ophea on healthy schools certification uses a very similar assessment, and the added platform to support assessment and resulting banners for completion seems to be highly regarded by schools. This assessment process is, however, very costly by education standards.

10. Developmental Evaluation (Jamie Gamble- Imprint Consulting)

Jamie Gamble provided the SHCC with an update on the developmental evaluation, and outlined how the developmental evaluation process came to be in its current form. There are two key

purposes for going through the developmental evaluation process- firstly, it will help us to get better, and adjust our strategy as we incorporate important new work into the JCSH. Secondly, the developmental evaluation will allow us to have an informed case at the time of the mandate renewal process. The developmental evaluation data summary document was shared and reviewed with the SHCC.

General Discussion:

- The evaluation framework was built 2 years ago, based on the JCSH's strategic plan.
- A developmental evaluation is put in place to support the development of innovation and adaptation in dynamic environments.
- With the transient nature of the Management Committee table, survey answers may not reflect the full corporate knowledge, given the survey is distributed only to current member representatives.
- One of the key findings is that the turnover of the Management Committee plays a significant role in moving the JCSH forward.
- Given that many of the JCSH initiatives started long before the current mandate, should the scope of the evaluation be focused on just the current mandate, or should the scope be widened to take into consideration the jurisdictions' involvement over the past 15 years? The primary focus should be the current mandate; however, many of the initiatives that span the 15 years of the JCSH will be relevant.

Discussion on questions from Data Summary:

-To what extent and in what ways are jurisdictions exchanging knowledge about comprehensive school health (within jurisdictions and across jurisdictions)?

- This question depends on who is answering it (i.e., at what level within the jurisdiction is the question being answered). At the SHCC table, knowledge and information is shared often and widely; however, this may not be the case at the ADM level for instance.
- Information with regards to emerging trends and partnerships has been valuable and has provided the opportunity to connect with others across jurisdictions. It allows you to keep important work on the radar.
- Are there things that can be done differently to pull in partners in each province and territory? This is a contextual challenge, and is dependent on individuals, mandates, restructuring, political changes, etc. The environment is an ever-changing entity.

- Because there are such upswings and downswings that come with new governments and their mandates/priorities, this often creates a significant disconnect in upper levels of government in regards to their knowledge of the JCSH
- Travel for some jurisdictions has become a challenge at the Management Committee level. Given that travel is not funded at that level, it may have been a barrier to participation. In an effort to keep things front and center for jurisdictions, and rather than relying on face to face meeting participation, would there be an opportunity for the Secretariat to engage a road-show type process? The Secretariat could go to the PT and set up meetings with ADMs. This would afford the opportunity to articulate the work of the JCSH at a more senior and formal level.
- What are some of the practices that facilitate knowledge exchange? Meeting face to face with people and articulating how we can support and complement each other is key. Developing the relationships and helping others to understand what comprehensive school health means. Using resources and tools to embed the CSH framework into policies and programs.
- Primarily, knowledge exchange happens at the SHCC level, and it becomes a challenge when trying to move that work up and out.
- Staff turnover is a significant challenge. New people need overviews on what the CSH framework is, and how it can benefit them.
- Senior level engagement and uneven commitments in PTs pose a significant challenge.
- Is the MC level not engaged because they feel as though things are being taken care of by the SHCC?
- Federally, the information from the SHCC table is often used in briefing up to senior management.
- The SHCC table is the most efficient and effective in terms of knowledge exchange, possibly more so across jurisdictions than within.
- For future member surveys, separate links should be sent to SHCC and MC, in an effort to be able to pull out responses accordingly. In addition, respondents should be requested to complete as individuals, not as complete jurisdictions.

-What tools and resources support your work in your province or territory?

- The Healthy School Planner and the CIM received the lowest ratings. Some may not be deemed as useful because people may not be aware of them, or materials have yet to be developed to support the work.

- Many of the tools become useful the moment they are needed.
- Some of the tools are helpful in building PT resources.
- Should the JCSH be involved in the development of tools at all? Some PTs would be more apt to develop their own jurisdiction-specific tools and resources; others need the collective resources.
- CBNs should be added to the list.
- The tools are useful in unique ways, depending on the jurisdiction.

-To what extent and in what ways has the work of the JCSH enhanced collaboration between ministries of health and education within jurisdictions?

- If collaboration of health and education is strong in jurisdictions, can data point to ways in which JCSH has been helpful in that collaboration? If the collaboration is not there, whose responsibility is it to make attempts to enhance it?
- Perhaps the question should be “through what mechanisms has the JCSH enhanced collaboration?”
- Do we want to think about deliberate strategies to enhance collaboration, or it is jurisdiction-dependent, in that we are only able to respond to the level of collaboration that exists within a particular jurisdiction?
- How aggressively does the JCSH support efforts to enhance collaboration? Is this an aspiration, and can there be tangible measures to support it?
- What does the JCSH need by way of a report to seek a new mandate?
- At the PHAC level, the JCSH is constantly being referenced in briefing notes, departmental reports, etc.

-To what extent do jurisdictional members think their involvement with JCSH has enhanced their capacity to improve school health?

- The JCSH can provide the evidence base; however, the work happens in the PTs and can shift very quickly, based on changes in the PTs.
- Are all the low scores for this question from Management Committee members who aren't looking to this for day to day perspectives?

- SHCC and MC should have different collector links for responses.

Closing Discussion:

- We have missing and insufficient data in some areas, and we need to rethink how we answer some of these questions.
- How do we upgrade the evaluation as we go forward?
- How do we engage the MC at the upcoming meetings?
- How robust and comprehensive does the evaluation need to be to ensure a successful mandate renewal? Perhaps a more succinct version is needed.
- What is the strategy going into the new mandate?
- We may want to look at two different products- an internal version articulating the strategy ideas we want to use as we move forward, or a simple version that articulates the case for JCSH.
- Is the survey format the most efficient instrument, or would interviews be more effective?
- Bilateral interviews by jurisdiction would be useful. Interviews could be a two-stage process, where more in depth conversations could be had with individuals more actively involved with JCSH, and then higher level/more generic conversations with all who are involved- regardless of their level of engagement.
- Inquiry can sometimes be an intervention.

11. PHAC Youth Resiliency Project: *Mobilizing School Stakeholders Around Programs for Positive Youth Development and Prevention of Problematic Substance Use* (Dr. Claire Crooks)

Dr. Crooks provided the SHCC with an overview the PHAC Youth Resiliency Project. This project was initiated by PHAC in light of the legalization of recreational cannabis in Canada and the existing high prevalence of cannabis use among Canadian youth. The project is intended to ensure that educators are well versed and knowledgeable about positive youth development (student attitudes, social skills, self-management skills, etc), rather than being solely focused on cannabis-specific prevention programs and “knowledge-only” interventions. Three key messages (promoting well-being, welcoming environments, and effective programming) have been developed and can be used effectively to help reinforce views on cannabis use and prevention among youth and young adults. Research briefs and infographics for educators and administrators have been developed to support each of the three key messages and were shared and reviewed with the SHCC.

*It was noted by a PT members that there is no mention of comprehensive school health in the materials presented to the SHCC.

12. Youth Mental Health- Role of Schools (Dr. Stan Kutcher)

Dr. Kutcher provided the SHCC with an overview of his work in adolescent mental health, mental health policy, and mental health literacy. More specifically, his presentation focused on two resources that he has developed: the Go-To Teacher Training resource and the Mental Health & High School Curriculum Guide. The former provides training to teachers and other key members of the school community in mental health literacy, identification, and support, and strategies for working with health providers, parents, and families. “Go-To” educators can include teachers, student service providers – guidance counselors, nurses, and social workers, and other staff members. The latter resource is a 6-module evidence-based Canadian mental health literacy curriculum resource designed for use in grade 7-10 classrooms. Delivered by classroom teachers, the Guide provides a complete set of educational tools proven to increase mental health literacy of both students and teachers.

Discussion:

-Is there interest from teachers at the elementary school level to participate?

There is not sufficient evidence on what mental health literacy looks like for primary grades. A social-emotional learning (SEL) perspective is being used, but there is not certainty whether that is the best approach. In collaboration with Alberta Health Services, Dr. Kutcher and his colleagues are just embarking on a 5-year project that will start to answer some of the pertinent questions that surround mental health literacy for primary grades. The hope is that the outcome of the project will see an entire mental health literacy approach for these grades.

-A pre-service mental health literacy course has been developed as a comprehensive course aimed at both teachers and B.Ed students. It is a free, online (www.teachmentalhealth.org) course that helps educators recognize the signs of mental illness while decreasing stigma. This mental health literacy learner resource was developed through a partnership with Faculties of Education from St. Francis Xavier University, Western University, and University of British Columbia.

-Through a grant from CIHR, Dr. Kutcher and his team are looking to develop an Indigenous perspectives version of the Guide resource. This project is a significant undertaking in terms of size and scope and will be developed over the next 3-4 years.

-An interactive, self-guided resource dealing with what teachers and educators need to know about suicide will be released within the coming months.

13. Next Meetings

- Teleconferences 2019 - second Tuesday of each month at 1:00 PM Eastern
- Spring face to face (Potential joint meeting with SHCC and MC)

All teleconference meetings begin at 1:00 Eastern Time

14. Wrap up and concluding remarks



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