# Record of Discussion

**School Health Coordinators’ Committee Meeting**

**December 11 - 12, 2019
Cambridge Suites Hotel, Toronto, ON**

**Chair: Sterling Carruthers (PE)
Participants:**

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| **Representative** | **Jurisdiction** |
| BC | Daniel Naiman by telephone |
| AB | Pat Martz by telephone |
| SK | Helen Flengeris |
| MB | Jennifer Wood by telephone |
| ON | Jennifer Munro-GallowayStephanie Kaldas |
| NB |  |
| PE | Sterling Carruthers |
| NS | James Shedden |
| NL | Peggy Orbasli |
| NU | Shara Bernstein |
| NT | Elaine Stewart |
| YK | Ian Parker |
| PHAC | Suzy Wong |
| **Secretariat** |  |
| Katherine Kelly | Executive Director |
| Susan Hornby | Senior Advisor |

Record of Discussion

1. Welcome and Roll Call
Sterling welcomed all to the meeting.
2. Review and Approval of Agenda
The agenda was approved as written.
3. Approval of Record of Discussion from the November 12th 2019 teleconference
The Record of Discussion from the November 12th teleconference was approved as written.
Presentation - *Health Behavior in School Aged Children*  (Dr. Will Pickett, Queen’s University)
* Update on current HBSC cycle

Will explained that about 21,500 students participated in this survey round. The research leads appreciate that there is difficulty in being one of a number of school-based surveys in the country.

* Key themes of current cycle:

1) Why are high school girls not thriving in terms of their mental health?

2) The protective role of homes and families continues to be a strong result.

3) Social media is shown to be a major adolescent health issue.

4) The risk-taking profiles – issues – are changing.

 Considerations from key themes:

* What are strengths mechanisms that could impact the risk factors?
* Do rural and remote contexts emerge as a possible theme, featuring both assets and risks?
* HBSC reports (P/T, national, international)

The international HBSC report, featuring responses from about 40 countries, including Canada, will be released in spring 2020.

The Journal of Adolescent Health will publish a themed issue on HBSC results. There are plans to develop a knowledge transfer toolkit.

The national report will include a summary report, a series of mini reports on key topics, and a knowledge transfer toolkit. The mini reports have been informed by discussions with the School Health Coordinators’ Committee. They will be released in stages, and they will also contribute to the literature base through publications.

The provincial-territorial reports will not all have the usual 3000-respondents size samples.

* Working with and supporting P/T colleagues through the HBSC Process

Issue 1: Outcomes of deeper collaboration with JCSH

Will advised that HBSC results have grown in the past three cycles primarily because of the collaboration with JCSH.

Ian described Yukon’s participation in the survey, noting that the territory has become very involved in question development, and this has increased engagement with territorial colleagues. Privacy protectors have been implemented for student responders. The participation/consent format has been changed from [active to passive](https://journals.sagepub.com/doi/abs/10.1177/0193841X8901300104). The data was brought back to First Nations participants, involving government to government. The territory brought Will to meet with a number of tables, including deputy ministers, youth leaders, youth-serving organizations, and health promotion specialists and this was very helpful.

Will noted that he and Wendy make a sincere offer to meet in any jurisdiction to provide assistance and respond to any questions / concerns.

Pat noted that Alberta paid for an over sampling of the high school population in the 2013-2014 HBSC Study, specific to those schools that had Wellness Funded interventions versus schools without funding. A decision was made by the participating high schools not to release the data given the inability to show positive results over a two-year intervention period.

Issue 2: Effectively managing competition in the field – competing surveys

Some school health coordinators commented that other surveys do a better job than HBSC of reporting data results back to schools. Some participation is supported for the greater purpose of national outcomes, but the schools are disappointed they don’t get returns that more match their own contexts.

It would help to review how the data is written up – what can be learned from what other surveys do well to improve knowledge transfer and exchange.

It would also help to have more presentations in jurisdictions by Will and Wendy.

 Having more presentations on HBSC benefits to schools, communities, and students will help, as will allowing students access to the data for their knowledge and school projects.

PHAC has data tools and blogs with interactive formats to support increased involvement with HBSC data.

* Data collection in highly Indigenous populations

Will explained that data was not collected in Nunavut in the last survey round and they are working closely with folks in that territory to better respond to concerns and respectfully support the outcomes of the Truth and Reconciliation Commission Report.

Pat commented that the survey questions were not well received by Indigenous reviewers in Alberta or mental health professionals. The province will be working closely with Will and Wendy in the next survey round and is open to supporting HBSC.

* Other outcomes of HBSC – beyond the survey results:

It has become an important training ground for new researchers, many of whom have gone on to publications and research/teaching careers

It has impacted public health and medical careers

The data is a platform for research leading to [Tri-Council](https://www.rsf-fsr.gc.ca/about-au_sujet/index-eng.aspx) (CIHR, SSHRC, NSERC) funding and peer-reviewed publications

The data has been used in Senate hearings (e.g., cannabis legalization)

The data has featured in [UNICEF report cards](https://www.unicef-irc.org/publications/series/report-card/)

1. Youth Substance Use
* Presentation - *Compass System Data* (Dr. Scott Leatherdale, University of Waterloo)

Scott’s presentation and 13 additional research articles/COMPASS questionnaire and feedback report were provided and are available on the private side of the JCSH website.

* Presentation - *One Jurisdiction’s Response to Youth Vaping* (Sterling Carruthers)

Sterling’s presentation is available on the private side of the JCSH website.

*Discussion:*

* How vaping is used in jurisdictions continues to present high concerns.
* PTs have responded with information days, clarification to address inconsistencies in nicotine strengths, education campaigns and youth advisory teams.
* Continued challenges include supporting students already using / providing harm reduction approaches.
* ON: Developing a Vaping Resources for Schools – Jennifer will share
* NL: banned vapable cannabis products; formed Alliance for Tobacco Control
* NT: advanced the health curriculum changes to have students working with vaping data – inquiry approach.
* It was suggested that JCSH might curate jurisdictions’ work on vaping and share with non-JCSH tables. The preference was that this be housed on the private side of the JCSH website and SHCC members can then share with colleagues.

Action: Secretariat and Sterling will begin a curated document of PT responses to school-based vaping issues.

1. Moving Forward

*Reflections:*

* The return to JCSH definition as a Health-Education collaboration first and foremost is seen as positive.
* Also positive is connections planned with Council of Ministers of Education, Canada (CMEC), the Advisory Council of Deputy Ministers of Education (ACDME), and health councils (Public Health Network Council).
* Youth voice? At SHCC table? Or more emphasis on youth input within PT sectors.
* Truth and Reconciliation Commission – how is JCSH planning to move forward? The Statement on Reconciliation was intended to be intentional in describing the work forward.
* Role of comprehensive school health framework in discussing issues with CMEC, others.
1. Next Meetings
* January 14, 2020 (MC/SHCC joint teleconference)
* February 11, 2020 teleconference
* March 17, 2020 teleconference

*All teleconference meetings begin at 1:00 Eastern Time.*

1. Adjournment