

Canadian Alliance for Healthy School Communities:

Notes from our day together

January 30th, 2019 in Lake Louise Alberta

MEETING NOTES

Overview

A 4th gathering of thought leaders from across the country was held on January 30, 2019 in Lake Louise with 26 participants from across the country representing multiple perspectives and organizations dedicated to the promotion of healthy school communities. Those present included:

Brian Torrance, Chris Fenlon MacDonald, Kerri Murray and Katelynn Theal - Ever Active Schools, Ken Bain - CASSA, Chris Markham - Ophea, Melanie Davis - PHE Canada, Faye Willick - DASH BC, Dr Kate Storey and Genevieve Montemurro - U of Alberta, Susan Rogers - Western University, - Jenn Flynn and Landra Walker, APPLE Schools, Paul McCarthur and Mali Bain Wellahead - McConnell Foundation, Ellen Pierce and Maureen Devolin - Alberta Health Services, Lisa McLaughlin (representing the Canadian Parks and Recreation Association), Jane Arkell (Active Living Alliance for Canadians with a Disability), Nancy Pynch-Worthylake and Laurie French- Canadian School Boards Association, Colleen Wright and Jazmin Bonizzon- Alberta Healthy School Community Wellness Fund Leanne Keyko - Alberta Schools Employee Benefit Plan, Leanne Keyko, Alberta School Employee Benefit Plan

Regrets: Dr Antony Card, John Paton (Alberta Schools Athletics Association and School Sport Canada), Joe Doiron - Public Health Agency of Canada, Leanne Keyko - Alberta Schools Employee Benefit Plan, Mathew Enticknap, (Public Health Agency of Canada), Arlene Morell (Ontario Healthy School Coalition), Carol MacDougall (Ontario Healthy School Coalition).

This meeting was co-designed and co-facilitated by the stewardship group (CASSA, DASH BC, Ever Active Schools, Ophea and PHE Canada) who has been exploring ways to work better, together over the past 14 months.

Participants were asked to review the following information to come prepared for the meeting:

- Past meeting minutes
- Terms of Reference

They were also asked to come prepared to share what they or their organizations were working on as it related to Healthy School Communities.

The workshop was designed to meet the following **outcomes**:

- Bring together thought leadership and organizations around school health
- Continue to strengthen relationships among thought leaders to enhance knowledge exchange and generate meaningful collaboration

- Building towards a coordinated effort to convene and connect stakeholders across various school health systems and jurisdictions

Welcome & Introductions

The day began with Brian Torrance from Ever Active Schools welcoming everyone and introducing Helmer Twoyoungmen and Charlene Cardinal who shared song, smudge and acknowledged the land that our meeting was held on. Charlene shared the meaning behind the smudge selected for this meetings: that we cleanse our hands, mouth, ears, eyes, brain and heart in order to share our best selves and to be open, respectful and compassionate to those around us and the iterative process.

The participants then shared what they were each working on. Five new people were welcomed, Susan Rodger from Western University, Jane Arkell from the Active Living Alliance for Persons with a Disability and Lisa McLaughlin from the Canadian Parks and Recreation Association. Their presence, as well as the returning faces signified the beginning of a period of growth for the Alliance - both in terms of perspective and reach. Our participant list now reaches 39 representatives.

Key words from our round table sharing included: bridge, facilitate alignment, barrier reduction, communications, interconnection, all abilities, partnership, wrap around, from single school to the forest, trauma informed schools, inclusion, evaluation/research, teacher staff capacity, knowledge mobilization, fit, transfer, e-learning, knowledge exchange, resource sharing, policies and guidelines, open the doors to the school, student leadership / voice, continuous learning. All contact information is shared with participants to facilitate continued linkages beyond this mtg.

Our Collective Journey & Today's Purpose

Brian spoke to today's purpose:



Melanie Davis from PHE Canada recapped the Alliance's conversations and work to date highlighting the great strides forward in common understanding and trust building.

RECAP

| November 2017 | January 2018 | July 2018 | January 2019 |
|--|--|---|---|
| <p>Change happens at the speed of trust</p> <p>Key Takeaways</p> <ul style="list-style-type: none"> • Magnetic Attractor • Need for unified language • Interest in finding a common goal • We need a champion | <p>Every School in Canada is a Healthy School Community</p> <p>Key Takeaways</p> <ul style="list-style-type: none"> • Priority areas formed and outcomes drafted • Working title of CAHSC is chosen • Mapping community assets • Backbone team formed | <p>What's in - What's out</p> <p>Key Takeaways</p> <ul style="list-style-type: none"> • Terms of Reference • Scoping our Work • Solidified schedule of meetings (jan, jul, nov) | <p>Harnessing our collective knowledge and resources</p> <p>Key Takeaways</p> <ul style="list-style-type: none"> • Targets • Contributions secured |

A collaboration exercise was shared asking participants to place a coloured dot on a visual on the collaboration spectrum: Red = the past (when we began 14 months ago), Green = today and, Blue = where we need to go.

| Compete | Co-exist | Communicate | Cooperate | Coordinate | Collaborate | Integrate |
|---|--|--|---|--|--|--|
| Competition for resources, partners, grants , brand recognition | No systemic connection between organizations | Inter-agency information sharing (e.g. networking) | As needed, often informal international on activities or projects | Organizations systematically adjust and align, work with each other for greater outcomes | Longer term interaction based on shared mission, goals, shared decision making and resources | Fully integrated programs, planning, funding |
| 1 red dot | 8 red dots | 8 red dots 6 green dots | 13 green dots | 2 green dots 4 blue dots | 11 blue dots | 7 blue dots |

The participants were aligned in their views. Convening a collaborative effort like this requires a coordination of efforts, collaboration among partners and the integration of approaches and products. The blue dots echo this sentiment. The collection of green dots under “cooperate” means that we still have some way to go towards this more optimal state. However, the red dots validate our efforts this far showing a movement forward is already underway.

The meeting norms identified in our very first mtg were then shared as being important in order to ensure we continue to move along this continuum: Listen to understand. Share your truth. Open to the creative process. Source multiple intelligences. Embrace diversity of perspective. Technology on breaks. Move. Have fun: this work is about people.

Comprehensive School Health - Setting the Stage

In previous meetings, it was determined that a core component of the Alliance was the sharing of knowledge and the facilitation of cross-sectoral collaboration. With this in mind, the day was split into two. The morning was organized to honour the need for shared understanding. Chris Markham from Opeha shared a high-level overview of Comprehensive School Health and the four components: Teaching & Learning, Social & Physical Environments, Partnership & Services and Policy. This was followed by a professional development session by Dr. Kate Storey on the core essential conditions necessary for a CSH approach to be successfully implemented. As well, Dr. Storey laid out the contextual conditions that have a great degree of influence on the ability for the core conditions to be obtained. These two presentations sparked a rich conversation about whether participants can see a fit between their work and CSH. We delved deeper into more meaningful conversations about shared language as it pertains to the use of CSH within a multi-sectoral, jurisdictional, context milieu. There was consensus that CSH is a strong foundation yet agreement was found in the Alliance maintaining the most flexible and “multilingual” stance - in this way we can be reflective of and appeal to a broader range of partners who will be able to see a place for themselves within our work and help to reach our shared goal of every school in Canada being a healthy school.

Each participant shared responses to “what priority areas can be addressed through a CSH approach”. A word art was created. A participant remarked “ if it is comprehensive, then it should be everywhere and everything”.

The stewardship team then presented the theory of change for input. By creating a theory of change, we will be able to be more focused and confident that our actions are mutually reinforcing and are the smartest route forward. The content of the theory of change presented was the result of the previous three meetings. It was presented as a conversation started not a completed piece.

| THEORY of CHANGE - what are we trying to achieve | | | | | | |
|--|--|--|--|--|---------------------------------|--------------------|
| Our Ultimate Impact | All children and youth experience improvements in achievement and well-being | | | | | |
| We believe | Healthy Schools support optimal learning and growth and are vital to helping students reach their full potential | | | | | |
| Integrated Approaches | Teaching and Learning | | Social and Physical Environments | Partnerships and Services | Policy | |
| Evidence | Enabling Conditions for a Healthy School | | | | | |
| Priority Areas | Physical Activity | Healthy Eating | Personal Safety & Injury Prevention | Growth & Development | Mental Health | Healthy Behaviour |
| Our Goals | Be a catalyst for the promotion of the health and wellbeing in Canadian schools | Strengthen collaboration & knowledge exchange and intersectoral action | Increased capacity of health & education sectors to work collaboratively and efficiently | Increase understanding & awareness of HSC Approach | Increased research coordination | Shared Measurement |

Tables broke into discussion to examine the comfort level and the assumptions behind the Theory of Change. People could write their comments and feedback or use happy, sad, neutral faces to share their perspective.

In response to questions about our **Ultimate Impact** statement; All children and youth experience improvements in achievement and well-being, participants surfaced the following comments:

- Remove “improvement”.
- How are we defining achievement and wellbeing?
- Can ultimate impact be connected to vision (eg. connect to healthy school communities vs, individual statement?)
- Not a complete theory of change - its missing the assumptions and the why?
- Should well being and achievement be reversed - cause and effect
- Is it bigger - age range (school years)
- Issue with improvement - implies a deficit model - should be an aspirational statement (improvement vs. optimal outcomes)
- What is in our control - what can we be held accountable for? What can be influence?
- We can embed essential conditions in schools - should this be in the statement?
- All children and youth leaves out whole school community
- One happy face was added.

Also, the following assumptions were identified by participants

- Assumes there is a need for improvement is sustainable
- Are all people on the radar - if not - who is missing? Ie. people with disabilities, first nations, marginalized groups?
- How is achievement being defined - is is being measured?
- Is connection between achievement and well being accepted?
- By keeping improvement is assumes all children need improvements
- Baseline needed?
- Improvement from what status
- Assumption is that it is possible to measure this

In regards to our **We Believe** statement: Healthy schools support optimal learning and growth and are vital to helping students reach their full potential the following feedback, comments and visuals were shared.

- Add communities
- Healthy school add - communities
- Limited to student focus
- Could be re-written to say...Healthy schools support optimal learning for students and all school community stakeholders
- Full potential vs. potential
- Who is deciding what full potential is and when it is reached
- Is it the systems potential or the individuals

- One happy face

In regards to whether we have the **Evidence** to support this, participants gave the following input

- Yes, there is evidence
- Have evidence around impact of healthy schools supporting optimal learnings but the remainder is less clear - growth in what?
- Support growth in what?
- More evidence? Evidence based approaches @ more grassroots level
- Further evidence on implementation - from the Toa to broader field of implementation science.
- Schools are a unique intervention point.
- Need evidence brief for CSH
- How do we standardize?

Chris shared that the following three sections of the Theory of Change are based on JCSH's CSH model and Kate Storey's Essential Conditions. The feedback on the **Integrated Approaches** is shared here:

- Alliance should not be rigid with integrated approaches
- Change integration to inclusion
- Emotional labour
- Need for common language - set a goal to do this
- "Evidence" - consider flipping this with the priority goals
- Would use of principles be more impactful vs. integrated approaches?
- What are the commonalities across approaches we agree on?
- Foundations for sustainable change
- Evidence informed frameworks and resources
- Would use a different term than evidence (eg. foundations for success or sustainability {evidence is infused throughout})
- Enabling conditions - can this be aligned with essential conditions?
- One happy face:)

When asked whether we need more to help inform our goals the following responses were shared:

- Need to be cautious not to undo work
- Do we need specific health topic evidence or is it enough to recognize it as an effective approach
- Ottawa charter, unesco, clasp, other research
- One neutral face: | "we did not understand the question"
- Essential conditions are implementation science focused
- What about C&Y development, social emotional learning, trauma informed

The feedback on the what **Priority Approaches** should be included the following were offered:

- Growth and development - of what of who?
- Personal safety and injury prevention seems to be an outlier
- Change mental health to social and emotional wellness

- Remove healthy behaviour
- If we are looking at all we need to ensure there is equity in our priority areas
- More research could be done to be thoughtful to what language is to be included
- Healthy relationships
- Holistic view missing “ whole person”
- What is healthy behaviour
- What is healthy behaviour referring to?
- What is healthy behaviour
- Principle areas are different than priority areas (principle is more inclusive; priority is more siloed”
- Be open to emergent issues eg. cannabis, sleep, other issues
- A missing priority area: relationships - related to trust in essential conditions - covers a variety - professional and interprofessional, child - caring adult, family - caring adult, systems
- Add environmental consciousness
- Healthy behaviours is too broad and spans all areas - is this meant to include substance abuse?
- Healthy behaviour too vague
- Evidence piece is not clear enough

When asked if **Our Goals** were the most effective areas to focus on for change, the following thoughts were shared:

- These goals can support all priority areas - do they have to be segregated
- We feel that they don't have to be linear
- What are the impacts
- Goals should be more “SMART” and concise
- HSC should be CSH - comprehensive school health
- Understanding is very short term - perhaps increase uptake of the CSH framework
- High fidelity approaches vs. design studio
- Go back to the barriers and cross reference against goals
- Evidence based programs were never built to scale
- ?Scope - goals are great but feel lofty
- Provincially/nationally?
- Are 2 & 3 goal not close enough to combine into 1 goal
- 6 goals is too many - top 3 instead
- Goals look (read) like they are tied to priority goals - not sure that is the intent

When asked what is missing, the following ideas were listed:

- Need to make the “why more obvious - if we do A then B will happen (because)
- Hard to see gaps in goals or if they are the right ones because can't see the thinking behind how doing these will change the system
- Need to change visual depiction to not look linear - don't use columns, show interconnections eg. goals look like they are related to specific priority areas even though they are not
- Use a community development model to engage school communities to develop their own goals and priorities, how to move beyond them and what counts as evidence

- What are the assumptions being made at the different stages of this ToC about the actors, strategies, barriers to the desired end state etc.
- Outcomes & outputs - if we are using this as a logic model

Action: the stewardship will reflect and then revised the Theory of Change to incorporate this feedback. The revised version will then be shared back to the participants as a version 2 for further input.

Common Agenda - Mutually Reinforcing Activities

The **Common Agenda** was then presented. This agenda is a culmination of the previous three meetings inputs as well.

THE COMMON AGENDA 🌳 MOVING FROM SINGLE SCHOOLS TO THE FOREST

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| Goal 1: Be catalyst for the promotion of the health and wellbeing in Canadian schools | <ul style="list-style-type: none"> → Develop national healthy school standards and assessment that support teacher, staff and student wellbeing → Embed CSH credits into BEd programs across Canada and professional development programs → Energize through calls to action, implementation guides and campaigns |
| Goal 2: Strengthen collaboration, knowledge exchange and intersectoral action | <ul style="list-style-type: none"> → Declaration of commitment signed by all levels → Host 3 intersectoral meetings per year to push common agenda/language and alignment forward → Facilitate two-way engagement with diverse stakeholders through virtual gatherings → Expand reach and penetration equitably |
| Goal 3: Build capacity of health and education sectors to work more sustainably, effectively and efficiently | <ul style="list-style-type: none"> → Advocate for designated provincial, federal and district level HSC and project funding and enabling policies → Curate & surface research, knowledge products and best practices on an Online Hub → Co-host HSC forum to transfer knowledge and celebrate the Canadian way (focus on context) → Gain 360° participation and fulsome attention to essential conditions |
| Goal 4: Increase understanding & awareness of HSC approach through continuous communications | <ul style="list-style-type: none"> → Develop communication assets and key messages for broad and continuous communication → Increase content marketing that promotes HSC by sharing stories and sample content → Use influencers to connect with audience motivations (share, access, grow) → Publish user generated content from champions - retweets, reposts, content received by email → Produce original creative assets Photos, GIFs, Infographics, videos (15s, 30s, 60s) for all to share → Publish user generated content - retweets, reposts, content received by email |
| Goal 5: Increase research coordination | <ul style="list-style-type: none"> → Surface and review Canadian funded HSC related research through scans and requests for information → Identify & communicate gaps with funders and stakeholders |
| Goal 6: Shared measurement | <ul style="list-style-type: none"> → Design and advance a shared impact measurement strategy → Monitor, evaluate and communicate impact through an annual report |

Participants we asked to break into groups based on their own alignment to the goals. Once in groups each team was asked to give input on four questions:

1. What would success look like
2. What resources are needed
3. Who should be a part of it, and
4. When is the right moment to begin?

Goal 1: be catalyst for the promotion of health and wellbeing for Canadian schools

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| <p>Success?</p> <ul style="list-style-type: none"> • Declaration of commitment signed by all members of the Alliance • Surface & review Canadian funded HSC related research through scans & requests for info • Communicate gaps more broadly | <p>Who?</p> |
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| <ul style="list-style-type: none"> Document (quantify) current collective reach of members at all levels (school/district.P/T, alliance) | |
| Resources? | When? |

Goal 2: Strengthen collaboration, knowledge exchange and intersectoral action

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| <p>Success?</p> <ul style="list-style-type: none"> Flush out ToC pieces Diversity of sectors involved in the alliance (health, education, active living, first nations, and more) | <p>Who?</p> <ul style="list-style-type: none"> Stewardship group Other alliance members when they understand their role in helping to reach the overall vision |
| <p>Resources?</p> <ul style="list-style-type: none"> Regular attendance - How? Host 1 in-person mtg/year and 2 virtual mtgs/year to remove travel as a barrier to attendance/participation | <p>When?</p> |

Goal 3: Build Capacity of health and education sectors to work more sustainably, effectively and efficiently

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| <p>Success?</p> <ul style="list-style-type: none"> Will vary by P/T & district - language of advocacy may prohibit full participation by Alliance members Hub becomes “go to” source for credible resources Content curation PD | <p>Who?</p> <ul style="list-style-type: none"> CASS & Alberta health Services P/T reps -health and education with knowledge and access |
| <p>Resources?</p> <ul style="list-style-type: none"> Don’t always need more \$ | <p>When?</p> <ul style="list-style-type: none"> Important - immediate (yr. 1-2) |

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| <ul style="list-style-type: none"> • May be more helpful to review what you have and optimize their use before asking for more money | |
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Goal 4: increased understanding and awareness of HSC approach through continuous communications.

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| <p>Success?</p> <ul style="list-style-type: none"> • Increased adoption / alignment at systems level • Operational support - budget and PD • Comms plan <ul style="list-style-type: none"> ○ includes a comms audit with audience identified / need for school system leaders ○ Asset mapping ○ Strategy development with objectives, key measures, tactics • Engagement Plan <ul style="list-style-type: none"> ○ Events ○ Increase understanding ○ Tracking - metrics ○ Digital presence (web, hub etc.) • Collaboration levels <ul style="list-style-type: none"> ○ Outline differing contributions for members | <p>Who?</p> <ul style="list-style-type: none"> • Comms contractor • Backbone org to coordinate • Stewardship team to guide • We all disseminate, champion the promotion (catalysts) |
| <p>Resources?</p> <ul style="list-style-type: none"> • Money for comms contract & development • ToC clarified • Leadership - Stewardship team, Backbone org. | <p>When?</p> <ul style="list-style-type: none"> • Comms plan - short term (3-6 mths) |

Goal 5: increase research coordination

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| <p>Success?</p> <ul style="list-style-type: none"> • Alliance is a voice to advocate effective funding to support creation of HSC • Alignment & understanding of what a CSH approach is • No longer a need for scans | <p>Who?</p> <ul style="list-style-type: none"> • Small group of researchers • Engage with int'l audience • Link to PHE Canada research council • Provincial research groups |
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| | <ul style="list-style-type: none"> • All levels P/T, national and district (eg. Catch - texas) • Secretariat |
| Resources? <ul style="list-style-type: none"> • Teleconference lines • Scan of the scans • Needs a digital and IP home • PHE centrics • Thru Alliance (research arm- SIG - special interest group) | When? <ul style="list-style-type: none"> • Now - 12 months • (needs to be done thoughtfully with purpose) |

Goal 6: shared measurement

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|---|--------------|
| Success? <ul style="list-style-type: none"> • Number of CSH schools in canada tracked • Vanity metrics | Who? |
| Resources? | When? |

Action: the stewardship will reflect upon and revise the goals based on this feedback. The revised goals will be shared back with the participants as version 2 for further fine-tuning.

Membership - Terms of Reference

Ken then walked through the Alliances Terms of Reference and membership. Some recommendations were noted to help refine them.

- What is the Alliance - condense sentence to say...the alliance is a collaboration of stakeholders working together to advance HSC.
- Guiding Principles - questions were raised about ensuring more space to co-create/co-design - also a question about what are the drivers and levers was raised.

Ken then raised an open-ended question of whether participants saw the fit between the Alliance and their work or organization?

Various participants declared that the Alliance goals did align with their respective organization's goals and interests. Some could see themselves being able to support the Alliance goals even though their organization may not be explicitly use a CSH model in their work. No one identified that the Alliance was not a fit at least conceptually. Ken and Melanie identified that the Stewardship Group would take away the thoughts and suggestions and commit to considering them while reworking aspects of the membership content in the TOR.

Next steps

Several people offered to move action items forward. The following list was agreed upon:

Stewards will reach out to today's participants to seek input into a Theory of Change Working Group. It is hoped that this group can revise the proposed Theory of Change and present an updated version at our next meeting on July 2nd, 2019.

A second activity will be initiated by Kerri Murray which will focus on conducting an audit of what is happening and our contributions to this important work. We look forward to being a part of this.

Lastly, there was as request for clarity around membership. This will further help guide organizational decisions if they aim to be contribute and be a "member".

Last thoughts

The day ended with a go around the room asking for any final thoughts or reflections on the day. There were no new themes or comments only confirmation of what we heard throughout the day.

One of the Alliance's goals for the day was action. Two action items came out of the day – audit and theory of change.

Thanked everyone for the attendance and participation

Adjournment