**School Health Promotion in Manitoba**

**Manitoba in Profile**[[1]](#footnote-1)

The province of **Manitoba** is located between Saskatchewan and Ontario, at approximately the center of the country. Land and freshwater area total almost 650,000 square kilometers.

Manitoba enjoys a rich population mix, with people from every continent and virtually every country in the world providing a wide infusion of cultures and a broadened heritage. The Aboriginal population of Manitoba was joined by the Scottish Selkirk settlers in 1811, English and French Canadians after confederation in 1870, followed by Russian Mennonites, Icelanders, Ukrainians and Germans in subsequent years. Post W.W.II saw additional immigration from Europe and most recently from the Caribbean, South America, Africa and Asia.

Manitoba's school system is comprised of public schools, independent schools that receive provincial funding, non-funded independent schools and home-schooled students. Public schools operate directly under the Minister of Education and Advanced Learning. These schools are governed by locally elected school divisions/district boards. The operation of independent schools varies. Some schools are affiliated with a specific religious or denominational group. They have their own governing bodies or boards. Independent schools are eligible for provincial funding if they implement the Manitoba curriculum and meet a number of additional requirements.

English and French are the languages of instruction in Manitoba. Schools that provide French language instruction fall into one of two program models:

* *French Immersion* schools are intended for students for whom French is a secondlanguage.
* *Français* schools are intended for students for whom French is a first or home language.

The responsibility for providing the delivery of, and administering, health services is delegated to 5 Regional Health Authorities or RHAs, each of which sets the policy framework (consistent with the provincial objectives and priorities) and strategic priorities for their region and allocates resources according to these priorities. There is no formal link between the school divisions and RHAs.

**Healthy Schools Manitoba**

**Healthy Schools** is Manitoba’s school health initiative. It attempts to reach students bypromoting health within and beyond the classroom. Designed to promote the physical, emotional, and social health and wellness of students, their families, school staff, and school communities, Healthy Schools is based on the belief that health is important to learning and that schools are uniquely positioned to influence healthy child, youth, and family development. The mission is to create school environments that enhance the healthy development of children and their families by working in partnership with community service providers and resources.

The initiative draws on the principles of a [Comprehensive School Healt](http://www.gov.mb.ca/healthyschools/about/csh.html)h approach which helps educators, health practitioners, school staff, students and others to create a healthy school environment in a planned, integrated and holistic way.

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Understanding that the needs, issues, and concerns of students, families, and schools differ from community to community, there are nonetheless five key elements in the Healthy Schools model:

* Access to health and social supports (and these include health, social and related services)
* Integrated teaching strategies (e.g. connections between curricula; the combined  [Physica](http://www.edu.gov.mb.ca/k12/cur/physhlth/index.html)l  [Education/Health Education curriculu](http://www.edu.gov.mb.ca/k12/cur/physhlth/index.html)m)
* Healthy physical and social environments
* Community partnerships
* Healthy lifestyle choices

Healthy Schools focuses on six important health issues in the school community:

* [Physical Activit](http://www.gov.mb.ca/healthyschools/issues/physical.html)y
* [Healthy Eatin](http://www.gov.mb.ca/healthyschools/issues/nutrition.html)g
* [Safety and Injury Preventio](http://www.gov.mb.ca/healthyschools/issues/safety.html)n
* [Substance Use and Addiction](http://www.gov.mb.ca/healthyschools/issues/substance.html)s
* [Sexual Healt](http://www.gov.mb.ca/healthyschools/issues/sexual.html)h
* [Mental Health](http://www.gov.mb.ca/healthyschools/issues/mental.html)

For additional information, see the [Manitoba Healthy Schools Website](http://www.gov.mb.ca/healthyschools/).

**Background**

[Healthy Schools](http://www.gov.mb.ca/healthyschools/index.html) was introduced in Manitoba in 2000 as “Nurses-in-Schools” to provide a strengthened public health and primary health capacity in schools, and to promote activities to support wellness in school communities. In December 2002, a Provincial Consultation Forum was held to develop a Healthy Schools framework. Based on the consultation, “Nurses-in-Schools” grew into the broader “Healthy Schools”, to better reflect the needs and capacities of school communities. The Healthy Schools framework was approved by Healthy Child Committee of Cabinet in 2003 and it included three main components:

1. Promoting community-based activities (Healthy Schools Grant)
2. Developing resources for province-wide use
3. Promoting targeted provincial activities in response to issues affecting the health and wellness of the school community

Healthy Schools is Manitoba’s school health initiative designed to promote the physical, emotional and social health of school communities. It is based on the belief that good health is important for learning and that schools are in a unique position to have a positive influence on the health of children, youth and their families. Healthy Schools is a partnership between three provincial departments, including Health, Healthy Living and Seniors (HHLS), Education and Advanced Learning (EAL), and Children and Youth Opportunities – Healthy Child Manitoba (HCM).

Healthy Schools is rooted in Comprehensive School Health which is an internationally recognized framework for supporting improvements in students’ educational outcomes while addressing school health in a planned, integrated and holistic way. Healthy Schools is available to all Manitoba schools and focuses on six priority health issues in the context of the school community (healthy eating, mental health, physical activity, safety and injury prevention, sexual health, and substance abuse and addictions).

Representatives from the three government partner departments (i.e. HHLS, EAL and HCM) comprise the Healthy Schools Management Team, responsible for the overall management of Healthy Schools, and the Healthy Schools Coordinating Team (HSCT), responsible for the program planning and execution of Healthy Schools.

**Implementation**

Implementation of the Healthy Schools initiative depends on the voluntary participation of 5 Regional Health Authorities (RHAs) and 37 school divisions which are autonomous and set their own strategic priorities. A number of regions have a healthy schools committee (where both the health and education sectors participate) to facilitate planning and implementation. Ideally, these committees would meet on a regular basis, assess the community to identify priority issues and follow up with plans and implementation.

Healthy Schools includes the following components and related school health promotion activities:

* 1. **Healthy Schools Grant**

School divisions receive $5,000 plus $2.06 per student. Non-funded and First Nations schools receive $125.00 plus $2.06 per student. Grants to school divisions are monitored through Manitoba Education and Advanced Learning’s Categorical Grants Review Process.

* 1. **Provincial Resource Development**

Healthy Schools develops/supports the development of a number of resources for schools/school communities. The [Healthy Schools](http://www.gov.mb.ca/healthyschools/index.html) website provides information and educational materials to assist school communities to promote health. An electronic subscription ( [Healthy Schools eNew](http://www.gov.mb.ca/healthyschools/subscribe.html)s) service that provides the latest information related to Healthy Schools

* 1. **Related Activities**

HHLS, through Healthy Schools, supports/facilitates the delivery of school health promotion activities that complement the Healthy Schools initiative. Examples include:

1. **Healthy Schools *in motion***, a highly visible component of [**Manitoba *in motio***](http://www.manitobainmotion.ca/)***n*** which promotes and supports daily physical activity in schools. Schools can become ***in motion*** by working toward the goal of 30 minutes of physical activity every day for every student.
2. **Nutrition in Schools** mandating all schools in Manitoba to establish schoolnutrition policies. Schools are provided resources through the  [Food in School](http://www.gov.mb.ca/healthyschools/foodinschools/index.html)s website and a copy of the  [*Manitoba School Nutrition Handbook: Getting Starte*](http://www.gov.mb.ca/healthyschools/foodinschools/documents/handbook.pdf)*d*  [*with Guidelines and Policies*](http://www.gov.mb.ca/healthyschools/foodinschools/documents/handbook.pdf)document.
3. [***Low Cost Bike Helmet Initiativ***](http://www.gov.mb.ca/healthyliving/bikesafety/helmets.html)***e***,where all preschool and school-aged children inthe province are provided an opportunity to purchase affordable bike helmets for the whole family.
4. **Mandating the Physical Education/Health Education curriculum** from gradesK-12.  [Resources](http://www.edu.gov.mb.ca/k12/cur/physhlth/curriculum.html) have been developed to assist schools with implementation.

**Challenges and Keys to Success**

Decentralization of RHAs and school divisions poses a challenge. Because RHAs and school divisions are autonomous and set their own priorities, there is no control over the rate or approach used in implementation. Funding of school divisions is meant to encourage partnerships and the efficient and effective use of available resources, but partnerships cannot be mandated. They must rely on previously developed relationships and local champions. Differences in capacities (e.g. human resources) and geographical challenges partially explain differences in implementation, but not all.

On the other hand, a major key to success is the high-level partnership and relationships among the three Healthy Schools partners. The visibility and support that accrues from this partnership guarantees a dedicated position for Healthy Schools and implementation support.

**Benefits of JCSH Membership**

The benefits that accrue from membership in the Consortium include knowledge exchange and networking that assist representatives of Manitoba Healthy Schools to uncover information and resources to continue to improve the initiative. A national perspective creates a single, strong voice for school health across the country.

For additional information contact **Kaley Pacak** at [Kaley.Pacak@gov.mb.ca](mailto:Kaley.Pacak@gov.mb.ca) or visit Manitoba’s Healthy School website at  [www.gov.mb.ca/healthyschool](http://www.gov.mb.ca/healthyschools)s

1. *Sources: A Statistical Profile of Education and Training in Manitoba 2000-01 to 2004 -05*, Department ofEducation, Citizenship, and Youth and Manitoba Health Population Report June 1, 2006 [↑](#footnote-ref-1)