Canadian Consensus Statement (Revised 2007)
Schools and communities, working in partnership to create and foster health-promoting schools

Comprehensive School Health

This Consensus Statement has been prepared and endorsed by a number of national organizations to promote a comprehensive approach to school-based and school-linked health promotion. This comprehensive approach integrates responses to several health and social problems and promotes the overall health and learning of children and youth, as well as adults who work in and with schools, parents/caregivers and surrounding communities. This approach also seeks to coordinate multiple interventions in the form of policies, programs and services delivered by various professionals, agencies and government ministries.

The Issue

The health and well-being of children, youth and school personnel is influenced by many factors, including family income, social support networks, personal health practices and coping methods, biology and genetics, education, and the physical environment of the home and school (1).

It is also clear that health promotion in schools can improve children’s health and well-being (2, 3). Comprehensive School Health, also known as “health promoting schools” in some regions, refers to a multifaceted approach that includes teaching health knowledge and skills in the classroom, creating health-enabling social and physical environments and facilitating links with parents, local agencies and the wider community to support optimal health and learning (2, 4). Experience and research indicate that, while results vary between programs, such a comprehensive approach to school health promotion can influence the health-related knowledge, attitudes and behaviours of students, and alleviate factors that compromise health (2). There is also a growing recognition of the relationship between health and academic performance (5).

Expectations of the school setting for health improvement must be realistic, as the social determinants of health as well as family expectations and practices, have a profound impact on health. However, supportive school environments that foster resilience and focus on asset development, protective factors and social connectedness, reduce the risk of health-related problems and support the healthy growth and development of children and youth.

The Goals

The goals for a health promoting school, adapted from those prepared by the World Health Organization (6), are to:

- Foster health and learning with all the measures at its disposal;
- Engage health and education officials, teachers, teachers’ unions, students, parents, health providers and community leaders in efforts to make the school a healthy place for all;
- Strive to provide a healthy environment, school health education and school health services, health promotion programs for staff, healthy food choices, daily physical activity/education, and programs for counselling, psychological intervention, social support and mental health promotion;
- Implement policies and practices that respect an individual’s well-being and dignity, provide multiple opportunities for success, and acknowledge good efforts and intentions as well as personal achievements.
The Components

A comprehensive approach to school-based health promotion is designed, not only to affect individual health behaviours, but to also provide supportive environments in which young people live and learn. Comprehensive school health calls for an integrated approach that incorporates health and health messaging into all aspects of school activities and engages the community at large. It incorporates four main elements – teaching and learning, health and other support services, supportive social environment and a healthy physical environment (6):

1. Teaching and learning - is the basic way students and staffs receive information about health, wellness, health risks and health issues (4). It includes:
   - a comprehensive, K-12 health curriculum encompassing all facets of health (mental, physical, emotional and spiritual), varied materials and media; cross-curricular learning opportunities, incorporation of learning strategies that are culturally sensitive and developmentally appropriate; and lifestyle-focused physical education;
   - effective teaching and learning approaches that support development of students’ knowledge, attitudes, skills and behaviours for healthy decision making; fosters life skills such as health literacy, problem-solving, communications skills and promotes a sense of personal competency, self-efficacy and social responsibility;
   - the planned use of other informal learning opportunities;
   - effective pre-service and in-service training for educators.

2. Health and Other Support Services – the availability and accessibility of health and other support services are keys to the early identification and treatment of many problems that can lead to long-term learning difficulties if not addressed (4). Many of these services are appropriately delivered through the school. Others should be delivered through public health, social service organizations, government/non-government agencies and other local agencies and community partners. For children and families, the school is often the most important access point for students and families. Examples of such services include:
   - social and psychological screening/assessments for early identification, intervention and referral where appropriate;
   - child protection and other social work services;
   - public health services;
   - guidance services, psychological intervention and mental health promotion;
   - services for special needs students;
   - treatment, post-treatment support and rehabilitation services;
   - police services;
   - recreational services;
   - after school programming
   - pre-service and in-service training of health and other professionals;
   - active coordination of services and programs.

3. Supportive Social Environment – refers to the mental health and social support available within the school and in relation to the home and community. It may be informal (i.e. friends, peers, teachers) or formally articulated through school policies (4). Examples include:
   - role modeling by school staff and others;
   - peer support and support group development;
   - community participation and media cooperation;
   - staff wellness programs;
   - appropriate school discipline policies and effective management practices;
   - active student and parent participation.
4. Healthy Physical Environment – a clean, safe, health-promoting environment helps prevent injuries and disease; it also enables healthier choices(4). Examples include:

- safety procedures and regulations;
- sanitation, clean water and hygiene standards;
- environmental health standards;
- food and nutrition policies that promote healthy eating including access to healthy foods as well as safe and supportive eating environments;
- smoke-free school policies;
- multiple opportunities for physical activity including sport and extra-curricular activities;
- accessible and sustainable environments that promote physical activity, safety and freedom from bullying or harassment.

The Partners

The programs, activities and services delivered within such comprehensive approaches to school health are the responsibility of everyone in the community: young people; families; professionals, institutions, agencies and organizations concerned with children and youth; the education, health, social services, law enforcement, and voluntary sectors; the broader community and governments at all levels. Each of these individuals, organizations and government departments can potentially contribute to teaching and learning, health and other support services, supportive social environments and healthy physical environments. Effective linkages between partners and coordination at all levels, from national to local school levels, are fundamental to sustainability.

The Organizational Capacities

In order to support health-promoting school communities in a sustained manner, the organizational capacities of health and education systems (ministries, agencies, schools, professionals, communities) need to be strengthened in areas such as (7, 8):

- comprehensive and coordinated policies on school health, health issues and the elements of school health promotion that are actively supported by senior managers;
- assigned staffing infrastructure to support interdisciplinary cooperation at all levels;
- formal and informal mechanisms for coordination and cooperation;
- active knowledge transfer and exchange within and across sectors;
- ongoing workforce development of health and education professionals through professional preparation programs and staff development;
- providing regular and reliable data on the health status, determinants, behaviours, attitudes, skills and knowledge of children and youth, as well as periodic surveys and self-assessments of policy/program capacity;
- regular scans of the environments, trends and emerging issues that affect the health of children and youth;
- appropriate and sustained funding to ensure the continuance of programs which demonstrate effectiveness.

The Benefits

An authoritative systematic review of the literature on the effectiveness of the health promoting schools approach concluded that, while there is wide variability among programs, school health promotion can improve the health and well-being of children and youth. Initiatives most likely to be effective are those that use a multifaceted approach that includes classroom instruction, change in the social and physical environment of the school, creation of links with the wider community and are sustained over a long period of time. There is a need for further research on
promoting health in schools to more clearly establish what works, why it works, and its cost effectiveness (2).

References


The following organizations have endorsed the statement on Comprehensive School Health (others to be listed as permission is received).

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