

SCHOOL HEALTH⁺ CONNECTION

HEALTHY KIDS + HEALTHY COMMUNITIES

SCHOOL WELLNESS TOOLKIT

A Guide to Implementing Coordinated School Health in
New Orleans Schools



The School Wellness Toolkit Table of Contents

SECTION 1: Introduction to School Wellness

How to use this toolkit..... p. 5

Introduction to school wellness and coordinated school health..... p. 6

SECTION 2: The Coordinated School Health Approach

What is coordinated school health?..... p. 10

 Healthy School Environment..... p. 13

 Health Education..... p. 14

 Physical Education..... p. 15

 Health Services..... p. 16

 Nutrition Services..... p. 17

 Counseling and Psychological Services..... p. 19

 Health Promotion for Staff..... p. 20

 Family and Community Involvement..... p. 21

SECTION 3: Implementing a Coordinated School Health Program

Best Practices for Implementing Coordinated School Health..... p. 23

Step 1: Designate a school wellness coordinator and form a wellness committee..... p. 24

Step 2: Complete a school health assessment..... p. 30

Step 3: Develop a school wellness policy..... p. 33

Step 4: Set priorities and plan for action..... p. 36

Step 5: Take pride in your accomplishments! p. 42

Step 6: Monitoring and evaluation p. 46

SECTION 4: Additional Resources

Appendix A: Resources for Implementing Coordinated School Health p. 51

Appendix B: Critical Health Issues and Risk Behaviors Affecting Youth p. 57

Registries of Programs Effective in Reducing Youth Risk Behaviors.....p. 59

Referencesp. 60

This toolkit was created and written by Tracey Patterson, MPH, for School Health Connection, a program of the Louisiana Public Health Institute.

With funding from the W.K. Kellogg Foundation, the school wellness project at School Health Connection aims to increase health promotion for students and families, enhance student health services, and provide technical assistance to implement coordinated school health programs.

SECTION 1:

INTRODUCTION TO SCHOOL WELLNESS

How to use this toolkit

This toolkit is designed to be a practical manual that can guide you through the process of implementing a school wellness program **at the school level**. Many national school wellness and coordinated school health guides address implementing school health programs from a district or state level. Due to the multiple districts within New Orleans and the amount of schools operating autonomously under charters, it is important to understand how to implement school health and wellness programs on the ground level at individual schools.

If your school is starting a new coordinated health and wellness program, this guide can provide you with steps to follow and resources needed to get a program off the ground. Or, your school may choose to use certain sections of this guide to improve some of your school's health services or environment. These resources are here to help and serve as a guide.

Keep in mind, there is no single 'best' coordinated school health program model that will work in every school. Coordinated school health programs are best designed locally, and collaboration among school and community stakeholders is essential if programs are to be accepted and effective. Successful change happens at the point where the 'top down' and the 'ground up' meet. School principals and administration must support the development of coordinated school health programs in order for them to be implemented effectively. However, school staff, community, student, and parent support are equally important to the success.

This toolkit is designed to help anyone who wants to take an active role in developing a coordinated school health program—such as a school administrator, school nurse, social worker, board member, health professional, teacher, student, parent or community member. This toolkit will provide guidance and resources needed to implement and maintain a coordinated school health program in a school. There is so much that schools can do to improve the health, well-being, and academic success of their students.

This toolkit has four sections:

Section 1 provides background information about school wellness and coordinated school health programs.

Section 2 gives more information about coordinated school health and its 8 components.

Section 3 provides a step-by-step plan to implement coordinated school health at a school.

Section 4 offers additional resources that address coordinated school health and the most critical health issues to address with youth.

Introduction

“Schools have more influence on the lives of young people than any other social institution except the family and provide a setting in which friendship networks develop, socialization occurs, and norms that govern behavior are developed and reinforced.”

—Healthy People 2010, U.S. Department of Health and Human Services

School Health Connection’s school wellness project aims to improve the health and well-being of students and families in New Orleans schools. School wellness programs provide a means for improving school health policies, curricula and programs that support the overall health and education of students, families, and their communities. A school wellness program is a commitment to supporting the whole student, by addressing the physical and mental health of students as an integral component of learning, growing, thriving and succeeding. The movement for school wellness programs is growing around the country, as the rates of obesity, physical inactivity, and chronic health conditions have become far too prevalent among children and teenagers. School wellness programs are a means to address these lifestyle-related health burdens during the most critical developmental years.

Why is coordinated school health needed in New Orleans schools?

While New Orleans public schools have been making many academic improvements since the restructuring following Hurricane Katrina, access to comprehensive services and programs that support the health and well-being of New Orleans students remains an unmet need.

School wellness programs are particularly important in predominantly low-income and minority communities, such as the New Orleans public schools. While the obesity epidemic and rise of related chronic diseases is felt across the nation, the prevalence of poor health is often highest in low-income communities and communities of color. This is due to many factors:

- Families without reliable health insurance often lack a consistent primary physician who can provide preventative and continual care.
- Many low-income communities lack access to affordable and high-quality healthy foods, such as whole grains, fresh fruits and vegetables, low-fat dairy and lean meats.
- Families may lack the resources—including money and knowledge—to purchase healthy, balanced foods within a limited budget.
- Low-income children often have fewer opportunities to be physically active, often due to concerns about crime and safety, and a lack of parks or adequate recreational

facilities to play and exercise outside. At the same time, families have less financial ability to participate in organized recreational activities.

- Social disadvantage and poor health are intertwined and often cyclical. Health disparities put socially disadvantaged youth at further disadvantage, as their poor health often elevates their risk of further social disadvantage (through health-related school absences, job loss, etc.), which can then worsen their ill health, and so on.

Beyond obesity, poor nutrition, and physical inactivity, low-income and African-American communities are also burdened with higher rates of asthma, cancer, diabetes and HIV/AIDS.¹ Additionally, after more than a decade of improvement, trends in the sexual and reproductive health of teens and young adults have flattened, and in some instances are worsening, according to a the CDC.² After two decades of decline, rates of sexually transmitted infections (STIs) and teen pregnancy have risen over the past 5 years across the country, and African-American and low-income youth are disproportionately affected by STIs, including HIV/AIDS, and unintended teen pregnancy. Adolescent reproductive health concerns are particularly prevalent in Louisiana. The teen pregnancy rate remains very high, and national research has shown that teen pregnancy is the leading cause of school drop-out among teen girls. Furthermore, New Orleans has one of the highest STI and HIV infection rates in the nation.²

The potential for school wellness programs to reduce these disparities is enormous. Schools with a high percentage of low-income and minority students have the opportunity to develop school wellness programs that meet the very specific needs of their students. New Orleans schools have the opportunity to reduce many of these health disparities by taking a proactive, preventative approach by implementing coordinated school health programs.

At the same time, New Orleans schools face many barriers of their own. Among other obstacles, the school district and charter school landscape is complex and constantly changing, budgets are tight, staff turnover is high and there is a greater pressure to boost standardized test scores than ever. These issues present very real challenges to schools that wish to provide a quality education to their students. Yet, the potential for New Orleans youth to benefit from a dynamic, responsive, coordinated school health program is enormous. Focusing on preventing illness and promoting health is an important investment in the future of our youth and our city.

¹ Mead, H., Cartwright-Smith, L., Jones, K., Ramos, C., Siegel, B., Woods, K. (2008). "Racial and Ethnic Disparities in U.S. Healthcare: A Chartbook." The Commonwealth Fund.

² Centers for Disease Control and Prevention., Department of Health and Human Services. Adolescent Reproductive Health. <http://www.cdc.gov/reproductivehealth/AdolescentReproHealth/>. Accessed June 2, 2010.

Roles and Benefits of a School Wellness Program

The aim of school wellness programs is to support and enhance the health and well-being of students and families by improving the school environment, policies and educational opportunities. Indicators of poor health—such as hunger, substance abuse, physical inactivity, and violence—have been consistently shown to negatively impact academic performance and affect school attendance, grades and test scores, and the ability to learn and focus in class.^{3,4,5}

However, research shows that school health and wellness programs can have a positive impact on academic performance and educational outcomes, as well as improving students' health outcomes and reducing high-risk behaviors.^{6,7,8}

Children attend school during the most formative years of their lives. These are the years where many habits and preferences develop, and these habits are often maintained into adult life. Health and education experts believe that the implementation of comprehensive school health and wellness programs could be one of the most efficient strategies that could be used to prevent major health and social problems.⁹

Schools invariably influence the health-related behaviors of students. Schools can provide a supportive, healthy environment where youth are given the opportunity to develop to their full potentials. Schools that serve healthy and nutritious food, provide ample time for physical activity and education, and provide consistent and repeated health messages from by teachers, school staff, peers and families can be more effective in promoting the health and academic success of its students.

³ Swingle CA. *The relationship between the health of school-age children and learning: implications for schools*. Lansing, MI: Michigan Department of Community Health; 1997.

⁴ Mandell DJ, Hill SL, Carter L, Brandon RN. *The impact of substance use and violence/delinquency on academic achievement for groups of middle and high school students in Washington*. Seattle, WA: Washington Kids Count, Human Services Policy Center, Evans School of Public Affairs, University of Washington; 2002.

⁵ Hanson T et al. *Ensuring That No Child Is Left Behind: How Are Student Health Risks & Resilience Related To the Academic Progress of Schools?* San Francisco, CA: WestEd; 2004.

⁶ Murray NG, Low BJ, Hollis C, Cross AW, Davis SM. Coordinated school health programs and academic achievement: A systematic review of the literature. *Journal of School Health* 2007;77(9):589–600.

⁷ Taras H. Nutrition and student performance at school. *Journal of School Health* 2005;75(6):199–213.

⁸ Taras H. Physical activity and student performance at school. *Journal of School Health* 2005;75(6):214–218.

⁹ Kolbe LJ, Collins J, Cortese P. Building the capacity of schools to improve the health of the nation: A call for assistance from psychologists. *American Psychologist*. 1997;52(3):1-10.

SECTION 2:

THE COORDINATED SCHOOL HEALTH APPROACH

What is coordinated school health?

What comes to mind when most people think of school health? School nurses? Health education classes? These are essential parts of school health, but they are only two of the ways that schools promote health. In order to fully support the health and well-being of students, families and staff, schools must look at multiple aspects of their operation to see where improvements can be made. It is well known that poor health is detrimental to learning, and that both good health and high-quality education can improve the potential of youth to lead productive lives in their future.

A coordinated school health program is a systematic approach that addresses the interrelationships between the school environment, health and learning. An organized, coordinated approach is effective and efficient at promoting the health of students, staff and families. A coordinated school health approach recognizes that schools are multifaceted, and there are many ways that schools can help—or hinder—the health of their students, families and staff. By addressing multiple aspects of the school environment, health and wellness interventions and programs are much more effective than health education alone.

There is ample evidence that shows the positive impact of the coordinated school health approach on student health and learning outcomes. School administrators have reported that coordinating school health initiatives results in¹⁰:

- Reduced absenteeism
- Fewer classroom behavior problems
- Improved academic performance
- Greater interest in healthy diets
- Increased participation in fitness activities
- Delayed onset of certain health risk behaviors
- Less smoking among students and staff
- Lower rates of teen pregnancy

¹⁰ McKenzie, F. and Richmond, J. Linking Health and Education: An overview of coordinated school health programs. In Marx and Wooley (eds.) (1998) Health is Academic: A Guide to Coordinated School Health Programs. New York City: Teachers College Press.

The coordinated school health model developed by the U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) consists of eight different components of school health:



- 1. Healthy School Environment:** The physical, emotional and social climate and culture of the school supports and enhances the health of students, staff and families. School policies address the health of students along with academics. The school environment includes the physical, emotional and social conditions that affect the well-being of students and staff.
- 2. Health Education:** A comprehensive health curriculum that addresses the physical, mental, emotional and social dimensions of health. The curriculum provides knowledge and skills that help students maintain and improve their health, prevent disease and reduce health-related risk behaviors. The curriculum includes a variety of topics such as personal and family health, community health, environmental health, sexuality, mental and emotional health, injury prevention and safety, nutrition, disease prevention and control, and substance use and abuse.
- 3. Physical Education:** A comprehensive, sequential curriculum that provides learning experiences in a variety of activity areas. Quality physical education should promote, through a variety of planned physical activities, each student's optimum physical, mental, emotional, and social development, and should promote activities and sports that all students enjoy and can pursue throughout their lives.

4. **Health Services:** Services are provided for students to appraise, protect and promote health. These services are designed to ensure access or referral to primary health care services, foster appropriate use of primary health care services, prevent and control communicable disease and other health problems, provide emergency care for illness or injury, promote and provide optimum conditions for a safe school facility and school environment, and provide educational and counseling opportunities for promoting and maintaining health.
5. **Nutrition Services:** Access to a variety of nutritious, appealing and affordable meals that accommodate the health and nutrition needs of all students. School nutrition programs should meet or exceed the U.S. Dietary Guidelines for Americans. The school nutrition services are designed to maximize each child's health and education potential, and provide an environment that promotes health eating habits for all children.
6. **Counseling and Psychological Services:** Services are provided to improve students' mental, emotional and social health; this includes individual and group assessments, interventions and referrals. School counselors, social workers and psychologists contribute not only to the health of students but also to the health of the school environment. Prevention services facilitate positive learning and healthy behavior, and enhance healthy child and adolescent development.
7. **Health Promotion for Staff:** Opportunities for school staff to improve their health status through activities such as health assessments, health education and health-related fitness activities. These opportunities encourage school staff to pursue a healthy lifestyle that contributes to their improved health status, improved morale and a greater personal commitment to the school's overall coordinated health program.
8. **Family and Community Involvement:** An integrated school, parent and community approach for enhancing the health and well-being of students. School health advisory councils, coalitions and broadly based constituencies for school health can build support for school health program efforts. Schools actively solicit parent involvement and engage community resources and services to respond more effectively to the health-related needs of students.

How can schools work to improve these areas of coordinated school health?

Healthy School Environment

Create and enforce health-supportive school policies:

- Develop and ratify a local school wellness policy, with school-specific components, even if one exists at the district level.
- Provide a safe environment free from harassment for all students and staff.
- Ensure that the school has a crisis management plan for emergencies, health crises, and behavioral/emotional crises. Effectively communicate this plan in a clear, easy-to-understand format to all staff.

Improve the physical environment of the school to promote healthy behaviors and to reduce illness and injuries:

- Provide safe, free drinking water for all students and staff.
- Require that all school busses turn engines off while picking up or unloading students to reduce asthma-triggering air pollution from engine idling.
- Improve indoor air quality by preventing pest infestations (mice, cockroaches, etc.) by using the least-toxic integrated pest management solutions.
- Repair or replace damaged or missing playground equipment.
- Assess building and grounds for needed structural and aesthetic repairs.
- Create a list of safe, non-toxic products to be used for cleaning.
- Keep school building and grounds free of litter.

Promote a healthy, emotionally supportive and positive social climate and culture:

- Conduct workshops for staff and parents on conflict resolution skills.
- Use morning and afternoon announcements to promote healthy behaviors, optimistic habits of thought, and to highlight positive behaviors and actions.
- Provide inviting areas for students to eat during lunch, to play during recess, and to develop healthy social skills.
- Allow staff and students to create a school beautification garden.
- Build opportunities for students to have adult mentors and positive peer support.
- Staff should model supportive and positive behaviors to students at all times.

Health Education

Provide students with a comprehensive, sequential health curriculum taught by a certified health education teacher:

- Implement a comprehensive health curriculum with students in kindergarten through high school that meets Louisiana State Grade-Level expectations and builds upon knowledge and skills progressively each year.
- Review current curriculum using national health education standards using the CDC's Health Education Curriculum Analysis Tool (HECAT), which is available to order or download for free at <http://www.cdc.gov/HealthyYouth/hecat/>.
- Provide professional development opportunities for health teachers on effective health education. If local professional development opportunities are not available, encourage health teachers to attend state or national conferences.

Afford flexibility in the health curriculum to address risky health behaviors specific to each age level and school situation:

- Bring additional proven resources and programming into health classes in cities such as New Orleans, where there is a high rate of obesity, violence, drug and alcohol abuse, teen pregnancy and sexually transmitted infections. (See Appendix B for a registry of evidence-based programs that are effective in reducing youth risk behaviors.)
- Utilize public and private grants to support additional risk-reduction programming in schools, such as the federal Title IV grant for Safe and Drug-Free Schools.
- Identify individuals and leaders within the community to invite as speakers on different health topics.

Incorporate health content into lessons across the curriculum:

- Collaborate with curriculum areas and academic departments to integrate health content into cross-curricular learning opportunities.
- Include the school nurse and social worker in curriculum planning and development so that the school's health service providers can support classroom learning.
- Display health promotion posters, use school-wide announcements to promote health, or create a school garden so that the school's commitment to healthy living is visible to all.

Physical Education

Provide students with a comprehensive, sequential physical education curriculum:

- Review current P.E. curriculum using national physical education standards using the CDC’s Physical Education Curriculum Analysis Tool (PECAT), which is available to order or download for free at <http://www.cdc.gov/HealthyYouth/pecat/>.
- Allow opportunities for physical education teachers to receive professional development in physical education-specific teaching strategies.

Offer physical activity and learning experiences in a variety of activity areas:

- Provide physical education with classes or units in a variety of activity areas such as basic movement skills; physical fitness; rhythm and dance; games; team, dual, and individual sports; tumbling and gymnastics; and aquatics.
- Implement physical activities that can be incorporated into non-physical education classes throughout the day. It is recommended that school-age children accumulate at least 60 minutes (and up to several hours) of physical activity per day while avoiding prolonged periods of inactivity—classroom activities should include physical movement whenever possible and appropriate.
- Recess has been shown to improve attention and concentration in the classroom. Schools should incorporate at least 20 minutes of recess per day in addition to physical education classes.

Promote activities and sports that students enjoy and can pursue throughout their lives:

- Walk- and bike-to-school programs, such as Safe Routes to School, can increase student levels of physical activity and promote active lifestyle habits. Safe Routes to School programs also improve the safety of those walking and biking around schools, decrease traffic near schools, and reduce school transportation costs.
- Interscholastic sports provide a way for students to work together, engage in friendly competition, and often increase school spirit. Interscholastic sports should be available to both female and male students, in a variety of sports.
- Intramural sports are a great way for schools to offer physical activity opportunities before, during or after school hours that give students of all skill levels an equal chance to participate. Provide students with a choice of activities such as walking, running, hiking, swimming, tennis, dancing and bicycling.

Health Services

Provide a qualified school nurse on site at school full-time:

- Ensure that the school nurse meets the basic requirements for employment in the state of Louisiana—she or he must be a licensed Registered Nurse certified by the Board of Elementary and Secondary Education.
- The Centers for Disease Control and Prevention recommend a standard of one school nurse per 750 “well” students; if school nurses split their time among more than one school, this ratio should be applied to the multiple school population numbers. If there are many students with special health needs, this ratio should be adjusted to reflect the extra care and time needed.

Establish protocols for effective management of student health conditions:

- Identifying students with health problems that require additional care is an essential function of school nurses. Asthma requires monitoring and close control by school nurses and the student’s primary care provider. School nurses should also be prepared to recognize signs and symptoms of childhood obesity, type II diabetes, drug or alcohol abuse, eating disorders and psychological disorders.
- School nurses should establish a protocol or memorandum of understanding for referrals to appropriate community-based clinics and providers. If there is a school-based health clinic (SBHC) on campus, school nurses and SBHC staff must establish a triage protocol for treatment and referral of students.
- For effective case management of students with chronic conditions, collaboration and coordination with school, community health and social services can provide more efficient and effective services for students. All school personnel involved with students should be aware of certain conditions that affect their health. Schools are ideal locations to provide regular monitoring for students at risk of being overweight or obese, malnourished, underweight, anemic, diabetic or having eating disorders

Provide access to community-based health services on school campus whenever possible:

- School nurses should be involved with health promotion and prevention beyond the treatment of acute health issues—partnering with community-based agencies that provide health promotion and prevention services can be very effective.
- Schools can be an excellent venue to host health fairs open to the school community and the general public.

Nutrition Services

Improve or remove vending machines that sell unhealthy snacks and beverages from schools:

- Louisiana has strict legal standards for the foods and beverages sold on school property, in vending machines or at school stores! In 2005, the State Senate passed Act 331 which specifies nutritional criteria for foods sold on school grounds at any time during a period beginning one-half hour before the start of the school day and ending one-half hour after the end of the school day.
 - Snack food or desserts must have less than 150 calories per serving, less than 35 percent of their calories from fat, and have less than 30 grams of sugar per serving, except for unsweetened or uncoated seeds or nuts.
 - Beverages that may be sold are 100 percent fruit juices or vegetable juice without added natural or artificial sweeteners (no more than 16 ounces); unsweetened flavored drinking water or unflavored drinking water; and low-fat milk, skim milk, flavored milk and non-dairy milk. High schools may also include no-calorie or low-calorie beverages that contain less than 10 calories per eight ounces.
- To find products that can be sold in school vending machines, Pennington Biomedical Research Center has as “Approved School Vending” list available online at <http://www.pbrc.edu/division-of-education/vending-list-for-schools/>. This list is a work in progress, and new food items can be submitted for approval.

Working together with the schools food service provider to ensure that school meals are prepared as fresh, healthy and appealing as possible:

- The nutritional quality of school breakfast, lunch and snacks should **exceed** United States Department of Agriculture (USDA) minimum standards and provide students with the best possible nutrition.
- Work with your school food service provider to ensure that all students have access to fresh fruits and vegetables, either through a daily salad bar or available whole fruit. Schools can apply for funds to support this through the USDA’s Fresh Fruit and Vegetable Program: <http://www.fns.usda.gov/cnd/ffvp/ffvpdefault.htm>.
- Create a school wellness policy that is reflective of the culture and values of your school and use it as an accountability mechanism to ensure that the quality of nutritious food available throughout the school day reflects their school values.

- Equip the school kitchen with infrastructure and equipment necessary to provide fresh and nutritious food to students.
- Ensure that all cafeteria workers are recognized as essential to bringing nutritious foods to a student's plate and that they receive adequate training, professional development and pay.

Integrate healthy food into school culture in the classroom and in all school activities, including field trips, after-school programming, events, fundraisers, rewards or parties:

- Fundraising by selling candy or sweet baked goods is popular because it's easy, but there are many better, creative and healthy ways to raise money. Check out "20 Ways to Raise Funds without Candy" at <http://www.kidseatwell.org/flyers/twentywaystoraisefunds.pdf>.
- Refrain from using candy or 'empty calorie' food as a reward for good behavior. This encourages kids to eat when they aren't hungry and can cause them to develop lifelong habits of rewarding or comforting themselves with unhealthy foods. Try rewards such as extra credit, passes to a school event, movie or fun activity, or gift certificates to download music or buy things at the school store.
- Adopt a healthy snacks policy for foods brought from home or purchased outside of school, or that are served during school parties.
- Support healthy food through curriculum and enrichment activities by providing nutrition education and opportunities to learn about food and agriculture.

Counseling and Psychological Services

Create a school environment that promotes psycho-social competence and emotional well-being:

- School-wide activities such as community forums, multicultural events, arts festivals, peer support programs and parent involvement programs promote mental health and social competency for all students, staff and families.
- Include mental health education as part of the general curriculum so students and teachers possess knowledge about mental health, attitudes and behavior.
- Implement school policies that prohibit bullying and harassment, and ensure that staff model appropriate behaviors and attitudes as role models.

Identify and intervene with students in high-risk situations:

- Foster communication between school social workers and counselors and teachers and staff to identify students who are dealing with challenging issues in their lives.
- Provide targeted programs, individual counseling, consultation with parents, or referrals to outside agencies to assist students who require additional support at certain stages of their lives, or in response to challenging life situations.

Provide direct services or referrals to students in need of additional mental, emotional and social health treatment:

- Identify a network of community-based mental health and social service providers that school social workers or counselor can refer students to for additional services. A resource guide with contact information and descriptions of Metro New Orleans Behavioral Health Providers can be found here: http://www.lphi.org/LPHIadmin/uploads/SHC-Resource-Guide-07_01_08-11711.pdf.
- Establish a protocol for referring students in need to the appropriate community-based services. A small percentage of students will require additional professional treatment for mental health problems, and schools can play an essential role in supporting a student undergoing treatment and/or reintegrating them back into school life.

Health Promotion for Staff

Improve access to healthy foods and physical activity at workplaces:

- Improve vending selections in staff break rooms to include healthy options. Survey the staff to determine what healthy options are most wanted.
- Start a walking club for staff before school, during lunch, or afterschool.
- Invite a yoga or aerobics teacher to offer classes on site.
- Provide healthy food and beverage options at staff meetings, professional developments and celebrations.

Provide opportunities for staff to improve their health status and become more knowledgeable about their health:

- Partner with a school or community based health clinic to offer basic health screenings and services to staff at schools, such as blood pressure screenings, BMI measurements and seasonal flu vaccinations.
- Offer seminars or professional development that provides strategies for healthful living on topics such as stress management, physical fitness, healthy eating, etc.
- Invite the local Red Cross to offer first aid and CPR certification classes for staff.
- Request a local chef or nutrition organization to offer healthy cooking workshops after school.

Foster a supportive work environment that encourages healthy lifestyle choices:

- Maintain positive and inclusive interactions in staff rooms and meetings—set workplace policies to prohibit bullying, harassment and put-downs among staff.
- Develop friendly, intramural staff sports or fitness events with school staff, such as fun runs, volleyball games, walking clubs, etc.
- Offer programs or opportunities for stress reduction and management.
- Many weight management programs, such as Weight Watchers, will hold weight management meetings on site for staff. Reach out to a local weight management program—many group health insurance policies cover the costs or offer discounts.

Family and Community Involvement

Actively encourage parents to participate in coordinated school health planning and oversight:

- Parent involvement is the key to success for school wellness programs. Communicate the goals of the coordinated school health program with parents and seek out parent input and involvement at orientations, open houses, parent-teacher conferences and PTSO meetings.
- Invite parents to be a part of the school wellness committee. The wellness committee should have a minimum of 2–3 parents who represent students from different grade levels.
- Use different outreach strategies to inform parents how they can get involved. Notify parents about any upcoming school wellness policy or program changes in parent emails, newsletters, personal letters, newspapers or flyers.
- Vary school wellness meeting and activity times to allow parents who work at different times of the day to attend at least some meetings and events. Working parents are very busy people—it is crucial to put in the extra effort to get parents involved in the school wellness program planning process.

Engage community member and community-based organizations in school wellness efforts:

- Reach out to community-based organizations that can offer additional services or programs within the school environment. Many organizations specialize in the delivery of social services and health education to schools, and many are available free of cost. (See the appendix for specific organizations.)
- Invite community members with specialized skills to teach health units or workshops (i.e., a dietician or chef to teach how to cook healthy foods, an athlete to talk about physical fitness and training, etc.)
- Work with the local media to inform the community about health problems facing New Orleans youth, to publicize the need for coordinated school health programs, and to gain recognition for successes and improvements.
- Open the school grounds or facilities to the public during non-school hours for physical activity, fitness sessions, family health seminars or social or recreational functions. Formalize this agreement and share the costs and responsibilities of opening school property to the public after hours through a joint use agreement—a great toolkit for developing joint use agreements is available online here: http://www.phpnet.org/healthy-planning/products/joint_use_toolkit.

SECTION 3:

Developing and Implementing A Coordinated School Health Program

Best Practices for Coordinated School Health Programs

Experts in school health generally agree that quality programs share the following elements:

1. Administrative support and commitment

- ❖ School administrators view health promotion as an essential part of the educational mission of the school and provide public support and resources for the program.

2. A school wellness coordinator

- ❖ A competent professional is designated to coordinate the school health program and wellness committee activities. Good interpersonal skills and knowledge of the school culture are important qualifications.

3. A collaborative team approach

- ❖ A school health committee with a common vision meets regularly and has clearly defined roles and established priorities.

4. Strong school-community links

- ❖ The school builds partnerships with families, community organizations and the community at large. The school utilizes community-based health and social service providers and programs to increase access to services.

5. Multiple school health advocates

- ❖ At least one other person (in addition to the coordinator) is a dedicated and articulate advocate for coordinated school health within the school and community.

6. Adequate time and funding

- ❖ School health activities, the school wellness coordinator and school wellness committee are supported by adequate resources and time over multiple years.

7. Professional development

- ❖ Coordinators and other staff receive training that helps them to work collaboratively across disciplines and with families and community groups.

8. A safe and supportive environment for staff and students

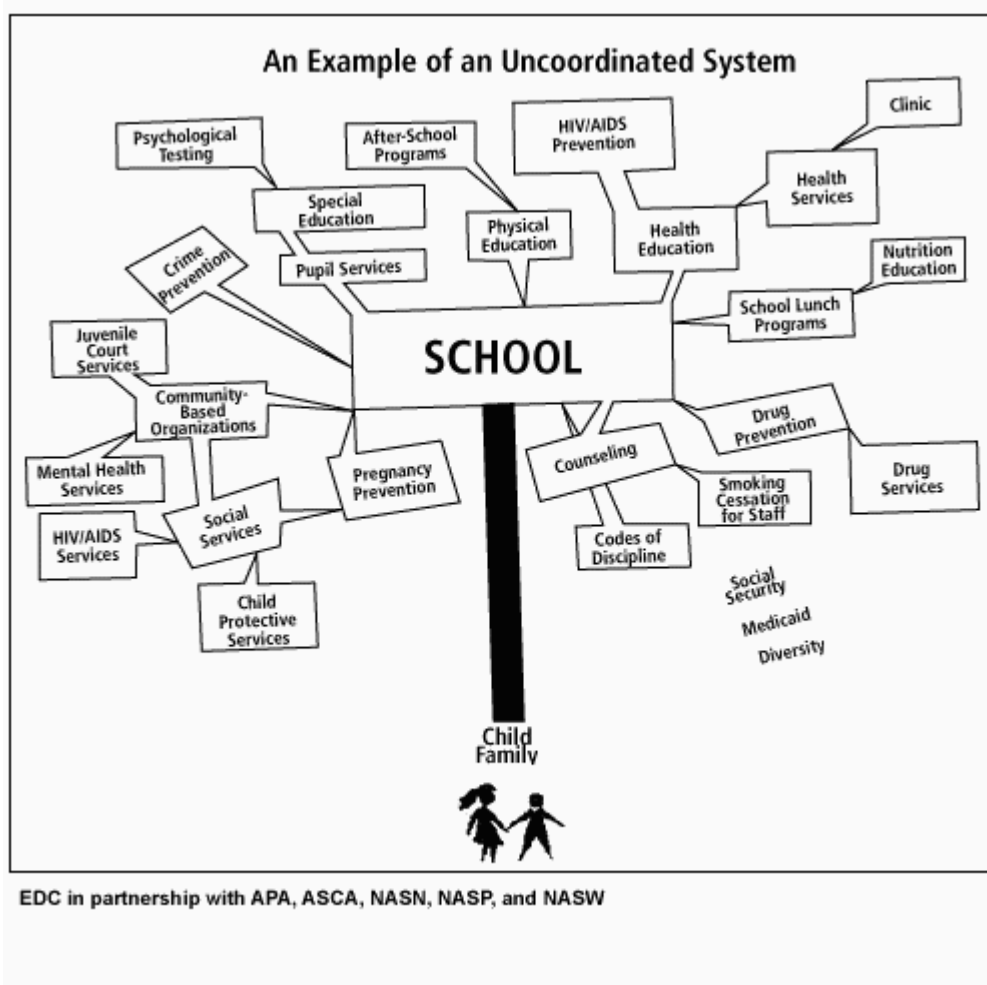
- ❖ Policies and programs promote clear, high expectations and positive health choices. Consistent healthy messages are communicated and modeled by multiple sources.

(Best Practices adapted from Maine's Department of Education and State Department of Human Services, available at <http://www.maineceph.com/resources.html>. Accessed June 16, 2010)

STEP ONE:

Designate a school wellness coordinator and form a wellness committee

Many schools provide different services that promote health and youth development. Unfortunately, many schools go about providing these services without a clear plan or coordination of these efforts. Services and programs may be offered, but they are often disconnected from each other and not supported by other areas of the school curriculum or school policies. These support services often end up looking like this:



In contrast, a coordinated school health program is a holistic approach that organizes the school's curriculum, services and the environment so that they work together in a systematic way to improve health and academic outcomes for students.

In order for a coordinated approach to be successful, there needs to be oversight and management of these diverse components. The CDC recommends designating a school wellness coordinator and maintaining an active school wellness committee as a key strategy for building a strong foundation for a coordinated school health program.

School Wellness Coordinators

Many schools make an effort to address different areas of coordinated school health, but very few have a designated leader who ensures that progress is made and accounted for. This lack of leadership makes it very difficult for schools to maintain a coordinated school health program. A school wellness coordinator is an essential role—a trained professional in school health who will work to improve the programs and policies that can impact the health of its students and faculty. Ideally, every school or district would have a full-time school wellness coordinator to assist in the implementation and coordination of school health policies and programs.

The National Association of State Boards of Education defines the responsibilities and functions of the School Health Coordinator as follows:

- ensuring that the instruction and services provided through various components of the school health program are mutually reinforcing and present consistent messages;
- facilitating collaboration among school health program personnel and between them and other school staff;
- assisting the superintendent/school principal and other administrative staff with the integration, management, and supervision of the school health program;
- providing or arranging for necessary technical assistance;
- identifying necessary resources;
- facilitating collaboration between the district/school and other agencies and organizations in the community who have an interest in the health and well-being of children and their families; and
- conducting evaluation activities that assess the implementation and results of the school health program, as well as assisting with reporting evaluation results.

Unfortunately, many schools lack the funding to hire a full-time school wellness coordinator (for school health funding opportunities, see Appendix A). If a fulltime coordinator is out of reach, these responsibilities can be taken on by one or more natural school health leaders, such as the school nurse, health teachers or administrators. Offer these staff members a stipend for their extra time and work above and beyond their regular job responsibilities.

School Wellness Committees

An active school wellness committee is another key to the success of a coordinated school health program. A school wellness committee, sometimes called a school health council or a school health advisory council, is an advisory group of individuals who represent stakeholders of the school and community. A committee keeps the priority on wellness at the school, and is able to assess school needs, plan for school health activities and policies and guide the growth of a school wellness movement on the ground level. The committee acts collectively to provide advice to the school on health-related issues, programs and activities.

A school wellness committee is ideally made up of a diverse group of people from the school and community who come together to help promote the school's efforts to support student, staff and family health and well-being. Depending on each school's capacity, a school wellness committee may be only 4 members, or there may be up to twenty. While school wellness committee members are often appointed by the school district or school principal, it is important that members of the school wellness committee are interested and engaged in supporting the health of the school community—it is best to find people who want to actively work towards this goal.

Some of the roles and responsibilities assigned to school wellness committee may include:

- Health-related program planning
- Health advocacy
- Fiscal planning for wellness initiatives
- Wellness policy development and implementation
- Evaluation, accountability and quality control of wellness initiatives
- Liaison with district, parish or state agencies
- Solicit community based organizations to support school wellness

Who should be included in a school wellness committee?

✓ School board or charter board members

School boards and charter boards can provide essential direction, oversight and accountability for school wellness policy development, implementation and monitoring/evaluation. Their role is critical to maintaining momentum and producing effective outcomes. As such, board members are essential stakeholders that need to be engaged to ensure that the full impact of wellness programs and policies on student health and achievement are realized. Board members are additionally valuable in evaluating the funding capacity to grow and maintain a

school wellness programs and can often provide insight in assistance into developing new funding opportunities for school health.

✓ **School administrators**

School administrators (such as principals, assistant principals, dean of students, or school business officials) play a critical role on a school wellness council because it is essential to have representation from the people responsible for the implementation of school policies. School administrators will have to give approval to many new health or wellness programs that are developed, so it is best to have the administration involved and participating from the start. Because school administrators have so many factors to consider when it comes to their students, health and wellness may not be the first thing on their minds. Having school administrators participate on the school wellness committee helps bring attention to the need for school health programs. Multiple research studies have found that coordinated school health programs can lead to higher attendance rates, lower disciplinary actions and lower rates of suspensions and expulsions- all of which are key concerns for school administrators.

✓ **School nurses**

School nurses are natural leaders in school wellness programs. They bring medical knowledge and expertise, and an intimate, day-to-day knowledge of the common health problems particular to each student body. School nurses are often the first to notice issues with poor nutrition (either from school food and snacks or at home), and are aware of the prevalence of other health concerns, such as asthma or diabetes. They can collect data on the health and habits of their students, and can speak authoritatively to school officials and administration about the need for and importance of school wellness programs and policies. If a school is unable to hire a school wellness coordinator, these responsibilities are often given to the nurse. While this may work in some schools, many nurses are overworked and overwhelmed if they have multiple schools or large student populations to serve. School nurses can be great school wellness leaders, but they will need support and responsibility sharing if they are expected to lead the coordinated school health program.

✓ **School food service staff**

School food service staff members are directly involved with the food and nutrition that students receive at school every day. They may not call the shots as to the origin or quality of what is served for lunch (district supervisors are usually the decision makers about that), but they do know exactly how food is prepared, and are aware of the capacity they have to change and improve it. Many decisions that wellness committees make have to do with the nutritional quality of food served at school, and so it is very important that school food service staff are

involved in the decision making process. Wellness policies and school health improvements offer a great opportunity for school food service staff to introduce new foods and implement nutrition education or health food marketing initiatives at meal times.

✓ **School social workers or counselors**

Like school nurses, school social workers and counselors have expertise and a day-to-day knowledge of the challenges their students face, at home and at school. Social workers and counselors may have varying levels of expertise in mental and behavioral health issues, but they are able to spot patterns of behaviors and situations among their students. School social workers and counselors can provide insight into the particular issues that are most prevalent at each school. They are able to see the need for, and implement, programs that seek to prevent issues such as drug and alcohol abuse, dating violence, dealing with bullying, and coping with sadness or loss. They can offer valuable insights at the beginning of the committee's progress on the current issues at the school, and can provide feedback and support as coordinated school health programming is implemented.

✓ **Parents**

Parent involvement on the school wellness committee is a real key to success. Parents have multiple strengths to offer a wellness committee—they know their children best of anyone, they are aware of the challenges that their children and families face both in school and out and they are part of multiple networks and groups in the larger community. For example, many parents are involved in their community organizations and churches, and may see opportunities for collaboration with school efforts. They also may bring professional expertise to the group. Parents may be employed as nurses, teachers, local newspapers or media outlets, or other capacities that could help and support a wellness committee. And most importantly, parents are the key connection point between a child's life at school and at home.

✓ **Students**

Students should be a part of the school wellness committee process from the beginning—their input is very important. Providing students with a sense of ownership will improve their participation, acceptance and willingness to learn in a coordinated school health program. There are many student leaders who may want to be involved, such as those on student council, but there are also many other students who may want to become involved with the wellness council; seek out participation from students interested in athletics, cooking, entrepreneurship, etc. Students are essential voices in wellness policy and program planning. They are the 'customers' or the 'clients' of the school. Listen to what they have to say, and to

what they hope the school can become. It will greatly improve the quality of new programs and policies.

✓ **Faculty**

After students, teachers are the largest group of people in a school. Because they are with their students all day, every day, they are often very aware of the health issues that can cause challenges to learning. Poor nutrition, lack of exercise, risky decision making and behavioral health issues are often readily apparent to teachers, and they know how disruptive some of these issues can be in the classroom. Teachers should have a say in school wellness policy and programs because it will affect them directly in their classrooms. Additionally, teachers must be invested in the coordinated school health program from the onset, or it may seem that new health policies and programs are additional responsibilities or burdens, beyond the stress and pressure to help their students achieve academically. Teachers can provide valuable insight, and will also benefit greatly by having healthier students, better able to learn.

✓ **Community members**

Including community members and staff from local community-based organizations in a school wellness committee can greatly enhance the quality and sustainability of school health policies and programs. Community organizations can lend expertise and support, such as by bringing in new health programming, or by connecting schools with outside funding sources. Local health organizations, public health institutions, recreation programs and anti-hunger organizations are just a few types of organizations that can play a useful role in the wellness policy and program planning process. Local businesses may also be willing to contribute in-kind services or goods. If community members or organizations are included and involved in planning a coordinated school health program from the beginning, they are likely to feel committed and responsible towards school health improvements and lending their ongoing support.

STEP 2:

Complete a school health assessment

The first step after assembling a wellness committee is to do a whole-school assessment. Many people just want to jump into action, but starting with an objective assessment will help you plan for action, identify resources already at hand, recognize successes, and give you a starting ground from which to measure your future successes.

There are a few comprehensive, whole-school assessments that are free, available online and easy to use.

- **The School Health Index (SHI).** The SHI is the “gold standard” of school health assessments. Developed by the Centers for Disease Control and Prevention (CDC), the SHI is the most universally used and nationally accepted coordinated school health assessment. It will evaluate a school’s progress in each of the eight areas of coordinated school health, and identify a school’s strengths and weaknesses. The SHI assessment will also guide you through the steps of creating action plans for school health. Because it is very thorough, it can be time-consuming, but there are ways to make it easier to use. If you have a large school wellness committee, break up in small groups or subcommittees and assign each group a segment of the SHI to complete. The whole group can reconvene to share results and develop priorities for action together.

The SHI is available in both an online and downloadable paper format at: <http://www.cdc.gov/HealthyYouth/shi/>.

- **The Healthy Schools Builder:** The Alliance for a Healthier Generation developed the Healthy School Builders assessment to go along with their framework for improving school health. This assessment looks at 5 of the 8 areas of coordinated school health (policy/environment, nutrition, physical activity and education, health education, and staff wellness), as well as before and afterschool programs. The assessment also guides schools through the process of developing action plans once the assessment is complete.

Sign up for free with the Alliance for A Healthier Generation to use this assessment. It is available online at: <http://www.healthiergeneration.org/schools.aspx>.

Additional School Health Assessments

If your school has already completed a comprehensive assessment, or if you would like to look closer at a particular aspect or area of coordinated school health, there are other assessments available online that deal with specific areas of school health.

Nutrition

Keys to Excellence - School Nutrition Association

<http://www.schoolnutrition.org/Content.aspx?id=2406>

Keys to Excellence is a best practice standards tool for school nutrition professionals to use to assess, benchmark and improve their school food and nutrition operations. This assessment tool evaluates school nutrition programs in four areas: Administration, Communications & Marketing, Nutrition and Nutrition Education and Operations.

School Community Food Assessment Toolkit

<http://www.familycookproductions.com/familycook.html>

Downloadable toolkit designed to help school administrators, teachers, food service staff, coaches, students and parents identify what needs to change regarding food and beverages consumed at school, arrive at consensus for change and select and adopt new nutrition policies appropriate for each school.

Physical Activity and Education

Physical Education Curriculum Analysis Tool

<http://www.cdc.gov/HealthyYouth/pecat/>

The CDC's Physical Education Curriculum Analysis Tool (PECAT) will help school districts conduct a clear, complete and consistent analysis of written physical education curricula, based upon national physical education standards. The PECAT is customizable to include local standards.

Physical Activity Evaluation Handbook

<http://www.cdc.gov/nccdphp/dnpa/physical/handbook/pdf/handbook.pdf>

Downloadable evaluation handbook from the CDC that outlines six steps of program evaluation for physical activity programs (not physical education). This handbook illustrates each step with physical activity program examples. Appendices provide information about physical activity indicators, practical case studies and additional evaluation resources.

Health Education

Health Education Curriculum Analysis Tool

<http://www.cdc.gov/HealthyYouth/hecat/>

The CDC's Health Education Curriculum Analysis Tool (HECAT) can help school districts, schools and others conduct a clear, complete and consistent analysis of health education curricula based on national health education standards. The HECAT results can help schools select or develop appropriate and effective health education curricula and improve the delivery of health education. The HECAT can be customizable to meet local community needs and standards.

Nutrition and Physical Activity

Students Taking Charge Toolkit: How Healthy is Your School and What Can You Do About It?

<http://www.johnstalkerinstitute.org/wellness/students.htm>

This unique resource assists high school students to assess their school's nutrition and physical activity policies. It provides students with the tools necessary to develop and use their voice to influence nutrition and physical activity policies within their school.

Criteria for Evaluating School-Based Approaches to Increasing Good Nutrition and Physical

Activity: <http://www.actionforhealthykids.org/resources/files/criteriaforschool-basedapproaches.pdf>

This downloadable report features a set of standard criteria for creating and evaluating school-based approaches for improving nutrition and physical activity.

Mental and Social Health

Mind Matters: School Matters

http://www.mindmatters.edu.au/resources_and_downloads/mindmatters/school_matters.html

This downloadable booklet provides schools with a framework, assessment and planning tools to assist in the establishment of structures, strategies, partnerships and curriculum programs to promote and protect the mental health and well-being of all members of the school community. This tool comes from a successful whole school approach to mental health program in Australia.

STEP 3:

Develop a school wellness policy

In the Child Nutrition and WIC Reauthorization Act of 2004, the U.S. Congress established a new requirement that all school districts with a federally-funded school meals program develop and implement wellness policies that address nutrition and physical activity by the start of the 2006–2007 school year. This legislation set minimum requirements that district policies must meet to sustain and improve the health of their students.

While the Orleans Parish and Recovery School Districts do have policies written at the district level, these policies are usually not communicated with individual schools, and the schools have no ownership over the goals and commitments set by the school board. Moreover, given the ever-changing landscape of public education and charter school reform in New Orleans, many schools are not under the governance of these school boards, or have minimal oversight or leadership from the district level.

It can be a very important and empowering process for individual schools to develop and write their own wellness policies. It may seem like a daunting task, but there are many examples and templates to from which to work. While it is helpful to follow along with a template and make few changes, be sure to incorporate the ideas, vision and goals that were communicated in completing the school wellness assessment. A school wellness policy should reflect the values and mission of each school and set goals for the way that the school will support the health and well-being of its students.

How to begin writing a wellness policy

Start by looking at examples. The following resources will give you many models upon which to base your policy. Think about the particular strengths and values of your school. Is nutrition and healthy eating especially important to your staff, students and families? Do you want to incorporate school gardening or cooking classes into the curriculum? This can be added to a school wellness policy. Do you want to find creative ways to increase physical activity? Do you have additional areas of health you want to focus on at your school?

Many wellness policy templates only focus on nutrition and physical activity, because those are the components required by law. That doesn't mean you should stop your focus there! If your school wants to make an effort to provide extra services, such as social workers and mental health support, add a section on supporting mental health into your wellness policy. If it is in your school's mission to utilize the support of community based organizations and community relationships, you can codify that objective into your policy. Be creative.

Wellness policies are not one-size-fits-all. If your wellness policy is copied and pasted from a template and sits in a binder on a shelf that no one reads, then it's only worth the paper it's printed on. Take the time to personalize a wellness policy to fit the particular needs and values of your school, and put the policy into action!

How to get the most out of a school wellness policy

- Incorporate the voices of all wellness committee members into the policy writing process and encourage input from other members of the school community as well. Don't rush through the writing process. Get feedback and make revisions often.
- Make the policy known! Once the policy is written, make copies and give them out to all staff and families. Hold a professional development for teachers to understand their role in supporting the new wellness policy. Post the policy in the school hallways for everyone to see. Hold yourself and the school accountable for your vision.
- If your school is a charter school, include the charter board in the policy ratification process. Charter board buy-in is very important to the success of policy implementation. The charter board is a valuable resource for leadership, funding opportunities and community relationship building.
- Secure outside funding for new wellness initiatives set by the policy. Be open and aware of the anticipated costs of implementing wellness programs and be creative in searching for funding to support them. (Appendix A has links to national funding sources, but also look to local hospitals, health insurance companies, local stores and businesses, local sports teams, community organizations, foundations and government agencies)
- Don't try to do everything at once! Although the policy is written, it doesn't mean that every piece of it has to happen in the first year. Roll the program out one year at a time, build momentum and keep your goals in sight. It can also be much easier to secure outside funding once there is evidence of success and intent.

School Wellness Policy Resources

Louisiana Department of Education- Wellness Policy Template

<http://www.doe.state.la.us/Lde/scs/2784.html>

The Louisiana Department of Education revised a template of recommended components of a local wellness policy in 2010. This template is downloadable in Word format.

Local Process: How to Create, Implement and Evaluate a Wellness Policy (USDA)

http://www.fns.usda.gov/tn/Healthy/wellnesspolicy_steps.html

This implementation tool and resource clearinghouse was created by the USDA in collaboration with CDC. It contains resources to assist schools with developing local wellness policies for physical activity and nutrition, tools for implementation and un-reviewed sample policies.

Model School Wellness Policies- National Alliance for Nutrition and Activity

<http://www.schoolwellnesspolicies.org/WellnessPolicies.html>

From the National Alliance for Nutrition and Activity (NANA), this comprehensive set of nutrition and physical activity policies is based on nutrition science, public health research and existing practices from states and local school districts around the country.

Action for Healthy Kids: Wellness Policy Tool

<http://www.actionforhealthykids.org/school-programs/our-programs/wellness-policy-tool/>

This database was developed by Action for Healthy Kids and CDC to compliment USDA's local wellness policy web site (above). This site helps users identify policy options and write wellness policies with sample language from un-reviewed policies gathered from across the country.

Policy in Action: A Guide to Implementing Your Local School Wellness Policy

<http://www.californiaprojectlean.org/doc.asp?id=168&parentid=20>

This guide from California's Project LEAN is designed to serve as a roadmap for implementing school nutrition and physical activity policies, including local wellness policies.

Action Guide for School Nutrition and Physical Activity Policies

<http://www.sde.ct.gov/sde/cwp/view.asp?a=2678&q=320754#Action>

Connecticut's Action Guide for School Nutrition and Physical Activity Policies provides comprehensive guidance for school districts on developing and implementing local policies to promote healthy eating and physical activity.

School Wellness Policy and Practice: Meeting the Needs of Low-Income Students

http://www.frac.org/pdf/wellness_guide2006.pdf

This guide from the Food Research Action Council is designed to help schools respond to the special nutrition concerns of low-income students in their wellness policies.

STEP 4:

Identify priorities and plan for action

Identifying school wellness priorities

The first step in implementing a coordinated school health program or your school's wellness policy is to identify and prioritize the key elements and start with those first.

If your school used the School Health Index Assessment or the Healthy Schools Builder, you have already figured some of your school health priorities based on the assessment outcome. However, the list generated by these assessments may seem overwhelming. Or, perhaps there are additional priorities that were not addressed by these assessments. For example, many schools in New Orleans feel the need to implement additional social services and behavioral health support—neither of which is really addressed in those assessments.

When designing a coordinated school health program or deciding how to implement a new wellness policy, you may want to consider the following questions:

- Are any of these required by law?
- What programs or policy elements will be quick and/or easy to implement?
- Are there programs or policy elements that will require more planning and collaboration than others?
- Are there programs or policy elements that, if implemented, could provide immediate relief to current problems or deficiencies at the school?
- What are the proposed deadlines for implementing programs or policy elements?
- Are there any program or policy elements that could be implemented at low or no cost?
- Are there program or policy elements that will require additional outside funding, either through grants, fundraising or private donations?

After reviewing coordinated school health possibilities with these criteria, the wellness committee should decide upon a realistic number of new programs or policy elements to implement in the first year. The capacity of each school is different, and different school health improvements will require varying levels of resources and leadership. Therefore, your school may choose just one or two priorities for action or you may work toward five or six, if they are easy to implement and staff is willing and able to get things done. Make sure to keep a record of the 'non-priority' items as well; your school can revisit these once progress is made.

Planning for action

Now that your school has identified the priorities for implementing school health improvements, the next step is to make a clear and comprehensive plan of action for each new program or policy element. These action plans should identify the objective of each new program and the steps required to implement them. The plan must also include all necessary implementation information (e.g., who is responsible, timeline). Some schools may have a required format for action plan or school improvement plans—if so, use those templates for coordinated school health planning too. For those that don't, the action planning worksheet on the following page can give your school wellness committee an example of a planning format.

There is no “best” layout for an action plan. Depending on the nature and needs of different schools, the way in which action plans are laid out will differ. The primary purpose of the action plan is to be a useful tool for guiding school staff in implementing agreed upon school health and wellness programs, policies and support activities. Having **a clear and comprehensive action plan** helps ensure the effectiveness and efficiency of a school's coordinated school health improvement efforts.

A clear approach allows for:

- a plan that is easier to follow;
- better understanding of each person's role and responsibility; and
- consideration of and accounting for potential problems.

A comprehensive approach allows for:

- better use of materials and equipment;
- more resources available for materials and services;
- improved scheduling;
- greater flexibility in staffing;
- better coordination of family and community involvement; and
- shared decision-making and team building.

The following pages will give you an example and a blank template to use for clear and comprehensive action planning.

SAMPLE SCHOOL HEALTH ACTION PLAN

School Health Goal: *Ex. Snacks sold at school vending machines will meet Louisiana law (Act 331)*

Desired Results/Accomplishments: *School will work with current vending machine company to ensure that 100% of items sold in vending machines meets the nutrition guidelines. Future vending contracts will include these nutritional guidelines as a contractual condition.*

Step 3:			A. staff time, tables for taste testing	A. vending machine company, other teachers	
Action Steps <i>Decision Step</i> compliant products will be sold: Review company inventory list	Responsibilities Who Will Do It? Michael	Timeline Feb. 28 By When? (Select products by Jan. 31. Hold 4 taste testing events Nov. 15-18)	Resources A. Resources Available B. Resources Needed (financial, human, political & other) vending company inventory list, sample products for taste test, promotion posters or announcements for taste tests	Potential Barriers A. What individuals or organizations might resist? B. How? vending machine company may be resistant to changing stocking orders or getting new product, teachers may not want to disrupt class time for taste test	Follow-up and Communication Plan Sandra will obtain and review nutritional guidelines Who is involved? (see Pennington list). Results of the taste test will be announced to whole school—the 15 most popular items will be for review of school commitments. Michael and Sandra will review contract for language related to nutrition standards. The three will meet to discuss current contract and opportunities for improvement. implementation date
Step 1: Hold taste test	Michael (food service manager) Sandra (health teacher)	Nov. 15-18	A. staff time B. n/a	A. n/a B. n/a	Patrice will obtain contract for review of school commitments. Michael and Sandra will review contract for language related to nutrition standards. The three will meet to discuss current contract and opportunities for improvement. implementation date
Step 4: Communicate deadlines and approved products with all stakeholders	Patrice (principal)	Mar. 1	A. staff time and materials to send letters/emails to vending company and charter board B. n/a	A. charter board, vending machine company B. may still have fear of lost revenue from lowered sales of healthy products	Sue will send a letter to the vending machine company and charter board informing them of details of changes and implementation date
Step 2: Decide if changes to vending machines will be phased in or made all at once	Patrice Sue (business manager)	Dec. 15	A. staff time B. documentation of revenue gained from vending machines and school budget	A. charter board, vending machine company B. fear of lost revenue from lowered sales of healthy products	Patrice and Sue will review finances to decide if changing vending machines will negatively impact the school budget.

Step 5: <i>Conduct kick-off event and promotion of new snacks</i>	<i>Michael Maria (parent liaison)</i>	<i>Mar. 15-31</i>	<i>A. staff time B. advertising and marketing materials for new healthier snacks and promoting healthy eating, flyers to send home to parents</i>	<i>A. students? B. some students may resist changes made to snack options. Include parents by communicating snack policy to help with transition</i>	<i>Michael will hang posters and ensure that all snack advertising is ONLY for new approved snacks. Maria will send a flyer home to parents and organize "healthy snack event" with PTSO</i>
---	---	-------------------	---	--	--

Evidence Of Success (How will you know that you are making progress? What are your benchmarks?)

By April 1, all snacks in vending machine will be compliant with Louisiana Act 331. Students will have been involved in the process of selecting snacks, and revenue losses will be minimized.

Evaluation Process (How will you know that your goal has been reached? What are your measures?)

Sue will track vending revenues over the next 2 years to follow sales and success. Michael will ensure that snacks in vending machines stay compliant with nutrition guidelines.

SCHOOL HEALTH ACTION PLAN TEMPLATE

School Health Goal:

Desired Results/Accomplishments:

Step 1:			A.	A.	
Action Steps	Responsibilities	Timeline	Resources	Potential Barriers	Follow-up and Communication Plan
What Will Be Done?	Who Will Do It?	By When? (Day/Month)	A. Resources Available B. Resources Needed (financial, human, political & other)	A. What individuals or organizations might resist? B. How?	Who is involved? What methods?

Step 2:			A. B.	A. B.	
Step 3:			A. B.	A. B.	
Step 4:			A. B.	A. B.	
Step 5:			A. B.	A. B.	

Evidence Of Success (*How will you know that you are making progress? What are your benchmarks?*)

Evaluation Process (*How will you know that your goal has been reached? What are your measures?*)

STEP 5:

Take pride in your accomplishments!

You've worked hard over the last year to make your school a healthier place. Congratulations! Maybe you completed the school health assessment and implemented a change to the school environment. Perhaps your school wrote a new wellness policy of which staff, students and families are proud. Maybe you started a new staff wellness program, or your school increased the amount of physical activity and recess for students. No matter what your accomplishments—big or small—it is important to recognize and celebrate the progress that you've made. Your school set a goal to become a healthier place to learn, work and live, and you've helped students, staff and families meet that challenge.

Now it's time to take pride in your accomplishments and celebrate your success! This is the opportunity to reinforce your school's core health and wellness messages, recognize the achievements of students and adults, thank staff and volunteers who contributed to the challenge and take pride as a school and a community. And best of all, it gives you a chance to build excitement and momentum to continue to make your school a healthier, happier place!

Celebrate Your Success

- **The wellness committee can hold a healthy banquet lunch or party** at the end of the year. For ideas on throwing healthy parties at school, check out http://cspinet.org/new/pdf/healthy_school_celebrations.pdf.
- **Host a celebration event or assembly** and use that event to recognize the following:
 - students and adults who participated in the wellness committee, and/or who completed new school wellness activities;
 - other students who had special healthy-living related achievements;

- staff, parent and community volunteers who made outstanding contributions to the school wellness effort.
- **Make an announcement at a PTA meeting.** Highlight successful elements of the coordinated school health program and any new school health policies or activities.
- **Make an announcement at a school board meeting.** Be sure to **provide data** about new policies, number of events, participation levels, student and parent responses, and any other program elements that will illustrate your success in implementing coordinated school health programming.
- Celebrate the success of the new school wellness program in the **student newspaper, school newsletter, faculty/staff newsletter, faculty/staff mailbox flyers, parent newsletter (or send-home letter/packet), PTA newsletter, school website** and other similar communication outlets.
- Celebrate the success of the school wellness program by sending **press releases to local newspapers, radio and television stations and other media outlets.**
- **Send thank-you letters to all adults**—faculty, staff, parents and community members—**who volunteered** to help get the school wellness program going or at any school health events.
- Ask the **students who write for the school newspaper** to do an article on school wellness, review one or more of the new programs or activities, or provide coverage of a school health event.
- **Distribute certificates**—and if possible, **incentives**—to students and adults who completed new school health activities or challenges. For instance, give certificates or incentives to staff who participated in a lunchtime walking club, or to students who completed a physical activity challenge, such as the President’s Challenge (<http://www.presidentschallenge.org/>) Examples of incentives for healthy activities include:
 - pencils
 - stickers
 - bookmarks
 - notepads
 - magnets
 - key chains
 - sports equipment, such as jump ropes or Frisbees;
 - sports clothing and paraphernalia, such as T-shirts, hats, fanny packs, water bottles, pedometers;
 - free passes to bowling alleys, skating rinks or rock climbing walls

These are just a few ways your school can celebrate success. Other tools and resources, such as sample letters, press releases and recognition certificate templates are available on the Action for Healthy Kids website at http://www.a4hk.org/gotuwc/index.php?page=goal_celebrate.

Tips to Help Communicate Your Success

- Describe the highlights of a school health program or event that has just ended.
- If possible, list the number of students and adults who participated.
- If appropriate, state the results of participant surveys or any other measurable outcomes of success.
- Thank those who helped make the school wellness program successful, especially outstanding community volunteers.
- Thank community organizations that partnered with or otherwise supported the school wellness activity.
- Thank local businesses that contributed food, equipment and/or incentives.
- Reinforce the importance of healthier living, making better food choices and moving more. Include links (or other references) to further information.
- Where appropriate, include photographs of school wellness events and activities.

Keep the momentum going

Fundraising events or activities can be opportunities to both celebrate what your school has already accomplished, and to further engage school and community members in your success. By highlighting accomplishments that your school has made over the last year, it can be easier to raise funds to meet future goals and continue the making school health improvements.

The Center for Science in the Public Interest has a great guide to healthy school fundraising available at <http://www.cspinet.org/new/pdf/schoolfundraising.pdf>. This guide includes resources to get your fundraising activities off the ground. Some of their ideas for fundraising events include:

Physical Activity Fundraisers

Walk-a-Thons, Fun Runs, 5Ks, 10Ks, bowl-a-thons, dance-a-thons, golf tournaments, and baseball, basketball, soccer, or volleyball events can raise funds, be enjoyable, and promote physical activity.

Organizing a walk or race can be a big job. Proper planning and publicity are key elements to an event's success. Many large, well-known races take from six months to a year to plan and

publicize. However, smaller events may be planned in just a few months. When organizing a walk or race, it is important to consider the following:

- Event location, whether permits are required, and laying out a course that is safe for pedestrians;
- Who will be invited to participate in the walk, race, or event (i.e., is it limited to students or will other community members be encouraged to participate?);
- Obtaining sponsorship from local businesses (since participation provides them with positive publicity, merchants often will contribute water, snacks, t-shirts, or prizes);
- Whether an entrance fee will be charged or whether participants will be required to raise a minimum amount of money through pledges; and
- Recruiting volunteers to ensure that the event runs smoothly.

Book Fairs

Book fairs are popular fundraisers because they simultaneously promote literacy and raise funds for schools. The largest operator of school book fairs in the United States is Scholastic, which sponsors more than 100,000 book fairs per year. The amount of money generated by book fairs depends on the quantity of books purchased, and varies from school to school.

Raffles

Attractive or practical prizes, such as tickets for movies, sporting events, concerts or amusement parks; weekend vacations; spa treatments; gift certificates from local retailers; and vouchers for car washes or dry cleaners, help to sell raffle tickets. Raffle organizers ask local businesses to donate prizes, including products, gift certificates, or services. Alternatively, in a “50/50” raffle, the prize is half of the money raised. For example, if \$1,000 worth of tickets are sold, the winner takes home \$500. Since raffles are regulated in many states, consult local and state laws prior to organizing a raffle.

Auctions

Auctions can be profitable, since almost all of the auctioned items are donated, usually by parents, school staff or local businesses. For an auction to be successful, several auctioned items should be highly desirable, such as vacation packages, behind-the-scenes tours of sports stadiums, dinner with a local celebrity or rounds of golf.

However, setting up an auction and securing donations can be labor intensive. Auction software programs (such as, AuctionCheckoutPro and Auction Maestro Pro) and professional fundraising auctioneers are available to assist with planning and implementing a profitable auction.

Alternatively, online auctions make fundraising easier. Companies set up a school-specific website on which to post descriptions and photos of items available for purchase. Companies

will also create contact lists, set up online payment program, and generate email messages and thank-you letters to bidders.

Car Washes

A car wash fundraiser can enable a school to earn funds while promoting school spirit and physical activity. The success of a car wash depends on several variables, including weather, location and publicity. It is best to hold a car wash in a visible, high-traffic location (while taking appropriate precautions for traffic safety).

STEP 6:

Monitoring and Evaluation

A recent study of Louisiana’s district wellness policy implementation by the Louisiana Department of Education found that monitoring and evaluation is the most critical, but difficult, part of having a school wellness policy.

Monitoring and evaluation is critical because it will help you determine if, and how effectively, the policy and program strategies are being implemented and whether changes are needed.

Evaluation and feedback are very important in maintaining a coordinated school health program. For example, when making changes to the food environment at the school, it is important to document any financial impact to the school foodservice program, school stores or vending machine revenues. The key elements to a successful monitoring and evaluation plan are **who** will be responsible for monitoring and evaluation, **how** strategies will be monitored and evaluated and **when** policies and activities should be monitored and evaluated. The “who, how and when” should be decided when the coordinated school health implementation plan is developed.

Monitoring

To ensure success, schools must monitor the implementation of coordinated school health programs and wellness policies. Monitoring **allows schools to determine what is working** so the programs and policy can be revised and improved as needed. There should be a set schedule for how frequently monitoring will take place. It is also important to decide who will

monitor policy implementation and who needs to hear about the progress and outcomes. Reports may be monthly, quarterly, annually, etc. and should be shared with the school administration, school board, community and key stakeholders.

A sustained monitoring effort by each school site helps to:

- ensure that new programs and policies are successfully implemented;
- reinforce the wellness policy goals with school staff;
- assess how well the coordinated school health program is being managed and enforced;
- recognize school health and wellness success milestones; and
- periodically update and amend a wellness policy or school health program as needed.

Through the monitoring process, you will be able to address some important questions asked by policymakers, students, school staff, parents and the general public.

For example you may ask: *“What changes to nutrition education, physical activity, the nutritional quality of foods available to student, and other aspects covered by the policy occurred in each school as a result of the school’s Wellness Policy?”*

By asking such a question, you can determine if:

- the number of students participating in nutrition education changed;
- students have a different number of minutes of physical activity than in prior periods;
- the campus changed available food options;
- the students increased their knowledge of healthy foods; and
- participation in the National School Breakfast or Lunch Program changed.

Monitoring a coordinated school health program keeps people involved and engaged as progress is made. The following are other examples of elements of school wellness to monitor:

Monitor and document process and progress toward achieving action plan objectives.

- Discuss progress on the action plan at regular wellness committee meetings. Identify successes, challenges and strategies for addressing challenges.
- Review the processes being used to increase coordination. For example: How well are the coordinator and groups functioning?
- Adjust activities and timeline as needed.

Arrange for training and support.

- Set up staff development to raise awareness about the benefits of coordinated school health programs. Emphasize that everyone shares the responsibility for, and can contribute to, healthy students and a healthy school.

- Organize activities and training as needed to support the internal functioning of the committee(s) and to facilitate the completion of the action plan. Examples include team-building or other skill-building activities for the team(s)/committee(s).

Provide ongoing communication, advocacy and training about coordinated school health and wellness.

- Regularly publicize school health activities and accomplishments in school and community media. Events that can be photographed seem to be of most interest to the media, but press releases are also a good idea.
- Regular communication and training help to address changes in personnel (especially of key players) and help to maintain the momentum for change.
- The goal is to eventually saturate the school and community with consistent and reinforcing health promoting messages.

Evaluation

It is very important to assess and document the impact and outcomes of a new coordinated school health program or school wellness policy. How do you know what your school is doing is working? How can it be improved? Are there any unexpected outcomes?

Evaluation is **what you do with the information you have gathered**. Evaluation helps determine the effectiveness of your strategies of your coordinated school health program and strength of your wellness policy. Evaluation is critical to assessing school wellness policies and programs in individual schools, and it helps school districts and state agencies to provide targeted technical assistance. It also helps determine if your strategies need to be modified in order to meet or maintain goals. Monitoring and evaluation results should be shared with your key stakeholders.

Evaluation helps to:

- improve the content of, support for, and implementation of, school wellness programs and policies;
- document environmental changes, staff needs and changes in revenue;
- provide better services for staff, faculty and students;
- make a case for more staff, funding or policies;
- ensure programs are on course; and
- identify new and changing needs.

It is also important to assess student, parent, teacher and administration satisfaction with the new policies and programs. A good evaluation plan does not need to be extensive, formal or put additional undue burdens on staff that is involved in the process. Through the evaluation

process, you will be able to answer some basic questions that are very important to policymakers, students, school staff, parents and the general public.

Evaluate and report on the impact of the action plans for the coordinated school health program.

- Identify improvements in the quality of each component.
- Identify increases in coordination among school components and between school and community services and programs.
- Report regularly on action plan progress and school wellness program impact to school administrators, to the school board or committee and other appropriate groups.
- Organize a gathering at least once a year to recognize those who have contributed to the quality and coordination of school health.

Advocate with the school board and administration to formalize school wellness program components.

- Work with the wellness committee to advocate for policy, procedures and/or funding that will sustain changes, e.g., the coordinator position and committee's operation.

Evaluation Resources

If you need further information on the evaluation process, the following resources are among those available to assist you:

Evaluation Primer: An overview of education evaluation

<http://www.ed.gov/offices/OUS/PES/primer1.html>

This material is excerpted from Understanding Evaluation: The Way to Better Prevention Programs, full text available at <http://www.ed.gov/PDFDocs/handbook.pdf>.

Framework for program evaluation

<http://www.cdc.gov/eval/framework.htm>

This CDC publication outlines steps and standards for effective program evaluation.

Criteria for Evaluating School-Based Approaches to Increasing Good Nutrition and Physical Activity

http://www.fns.usda.gov/tn/healthy/AFHK_criteria_for_evaluating_programs.pdf

This document, from Action For Healthy Kids, outlines an array of issues to consider when evaluating school-based programs.

SECTION 4:

ADDITIONAL RESOURCES

Appendix A: Resources for Coordinated School Health Components

School Health and Wellness

CDC's Division of Adolescent and School Health: <http://www.cdc.gov/HealthyYouth/>

School Health Programs—Improving the Health of Our Nation's Youth:
<http://www.cdc.gov/nccdphp/publications/aag/pdf/dash.pdf>

Alliance for a Healthier Generation: <http://www.healthiergeneration.org/schools.aspx>

Action for Healthy Kids: <http://www.actionforhealthykids.org/>

Louisiana Department of Education—Safe and Healthy Schools:
<http://www.louisianaschools.net/lde/scs/1937.html>

School Health Related Links:
<http://www.nsba.org/MainMenu/SchoolHealth/SchoolHealthRelatedLinks.aspx>

School Wellness Policies

USDA Team Nutrition—Local Wellness Policy:
<http://www.fns.usda.gov/tn/healthy/wellnesspolicy.html>

Model School Wellness Policies: <http://www.schoolwellnesspolicies.org/>

USDA Guide to Local Wellness Policies:
<http://teamnutrition.usda.gov/Healthy/wellnesspolicy.html>

Local School Wellness Policies—Food Research and Action Center:

http://www.frac.org/html/federal_food_programs/programs/school_wellness.html

School Wellness Policies and Initiatives—Louisiana Department of Education:

<http://www.doe.state.la.us/Lde/scs/2784.html>

Louisiana School Wellness Policy Action Plan Guide:

<http://www.actionforhealthykids.org/assets/clubs/louisianawellness-policies.pdf>

Orleans Parish School District Wellness Policy (p.30):

<http://www.nops.k12.la.us/uploads/File/board/Policy%20Manual/Merged%20Polices%20REV%20-%20PDF.pdf>

Coordinated School Health Programs

Coordinated School Health Overview: <http://www.cdc.gov/HealthyYouth/CSHP/>

School Health Index Assessment: <https://www.cdc.gov/HealthyYouth/shi/>

Making Health Academic: <http://www2.edc.org/MakingHealthAcademic/>

Building Infrastructure for Coordinated School Health: California’s Blueprint

<http://www.cde.ca.gov/ls/he/cs/documents/blueprintfinal.pdf>

State of Maine’s Department of Education—Coordinated School Health Program Resources:

<http://www.mainecshp.com/resources.html>

School Health Funding Opportunities

Center for Health and Health Care in Schools Grant Alerts:

<http://www.healthinschools.org/News-Room/Grant-Alerts.aspx>

Robert Wood Johnson Foundation—Local Funding Partnerships:

<http://www.lifp.org/html/common-places.html>

W.K. Kellogg Foundation Healthy Kids Program:

<http://www.wkkf.org/what-we-support/healthy-kids.aspx>

Healthy School Environment

Action Steps for Implementing a Healthy School Environment:

http://www2.edc.org/MakingHealthAcademic/Concept/actions_environment.asp

U.S. EPA Healthy School Environment Resources: <http://cfpub.epa.gov/schools/>

State of Tennessee Health School Environment Resources:

<http://tennessee.gov/education/schoolhealth/environment/>

Healthy School Environments—National Clearinghouse for Educational Facilities:

http://www.edfacilities.org/rl/healthy_schools.cfm

School Environment Survey for Students: <http://www.greenflagschools.org/Survey.pdf>

Health Education

CDC's Health Education Curriculum Analysis Tool (HECAT):

<http://www.cdc.gov/HealthyYouth/hecat/>

American Association for Health Education: <http://www.aahperd.org/aahe/>

CDC's School Health Education Resources: <http://apps.nccd.cdc.gov/sher/>

Health Education Resource Exchange (H.E.R.E)—Materials by Subject:

<http://here.doh.wa.gov/materials-by-subject>

Health Education—National Institute of Child Health and Human Development:

<http://www.nichd.nih.gov/health/education/>

Physical Activity and Education

CDC's Physical Education Curriculum Analysis Tool (PECAT):

<http://www.cdc.gov/healthyyouth/pecat/>

Let's Move in Schools—National Association for Sport and Physical Education:

<http://www.aahperd.org/naspe/advocacy/letsmoveinschool/>

Professional Development Opportunities for Physical Educators:

<http://www.aahperd.org/naspe/professionaldevelopment/>

SPARK Physical Education and Wellness: <http://www.sparkpe.org/>

Louisiana Safe Routes to School:

http://www.dotd.louisiana.gov/planning/highway_safety/safe_routes/

PE Central: <http://www.pecentral.org/>

Health Services

National Association of School Nurses—Resources and Information:

<http://www.nasn.org/Default.aspx?tabid=62>

National Assembly on School-Based Health Care:

<http://www.nasbhc.org/site/c.jsJPKWPFJrH/b.2554077/k.BEE7/Home.htm>

Health Resource Guide for Educators—Louisiana Department of Education:

<http://www.doe.state.la.us/lde/uploads/2702.pdf>

LaCHIP—Louisiana Children’s Health Insurance Program:

<http://bhsfweb.dhh.louisiana.gov/LaCHIP/>

School-Based Health Centers Making a Difference—LPHI Evaluation Report

<http://lphi.org/home2/section/3-30-32-90-326/evaluation-study%3A--sbhc%27s-making-a-difference>

Nutrition

Keys to Excellence—School Nutrition Association:

<http://www.schoolnutrition.org/Content.aspx?id=2406>

School Community Food Assessment Toolkit:

<http://www.familycookproductions.com/familycook.html>

Louisiana Department of Education Bulletin 1196—Louisiana Food and Nutrition Programs, Policies of Operation: <http://www.doe.state.la.us/Lde/bese/1041.html>

Act 331, passed by the Louisiana State Senate in 2005, which set standards for snacks and beverages sold outside the cafeteria and set guidelines for schools to increase physical activity:

<http://www.legis.state.la.us/billdata/streamdocument.asp?did=319230>

Pennington Biomedical Research Center’s “Approved Vending List for Louisiana School”:
<http://www.pbrc.edu/division-of-education/vending-list-for-schools/>

LSU AgCenter Food and Health Resources and Programs:
http://www.lsuagcenter.com/en/food_health/

USDA’s Fresh Fruit and Vegetable Program for schools:
<http://www.fns.usda.gov/cnd/ffvp/Toolkit/FFVPtoolkit.htm>

Action for Healthy Kids Guide to Healthy School Stores:
<http://www.actionforhealthykids.org/resources/files/alafhk-healthy-school-stores.pdf>

Twenty Ways to Raise Funds without Candy:
<http://www.kidseatwell.org/flyers/twentywaystoraiseunds.pdf>.

Counseling and Psychological Services

School Health Connection Guide to Metro New Orleans Behavioral Health Providers:
http://www.lphi.org/LPHIadmin/uploads/SHC-Resource-Guide-07_01_08-11711.pdf

National Association of School Psychologists—Information for Educators:
<http://www.nasponline.org/educators/index.aspx>

The Center for Mental Health Services, U.S. Substance Abuse and Mental Health Services Administration (SAMHSA): <http://mentalhealth.samhsa.gov/cmhs/>

Expanded School Mental Health Resources:
<http://www.schoolmentalhealth.org/Resources/ESMH/DefESMH.html>

Project Fleur-de-Lis at Mercy Family Center: <http://www.project-fleur-de-lis.org/>

Children’s Bureau of New Orleans: <http://www.childrens-bureau.com/>

Milestones Mental Health Agency: <http://milestonesmha.homestead.com/>

New Orleans Mobile Behavioral Health Unit:
http://www.gnomobileunits.org/nochildrens_schedule.html

Health Promotion for Staff

School Employee Wellness: A Guide for Protecting the Assets of Our Nation's Schools

<http://www.schoolempwell.org/>

School Employee Wellness—Alliance for a Healthier Generation:

<http://www.healthiergeneration.org/schools.aspx?id=3393>

School Employee Wellness Resources and Links:

http://doh.state.fl.us/family/CSHP/School_Staff_Wellness_Resources_2008.pdf

Weight Watchers at Work Program: <http://www.weightwatchers.com/about/cpp/index.aspx>

Steps to a Healthier NY School Employee Wellness Program:

<http://www.ncsteps.org/worksiteWellness.html>

Family and Community Involvement

Joint Use Agreement Toolkit:

http://www.phlpnet.org/healthy-planning/products/joint_use_toolkit

Action Steps for Implementing Family and Community Involvement in School Health:

http://www2.edc.org/MakingHealthAcademic/Concept/actions_family.asp

National Coalition for Parent Involvement in Education-Resources:

<http://www.ncpie.org/Resources/>

Health, Mental Health and Safety Guidelines for Schools—Family and Community Involvement:

http://www.nationalguidelines.org/links_all.cfm?chapterNumber=1

PTA—Parental Involvement: http://www.pta.org/topic_parent_involvement.asp

Family Involvement Makes a Difference in School Success: <http://www.hfrp.org/publications-resources/browse-our-publications/family-involvement-makes-a-difference-in-school-success>

Communities in Schools: <http://www.cisneworleans.org/>

New Orleans Outreach: <http://www.nooutreach.org/>

New Orleans Afterschool Partnership: <http://gnoafterschool.org/>

School Health Connection: <http://www.lphi.org/home2/section/3-32/school-health-connection>

Appendix B: Critical Health Issues for Youth

The U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) addresses six critical types of adolescent health behavior that research shows contribute to the leading causes of death and disability among adults and youth. These behaviors usually are established during childhood, persist into adulthood, are inter-related and are preventable. In addition to causing serious health problems, these behaviors also contribute to the educational and social problems that confront the nation, including failure to complete high school, unemployment and crime.

Alcohol & Drug Use: <http://www.cdc.gov/HealthyYouth/alcoholdrug/>

- Among youth, the use of alcohol and other drugs has been linked to unintentional injuries, physical fights, academic and occupational problems and illegal behavior.
- Long-term alcohol misuse is associated with liver disease, cancer, cardiovascular disease, neurological damage, depression, anxiety and antisocial personality disorder.
- Drug use contributes directly and indirectly to the HIV epidemic, and alcohol and drug use contribute markedly to infant morbidity and mortality.

Injury & Violence (including suicide): <http://www.cdc.gov/HealthyYouth/injury/>

- Injuries and violence are the leading cause of death among youth aged 5–19: motor vehicle crashes (31% of all deaths), all other unintentional injuries (12%), homicide (15%), and suicide (12%).
- The CDC now provides resources to address electronic aggression—the use of technology and new communication methods to bully or provoke conflict. These are available at <http://www.cdc.gov/ViolencePrevention/youthviolence/electronicaggression/index.html#2>

Tobacco Use: <http://www.cdc.gov/HealthyYouth/tobacco/>

- Tobacco use, including cigarette smoking, cigar smoking and smokeless tobacco use, remains the leading preventable cause of death in the United States.
- Every day about 4,000 American youth aged 12–17 try their first cigarette. It is estimated that smoking causes 435,000 deaths each year in the United States.

Nutrition: <http://www.cdc.gov/HealthyYouth/nutrition/>

- Almost 80% of young people do not eat the recommended servings of fruits and vegetables.
- Nearly 9 million youth in the U.S. aged 6–19 are overweight. Of U.S. youth aged 6–19, 67% exceed dietary guidelines recommendations for fat intake, and 72% exceed recommendations for saturated fat intake.

Physical Activity: <http://www.cdc.gov/HealthyYouth/physicalactivity/>

- Participation in physical activity declines as children get older. Nearly 70% of 9th graders but only 55% of 12th graders participated in sufficient vigorous physical activity on a regular basis.
- Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscles, helps control weight, reduces anxiety and stress, increases self-esteem and may improve blood pressure and cholesterol levels.

Sexual Behaviors: <http://www.cdc.gov/HealthyYouth/sexualbehaviors/>

- Each year, there are approximately 15 million new sexually transmitted infection (STI) cases in the U.S. and about one fourth of these are among teenagers.
- Additionally, almost 900,000 adolescents under the age of 19 become pregnant every year. Teenage pregnancy is one of the leading causes of school dropout.
- Louisiana’s STI rate is among the highest in the country. Louisiana is ranked 1st in the nation for the rate of syphilis, 2nd in gonorrhea, and 5th in Chlamydia. The cities of New Orleans and Baton Rouge have the 2nd and 3rd highest rates of new AIDS diagnoses of all cities in the U.S.

The CDC also addresses other important topics that affect the health and well-being of children and adolescents:

- [Adolescent Health](#)
- [Asthma](#)
- [Childhood Obesity](#)
- [Crisis Preparedness & Response](#)
- [Food Allergies](#)
- [Food Safety](#)
- [Health Disparities](#)
- [Infectious Diseases at School](#)
- [Mental Health](#)
- [Noise-Induced Hearing Loss](#)
- [Skin Cancer](#)

Additional information on these critical health topics is available at CDC's Division of Adolescent and School Health web site, www.cdc.gov/HealthyYouth/healthtopics/index.htm#six-critical.

Registries of Programs Effective in Reducing Youth Risk Behaviors

Various agencies have identified youth-related programs that they consider worthy of recommendation based on expert opinion or a review of design and research evidence. These programs focus on different health topics, risk behaviors and settings. Each agency has their own process and criteria for determining the programs that are worthy of recommendation.

National Registry of Evidence-based Programs and Practices (NREPP):

<http://nrepp.samhsa.gov/>

Sponsored by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA)

Health Topics Addressed: Alcohol use; Consumer/family-operated care ; Criminal/juvenile justice ; Environmental strategies; HIV/AIDS; Homelessness; Older adults/aging; Seclusion and restraint alternatives; Suicide prevention; Tobacco/smoking; Violence prevention

Exemplary and Promising: Safe, Disciplined and Drug-Free Schools Programs:

http://www2.ed.gov/admins/lead/safety/exemplary01/report_pg9.html

Sponsored by the Office of Safe and Drug Free Schools, U.S. Department of Education

Health Topics Addressed: Alcohol, tobacco and other drug abuse prevention; Building social competencies; Violence prevention treatment programs

Compendium of HIV Prevention Interventions with Evidence of Effectiveness:

http://www.cdc.gov/hiv/resources/reports/hiv_compendium/

Sponsored by the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services (HHS)

Health Topics Addressed: HIV/AIDS prevention

Research-Tested Intervention Programs

<http://rtips.cancer.gov/rtips/index.do>

Sponsored by National Cancer Institute, HHS

Health Topics Addressed: Diet and nutrition; Physical activity; Sun safety; Tobacco control

Preventing Drug Use among Children and Adolescents: A Research-Based Guide

<http://www.nida.nih.gov/Prevention/Prevopen.html>

Sponsored by the National Institute on Drug Abuse, National Institute of Health, HHS

Health Topics Addressed: Drug abuse prevention

Model Programs Guide

<http://www2.dsgonline.com/mpg/>

Sponsored by the Office of Juvenile Justice and Delinquency Prevention, U.S. Dept. of Justice

Health Topics Addressed: Delinquency/violence prevention; Alcohol, tobacco, and drug use; Sexual activity/exploitation; Mental health

References

Allensworth, D, Kolbe, LJ , eds. The comprehensive school health program: Exploring an expanded concept. *Journal of School Health*. 1987: Special Issue 57(10)

American Cancer Society. Improving School Health: A guide to school health councils. Atlanta, GA; 1999.

American Cancer Society. School Health Program Elements of Excellence: Helping children to grow up healthy and able to learn. Atlanta, GA; 2000.

Bogden, IF and Vega-Matos, CA. Fit, Healthy, and Ready to Learn: A school health policy guide. Alexandria, VA: National Association of State Boards of Education; 2000.

California Project LEAN. Policy in action: A guide to implementing your local school wellness policy. The Center for Weight and Health; University of California, Berkeley. 2006.

Centers for Disease Control and Prevention., Department of Health and Human Services. Adolescent Reproductive Health. <http://www.cdc.gov/reproductivehealth/AdolescentReproHealth/>. Accessed June 2, 2010.

Centers for Disease Control and Prevention. Guidelines for school programs to prevent tobacco use and addiction. *Morbidity and Mortality Weekly Report*. 1996: 43, No. RR-2, 1-18.

Centers for Disease Control and Prevention. Guidelines for school health programs to promote healthy eating. *Morbidity and Mortality Weekly Report*. 1996; 45, No. RR-9: 1-42

Centers for Disease Control and Prevention. School Health Index for Physical Activity and Healthy Eating. Atlanta, GA: U.S. Public Health Service. 2000.

Centers for Disease Control and Prevention. Guidelines for School and Community Programs to Prevent Unintentional Injuries and Violence. Atlanta, GA: U.S. Public Health Service. 2001

Degraw C. A Community-Based School Health System: Parameters for developing a comprehensive student health promotion program. *Journal of School Health*. 1994; 64 (5): 192-200.

Food Research and Action Center. School wellness policy and practice: Meeting the needs of low-income students. Washington, DC: FRAC Publications. 2006.

Hanson T et al. *Ensuring That No Child Is Left Behind: How Are Student Health Risks & Resilience Related To the Academic Progress of Schools?* San Francisco, CA: WestEd; 2004.

Hawkins and Catalano. Broadening the Vision of Education: Schools as health-promoting environments. *Journal of School Health* . 1990; 60, 178-181

Institute of Medicine. Schools and Health: Our nation's investment. Washington, D.C.: National Academy of Sciences, Institute of Medicine. 1997

Kolbe LJ, Collins J, Cortese P. Building the capacity of schools to improve the health of the nation: A call for assistance from psychologists. *American Psychologist*. 1997;52(3):1-10.

Mandell DJ, Hill SL, Carter L, Brandon RN. *The impact of substance use and violence/delinquency on academic achievement for groups of middle and high school students in Washington*. Seattle, WA: Washington Kids Count, Human Services Policy Center, Evans School of Public Affairs, University of Washington; 2002.

McKenzie, F. and Richmond, J. Linking Health and Education: An overview of coordinated school health programs. In Marx and Wooley (eds.) *Health is Academic: A Guide to Coordinated School Health Programs*. New York City: Teachers College Press. 1998.

Mead, H., Cartwright-Smith, L., Jones, K., Ramos, C., Siegel, B., Woods, K. (2008). "Racial and Ethnic Disparities in U.S. Healthcare: A Chartbook." The Commonwealth Fund.

Murray NG, Low BJ, Hollis C, Cross AW, Davis SM. Coordinated school health programs and academic achievement: A systematic review of the literature. *Journal of School Health* 2007;77(9):589–600.

Peterson E, Fink K, Stevens R. Alaska school wellness toolkit. Anchorage, AK: Section of Chronic Disease Prevention and Health Promotion, Division of Public Health, Alaska Department of Health and Social Services, 2006.

Sheehan M, Marshall B, Cahill H, Rowling L, Holdsworth R. School matters: Mapping and managing mental health in schools. Commonwealth of Australia: Department of Health and Ageing. Available at: http://www.mindmatters.edu.au/resources_and_downloads/mindmatters/school_matters.html

Swingle CA. *The relationship between the health of school-age children and learning: implications for schools*. Lansing, MI: Michigan Department of Community Health; 1997.

Taras H. Nutrition and student performance at school. *Journal of School Health* 2005;75(6):199–213.

Taras H. Physical activity and student performance at school. *Journal of School Health* 2005;75(6):214–218.

US Department of Health and Human Services. *Healthy People 2010: Understanding and improving health*. Washington, DC: US Department of Health and Human Services. 2000.

