Comprehensive School Health: An Approach for Building Healthy School Communities

This resource describes the Comprehensive School Health (CSH) approach and explains how it can be used to build healthy school communities. Alberta Health Services (AHS) supports the use of the CSH approach for improving student health and educational success.

What is a healthy school community?
A healthy school community is one that supports the wellness of all its members (e.g., students, teachers, staff, parents, administrators, community partners) and continuously strengthens its capacity as a healthy setting for living, learning and working.1,2

What is Comprehensive School Health?
Comprehensive School Health (CSH) is an internationally recognized, evidence-based approach for building healthy school communities. Addressing the four components of CSH through coordinated planning can improve health and education outcomes for children and youth (see diagram on the next page). CSH can be used to improve many different health issues, including nutrition, physical activity, mental health, injury prevention, tobacco and substance use prevention.

Comprehensive School Health
• is based on collaboration between home, school and community partners3,4,5,6,7,8,9,10
• involves applying evidence-based practices to improving student health
• takes a holistic view of health and well-being within the school environment11
• engages students in meaningful ways12,13
• focuses on building capacity and sustainability within school communities14,15,16,17,18,19,20

Why do we need Comprehensive School Health?
Healthy students are better learners and better-educated students are healthier. CSH can effectively improve both health and education outcomes, and it helps students to be healthy, lifelong learners. CSH also supports the development of many student competencies, such as critical thinking, problem solving, decision making, personal management, collaboration, and leadership.

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<tr>
<th>Healthy children and youth</th>
<th>Educated children and youth</th>
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<tr>
<td>• have better attendance</td>
<td>• are sick less often</td>
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<td>• have better concentration</td>
<td>• lead healthier lifestyles</td>
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<tr>
<td>• participate fully in learning</td>
<td>• become proactive about health</td>
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<td>• perform better in school</td>
<td>• become healthier role models</td>
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<td>• become lifelong learners</td>
<td>• enjoy a greater quality of life</td>
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What Does Comprehensive School Health Involve?

CSH uses a six-step community development process and strategies related to the four components of CSH to address priority health issues. In using this process and addressing these components, it is critical to involve and build relationships between home, school and community partners. The community development process and the components of CSH are described and shown in the diagram below.

The four components of CSH (centre of diagram)

Effective school health initiatives use strategies related to all four components of CSH.21

- **Social and Physical Environments** includes the quality of the relationships between school community stakeholders, the emotional well-being of students and the buildings, grounds, play spaces and equipment in and around the school.
- **Teaching and Learning** includes resources, activities and curriculum where students gain skills and knowledge related to health and wellness.
- **Policy** includes management practices, decision-making processes, policies and procedures that promote and support health and wellness.
- **Partnerships and Services** includes connections between schools, families, community organizations, the health sector and other sectors that support student health.

The community development process (cyclical process within diagram)

School communities can use this process to plan and carry out school health initiatives in a coordinated way. The community development process is fluid in nature, and school communities may begin at different steps or move through the steps in different sequences. The six steps are:

- **Prepare** by gaining support from key stakeholders, identifying a health champion and forming a collaborative team.
- **Create a shared vision** of the ideal healthy school community.
- **Determine the priority issues** by completing a school health assessment to identify opportunities for improving student health and learning.
- **Develop an action plan** to address the needs identified within the school health assessment, using actions related to the four components of CSH.
- **Implement and monitor** the action plan to ensure that goals are met.
- **Reflect, evaluate and celebrate** to ensure that the goal and objectives of the initiative have been met.

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Who Can Be Part of Comprehensive School Health?

Both schools and school jurisdictions can support CSH. At both levels, it is important to have all of the voices in your school community represented. Examples of key partners who may be involved in CSH include

- students
- parents
- teachers
- administrators
- other staff or volunteers who work in or with school communities (e.g., noon-hour assistants, bus drivers, administrative assistants, custodians)
- AHS staff (e.g., public health nurses, health promotion facilitators/coordinators, school health facilitators/liaisons, content experts like dietitians or mental health promotion facilitators)
- community organizations or partners (e.g., physical activity organizations, breakfast programs, recreation centres, local businesses, town council representatives)
- jurisdiction consultants or coordinators (e.g., health and physical education consultants, curriculum consultants)
- representatives from various jurisdiction departments (e.g., communications, vendor relations, facilities management, purchasing)
- superintendents or assistant superintendents
- trustees

Within AHS, there are many different types of health professionals who partner with schools and school jurisdictions to support the creation of healthy school communities. To find an AHS staff member who can support you in building a healthy school community, ask your school health nurse for more information or email cshresources@albertahealthservices.ca.

To learn more about CSH, or to access tools and templates that can support you in creating healthy school communities, visit www.albertahealthservices.ca/csh.asp.
CSH is flexible, and can be used to address a range of priority issues. This means that it may look different from school to school. The following story provides an example of what CSH might look like in a school community.

During a monthly staff meeting at ABC elementary, teachers spoke about how only a few students were taking part in active living opportunities during the school day (e.g., at recess, at lunchtime and after school). Recognizing this trend, two teachers decided to dig deeper and figure out how they might be able to increase student involvement in active living.

- First, the two teachers completed the Foundational Module of the Healthy School Planner tool from the Joint Consortium for School Health (JCSH) to see if active living really was an important priority within their school. Results from this assessment confirmed that there was opportunity for improvement in this area.
- The teacher health champions met with members of the student council, which included students from every class in the school. They also invited parents, the principal, their school health nurse and local community partners.
- This group became the school health team. They discussed how the school could better support active living among students, and agreed to work toward a vision of “active opportunities for all ages, abilities and interests.”
- To find out more about where they should focus their efforts, the school health team completed the joint, more in-depth Active Living Assessment Module from the JCSH, and had students talk with their classmates to find out more about barriers and facilitators to participating in active living opportunities.
- Based on the information they gathered, the school health team determined that students needed a greater variety of active living opportunities, provided at flexible times, and that teachers needed more support for facilitating these opportunities.
- To address these priorities, the school health team developed and carried out an action plan that included strategies related to the four components of CSH:
  - **Social and Physical Environments**: Older students completed a survey to determine what sports and active opportunities students wanted to try. These results were used to plan intramurals that appealed to different grade levels and skill levels (e.g., yoga, soccer, active games, free gym time, dance). The parent council purchased new equipment to support these activities.
  - **Teaching and Learning**: The school jurisdiction’s physical education consultant visited the school to provide educational resources and demonstrate teaching techniques that support inclusive, quality physical education.
  - **Policy**: At a monthly staff meeting, teachers had time to review and discuss the provincial Daily Physical Activity (DPA) policy. Teachers shared the strategies they’d found successful, and set goals for supporting this policy in their classroom and at school-wide events.
  - **Partnerships and Services**: The local Be Fit for Life Centre provided older students and teachers with training on how to use the new sports and DPA equipment.
- By the end of the school year, teachers noticed improvements in students’ attitudes and enthusiasm toward active living and their participation in physical activity. They re-completed the JCSH Active Living Module and found that their scores had improved over the course of the year. The school hosted a family games night, complete with a healthy meal, to celebrate the school’s commitment to active living.
References


