ACHIEVING HEALTH PROMOTING SCHOOLS:
GUIDELINES FOR PROMOTING HEALTH IN SCHOOLS

VERSION **2** OF THE DOCUMENT FORMERLY KNOWN AS
'PROTOCOLS AND GUIDELINES FOR HEATH PROMOTING SCHOOLS'

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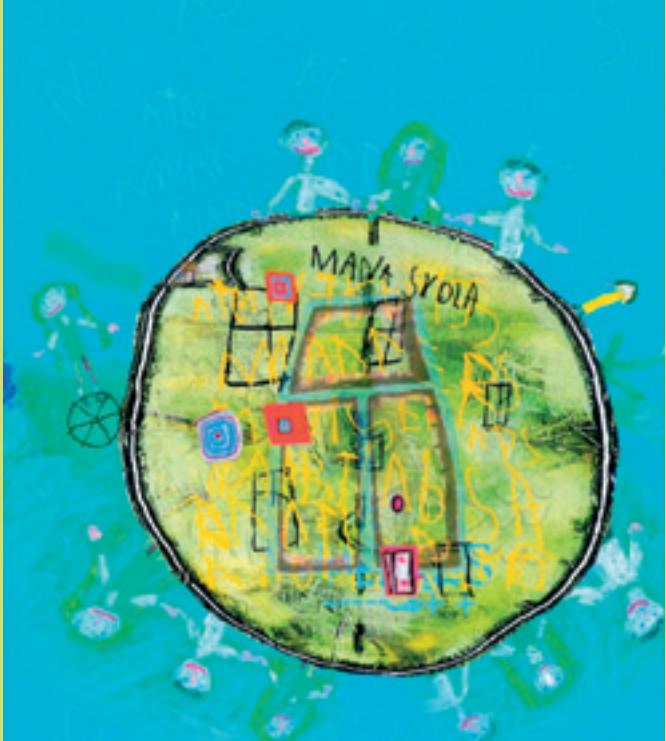
ACHIEVING HEALTH PROMOTING SCHOOLS:
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Schools can make a substantial contribution to a student's health and well-being. This has been increasingly recognised by many international initiatives including those from the World Health Organization (WHO), UNICEF, UNESCO, the U.S. Centers for Disease Control and Prevention (CDC), the International Union for Health Promotion and Education (IUHPE) and others. A range of strategies and programmes have evolved in the last twenty years with diverse names such as *Health Promoting Schools, Comprehensive School Health, Child Friendly Schools* and the *FRESH* initiative. However, these strategies share the connecting thread of a whole school approach and recognition that all aspects of the life of the school community are potentially important in the promotion of health. It has become clear in these approaches that it is necessary to do more than just offer health education classes in the curriculum if we wish schools to fulfil their potential in promoting the health of all our young people.

The timing is right for a re-invigoration of the health promotion agenda in schools. There is a developing understanding of the interlinked relationship between school education and health and this is reflected by the prominence given to school education in the United Nations Millennium Development Goals. Much attention is currently being focused by the Global Commission on the Social Determinants of Health on the unacceptable gap of 48 years in life expectancy between the world's richest and poorest countries. The Bangkok Charter recognised that health should be a core responsibility of all governments and that their role should not be restricted to the health sector. In addition, there is growing evidence that effective schools, to which young people feel connected, can impact on health and inequalities in health.

A considerable body of evidence has emerged in the last twenty years to inform governments, schools, non-government organisations (NGO's), teachers, parents and students about effective school health programmes. School programmes that are integrated, holistic and strategic are more likely to produce better health and education outcomes than those which are mainly information-based and implemented only in the classroom. These *Guidelines for Promoting Health in Schools* identify the basic principles and components of this approach.

The Guidelines have been produced through a process of discussion and consultation with health and educational professionals around the world. They draw on the best available research, evidence and good practice. They are presented in a summary format to assist government education and health ministries, schools, NGOs, and other interested groups and individuals to be more effective and strategic in their efforts to promote health in schools. This second version of the Guidelines also incorporates revisions suggested by personnel engaged in school health policy and practice, who were present at various global conferences where the document was presented since the first version was released in 2005. To ensure that these guidelines offer concise assistance to busy policy makers it was decided not to provide a comprehensive list of scientific references; however, a selection of key documents and papers are referenced at the end and additional school health-related links and a more detailed bibliographies are available at the International School Health Network (http://www.internationalschoolhealth.org) and the IUHPE (www.iuhpe.org) websites.

PRINCIPLES OF HEALTH PROMOTING SCHOOLS

A HEALTH PROMOTING SCHOOL:
- **Promotes the health and well-being of students.**
- **Enhances the learning outcomes of students.**
- **Upholds social justice and equity concepts.**
- **Provides a safe and supportive environment.**
- **Involves student participation and empowerment.**
- **Links health and education issues and systems.**
- **Addresses the health and well-being issues of all school staff.**
- **Collaborates with parents and the local community.**
- **Integrates health into the school's ongoing activities, curriculum and assessment standards.**
- **Sets realistic goals built on accurate data and sound scientific evidence.**
- **Seeks continuous improvement through ongoing monitoring and evaluation.**

PURPOSES OF HEALTH PROMOTING SCHOOLS

- **To enhance educational outcomes**
  - Healthy students learn better. The core business of a school is maximising learning outcomes. Effective Health Promoting Schools (HPS) make a major contribution to schools achieving their educational and social goals.

- **To facilitate action for health by building health knowledge and skills in the cognitive, social and behavioural domains**
  - The school is a setting where health issues and perspectives are used to complement and enrich education priorities e.g. in literacy and numeracy. HPS actions assist in building specific and generic competencies in knowledge and understanding, analysing and synthesising information, and in creating solutions for local and global issues. Students can learn and practise personal and social skills and health promoting behaviours, which can enhance their learning.

ESSENTIAL ELEMENTS OF PROMOTING HEALTH IN SCHOOLS

A Health Promoting School (HPS) is based on the World Health Organization's Ottawa Charter for Health Promotion. It has six essential components, viz:

- **Healthy school policies**
  - These are clearly defined in documents or in accepted practices that promote health and well-being. Many policies promote health and well-being e.g., policies that enable healthy food practices to occur at school; policies which discourage bullying.

- **The school's physical environment**
  - The physical environment refers to the buildings, grounds and equipment in and surrounding the school, such as: the building design and location; the provision of natural light and adequate shade; the creation of space for physical activity and facilities for learning and healthy eating.
  - The physical environment also refers to: basic amenities such as maintenance and sanitation practices that prevent transmission of disease; safe drinking water availability; air cleanliness; as well as any environmental, biological, or chemical contaminants detrimental to health.

- **The school's social environment**
  - The social environment of the school is a combination of the quality of the relationships among and between staff and students. It is influenced by the relationships with parents and the wider community.

- **Individual health skills and action competencies**
  - This refers to both the formal and informal curriculum and associated activities, where students gain age-related knowledge, understandings, skills and experiences, which enable them to build competencies in taking action to improve the health and well-being of themselves and others in their community, and which enhances their learning outcomes.

- **Community links**
  - Community links are the connections between the school and the students' families plus the connection between the school and key local groups and individuals. Appropriate consultation and participation with these stakeholders enhances the HPS and provides students and staff with a context and support for their actions.

- **Health services**
  - These are the local and regional school-based or school-linked services, which have a responsibility for child and adolescent health care and promotion, through the provision of direct services to students (including those with special needs). They include:
    - screening and assessment by licensed and qualified practitioners;
    - mental health services (including counselling) to promote students' social and emotional development; to prevent or reduce barriers to intellectual development and learning; to reduce or prevent mental, emotional, and psychological stress and disturbances, and to improve social interactions for all students.

Establishing health promotion in schools

The following elements have been shown to be necessary in starting a Health Promoting School (HPS):

- **Developing a supportive government / local authority policy for HPS**
  – Where there are supportive policies for HPS by national, or regional, or local authorities, it is easier for schools to embrace the concept. In a number of countries the initiative for HPS have come initially from the school community level leading to later policy adoption at the national level.

- **Achieving administrative and senior management support**
  – The HPS is a whole school approach and, as such, needs to have ongoing support and commitment from head-teachers or school directors/managers/administrators.

- **Creating a small group who is actively engaged in leading and coordinating actions including teachers, non teaching staff, students, parents and community members**
  – HPS begin well if the workload is shared and all key groups are involved in decision making and implementation. It is essential to have a number of students and parents participating and that their ideas are respected.

- **Conducting an audit of current health promoting actions according to the six essential elements**
  – The audit explores what a school is currently doing by examining each of the six elements. A quick overview of the six elements would be a good starting point. If it involves all staff it engenders discussion about health issues and what the school should do about them. It also encourages a larger group of staff to become committed to establishing a HPS.

- **Establishing agreed goals and a strategy to achieve them**
  – Goals need to be realistic and the strategy within the capacity of a school's resources.

- **Developing a Health Promoting School Charter**
  – This document symbolises the commitment of the school and embeds the locally developed principles into the school's policies. A Charter is helpful in setting out principles and targets, and enables the school community to celebrate their achievements in health promotion. Many schools display their Charter in a prominent place to reinforce all of these features.

- **Ensuring appropriate staff and community partners undertake capacity building programmes and that they have opportunities to put their skills into practice**
  – HPS work requires staff to think about activities outside the classroom as equally important to activities within it. It is essential they have ongoing opportunities to attend professional development programmes and to be able to present and discuss their school's initiatives with others.

- **Celebrating milestones**
  – All HPS have certain milestones, e.g., creating the HPS Charter, a student presentation to the local community, a new food policy, etcetera. Celebration of these serves to affirm the concept of HPS in the minds of the school, and its local community and senior officials.

- **Allowing 3-4 years to complete specific goals**
  – Establishing a HPS is not a time limited project. It is a process of change, development and evolution that builds a healthy school community. However, everything cannot be changed at once and if the goals and strategies are realistic, then substantial change can occur in 3-4 years.

Sustaining health promotion in schools

These factors have been demonstrated to be necessary for sustaining the efforts and achievements of the first few years over the following 5-7 years:

- Ensure there is continuous active commitment and demonstrable support by governments and relevant jurisdictions to the ongoing implementation, renewal, monitoring and evaluation of the health promoting strategy (a signed partnership between health and education ministries of a national government has been an effective way of formalising this commitment).
- Establish and integrate all the elements and actions of the health promoting strategy as core components to the working of the school.
- Seek and maintain recognition for health promotion actions both within and outside the school.
- Ensure there is time and resources for appropriate capacity building of staff and key partners.
- Provide opportunities to promote staff health and well-being.
- Review and refresh after each 3-4 years.
- Continue to ensure adequate resources.
- Maintain a coordinating group with a designated leader to oversee and drive the strategy with continuity of some personnel and the addition of new personnel.
- Ensure that most of the new and ongoing initiatives involve most of the staff and students in consultation and implementation.
- Ensure monitoring services in the education sector view health promotion as an integral part of the life of the school and it is reflected in the monitoring indicators.
- Ensure monitoring services in the health sector view student learning and success as an integral part of health promotion and it is reflected in the monitoring indicators.
- Enable the integration of the health promotion in schools strategy with other relevant strategies relating to the health, welfare and education of young people.

Issues which have the potential to inhibit health promotion development and sustainability in schools if not adressed systematically

- Some school health initiatives in the past have been funded over a short project base, contain unrealistic expectations and/or do not take a whole school approach.
- Health promotion outcomes occur in the medium to long-term.
- Evaluation is difficult and complex.
- Health sector funding often risks distorting a health promotion approach to a traditional public health agenda of morbidity and mortality.
- The education sector has certain language and concepts, which have different meanings to those in the health and other sectors, and vice versa. Time, partnerships and mutual respect are needed to build a shared understanding.
- The necessity to provide the education sector with evidence about the advantages a health promoting strategy can offer schools in improving educational outcomes.

What works

- Developing and maintaining a democratic and participatory school community.
- Developing partnerships between education and health sector policy makers.
- Ensuring students and parents feel they have some sense of ownership in the life of the school.
- Implementing a diversity of learning and teaching strategies.
- Providing adequate time for class-based activities, organisation and coordination, and out of class activities.
- Exploring health issues within the context of the students' lives and community.
- Utilising strategies that adopt a whole school approach rather than primarily a classroom learning approach.
- Providing ongoing capacity building opportunities for teachers and associated staff.
- Creating an excellent social environment which fosters open and honest relationships within the school community.
- Ensuring a consistency of approach across the school and between the school, home and wider community.
- Developing both a sense of direction in the goals of the school and clear and unambiguous leadership and administrative support.
- Providing resources that complement the fundamental role of the teacher and which are of a sound theoretical and accurate factual base.
- Creating a climate where there are high expectations of students in their social interactions and educational attainments.

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Cover illustration: 'My School', Latvian pupils' healthy school concept. Zentenes Primary School, Latvia.