

Healthy Schools Consultation 2

Report

Health/Healthy Living
Healthy Child Manitoba
Manitoba Education, Citizenship, and Youth

Prepared January 2007



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Executive Summary

Healthy Schools was first introduced in 2000 as the “Nurses in Schools” program. In December 2002, a “Healthy Schools” framework for Manitoba was developed after a provincial consultation. As a result of this and other input, the original “Nurses in Schools” concept grew into the broader “Healthy Schools”. A follow-up provincial consultation was held on October 13, 2006 to examine how the initiative has grown since its inception and to explore ways to strengthen it.

Objectives of the Healthy Schools Consultation 2

- To provide an update about Healthy Schools implementation across Manitoba.
- To provide an opportunity for schools, school divisions, regional health authorities, and others to share their Healthy Schools experiences (successes and challenges) at the local and regional level.
- To identify options and recommendations to strengthen Healthy Schools throughout Manitoba as well as within local jurisdictions.

Participants: In total, 95 individuals participated in the consultation (19 government, 21 regional health authority, 44 school division, and 10 other representatives).

Successes and Challenges: The following themes were identified as successes and challenges of Healthy Schools:

	Successes/Strengths	Challenges/Concerns
Community-based Activities	Partnership; Sustainability	Coordination/ Awareness; Partnership; Sustainability; Target Populations
Provincial Resources	Tangible; Valuable	Accessibility; Curriculum Link
Targeted Provincial Campaigns	Awareness; Healthy lifestyles	Participation; Sustainability
Other (Specifically the Healthy Kids, Healthy Futures)	Promotion/ Awareness; Feedback; Partnership; Policies/ Guidelines	Grade 11/12 PE/HE; Sustainability; Coordination/ Structure; Perceptions

Opportunities to Strengthen Healthy Schools: The following seven themes were identified as opportunities to strengthen Healthy Schools: 1) community coordinator, 2) sustainability (financial and lifelong), 3) promotion/awareness, 4) target populations, 5) coordination/ collaboration, 6) evaluation, and 7) curriculum.

Priorities: Healthy Schools will carry out four priorities over a period of two years including 1) identify models of partnership and leadership within Manitoba and within other jurisdictions in Canada; 2) hold regional workshops for health and education stakeholders; 3) increase awareness; and 4) conduct ongoing evaluation.

Healthy Schools Consultation 2 Report

January 2007

Background

Healthy Schools was first introduced in 2000 as the “Nurses in Schools” program. The primary goal of “Nurses-in-Schools” was to increase public health and primary health capacity in Manitoba schools and to promote wellness activities within the larger school community.

In December 2002, a provincial consultation brought together approximately 100 individuals from government, non-government, health, education and the community to develop a “Healthy Schools” framework for Manitoba. As a result of this and other input, the original “Nurses in Schools” concept grew into the broader “Healthy Schools” to better reflect the needs of school communities throughout Manitoba.

Since that time various Healthy Schools and related activities have taken place, including:

- providing funding to school divisions and regional health authorities to support Healthy Schools plans;
- introducing targeted provincial campaigns on specific health topics to address issues affecting Manitoba children and youth;
- developing provincial-wide resources to assist school communities in promoting health;
- assisting in the planning and implementation of the Healthy Kids Healthy Futures task force recommendations; and
- participating in the FPT Joint Consortium for School Health.

A follow-up provincial consultation was held on October 13, 2006 to examine how the initiative has grown since its inception and to explore ways to strengthen it.

Appendix I provides a flow chart of Healthy Schools structure including funding and management, coordination, and components.

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- To provide an update about Healthy Schools implementation across Manitoba.
- To provide an opportunity for schools, school divisions, regional health authorities, and others to share their Healthy Schools experiences (successes and challenges) at the local and regional level.
- To identify options and recommendations to strengthen Healthy Schools throughout Manitoba as well as within local jurisdictions.

Participants

In total, 95 individuals participated in the consultation (19 government, 21 regional health authority, 44 school division, and 10 other representatives). Participants included a variety of representatives from the health and education sectors from across Manitoba, as well as representatives from government departments and community organizations.

A total of 8 regional health authorities, 24 school divisions, 10 government departments, and 10 other organizations were represented during the consultation (Table 1).

Table 1: Government Departments, Regional Health Authorities, School Divisions, and Other Organizations Represented during Consultation.

Government Departments Represented	Regional Health Authorities Represented
Aboriginal & Northern Affairs Culture Heritage & Tourism First Nations & Inuit Health Branch Healthy Child Manitoba Manitoba Education, Citizenship & Youth Aboriginal Education Directorate Manitoba Health, Primary Health Care Unit Manitoba Health, Regional Affairs Manitoba Health/Healthy Living Manitoba Labour & Immigration	Assiniboine Regional Health Authority Brandon Regional Health Authority Burntwood Regional Health Authority Central Regional Health Authority Interlake Regional Health Authority North Eastman Regional Health Authority South Eastman Regional Health Authority Winnipeg Regional Health Authority
School Divisions Represented	Other Organizations Represented
Beautiful Plains School Division Brandon School Division Evergreen School Division Frontier School Division Hanover School Division Interlake School Division Lakeshore School Division Lord Selkirk School Division Louis Riel School Division Mountain View School Division Mystery Lake School Division Park West School Division Pembina Trails School Division Portage La Prairie School Division Prairie Rose School Division Prairie Spirit School Division River East Transcona School Division Rolling River School Division Seine River School Division Seven Oaks School Division St. James-Assiniboia School Division Sunrise School Division Turtle Mountain School Division Winnipeg School Division	Agencies for School Health Dietitians of Canada Health Programs & Services Executive Network Inter Regional Public Health Managers Network Manitoba Association of Parent Councils Manitoba Association of School Trustees Manitoba Council on Child Nutrition Manitoba Harm Reduction Network Manitoba Physical Education Teachers Association Manitoba Teacher Society Physical Activity Coalition of Manitoba

The type of representatives present during the consultation varied. School division representatives included school trustees, superintendents, student services administrators, physical education/health education consultants, teachers, and principals and vice-principals. Regional health authority representatives included medical officers of health, public health program managers, community area team managers, and community nutritionists.

Structure of the Day

David Church from Wildwood Consulting Inc. facilitated the consultation.

Participants were assigned to tables (with approximately 8 individuals per table) at the start of the consultation, with the goal of having broad cross-sectoral and regional representation.

Morning

The Healthy Schools Coordinator provided a presentation on Manitoba Healthy Schools implementation to the present time. The presentation included a brief history of Healthy Schools and an overview of the three key components of Healthy Schools (community-based activities, targeted provincial activities, and resource development) as well as activities relating to Healthy Schools such as the Healthy Kids, Healthy Futures Task Force (www.manitoba.ca/healthykids) recommendations and the Joint Consortium for School Health (www.jcsh-cces.ca).

After the presentation each table participated in a small group discussion identifying successes and challenges of the Healthy Schools initiative. Participants had an opportunity to share their own experiences in relation to the three components and one for related activities of Healthy Schools:

1. Community-based activities
2. Targeted provincial activities
3. Provincial resources
4. Related activities (specifically the Healthy Kids, Healthy Futures recommendations related to Healthy Schools)

Participants then generated a list of successes and challenges for each of these components.

Afternoon

Each table was assigned to examine one of the four components. Tables were asked to review the data on the successes and challenges identified in the morning session and to identify opportunities to strengthen that specific

component. A spokesperson was selected to highlight patterns that were evident in the data.

The consultation concluded with a large group discussion providing participants an opportunity to discuss potential next steps for Healthy Schools with Healthy Schools management and staff (Manitoba Health/Healthy Living, Healthy Child Manitoba, and Manitoba Education, Citizenship & Youth).

Appendix II includes the table instructions for discussions.

Results

The following summarizes participant discussions relating to 1) successes and challenges of Healthy Schools and 2) opportunities to strengthen Healthy Schools.

Successes and Challenges

Appendix III includes all data (and themes) generated during these discussions.

Community-based Activities

Successes/Strengths

Two themes represent community-based activities successes: 1) partnership and 2) sustainability.

Partnership: Participants felt that community-based activities “engaged partnerships”, providing opportunities for community involvement, networking, and collaboration.

Sustainability: Participants recognized that community-based funding provided sustainability, stating that “funding has helped some change”, “funding sparked creative thinking and approaches”, and “schools are using Healthy Schools to augment activities already going on”.

Challenges/Concerns

The challenges of the community-based activities were summarized into four themes: 1) coordination/awareness, 2) partnership, 3) sustainability, and 4) target populations.

Coordination/Awareness: Participants indicated that there needs to be improved coordination and communication between different groups, including between schools within schools divisions, school divisions within Manitoba,

school divisions and regional health authorities, and Healthy Schools and other initiatives (such as the Chronic Disease Prevention Initiative).

Partnership: Participants felt that partnership needed to be strengthened between schools/school divisions and regional health authorities. Partnership also needs to be broadened into the community (e.g. recreation facilities).

Sustainability: Participants identified sustainability as a challenge and the “perception of (the Healthy Schools) initiative as an add-on versus integration”. The question was raised “what’s the next step?”.

Target Populations: Connecting the community/home with schools, getting parents involved, and reaching different populations (e.g. suburban, newcomers, rural, aboriginal) were identified as challenges.

Provincial Resources

Successes/Strengths

Participants commented on some of the Healthy Schools resources, describing them as “tangible” and “valuable”. Specific resources identified included the website (“one stop shop”; “central location”), Healthy Living Challenge Calendars, and **Healthy Schools *in motion*** activity bin and Energy Blast DVD.

Challenges/Concerns

Two themes were identified by participants’ regarding the challenges of the provincial resources: 1) accessibility and 2) curriculum link. Other comments were noted however themes were not evident.

Accessibility: Most feedback regarding accessibility referred to the need for culturally appropriate resources (e.g. aboriginal, adults, and immigrants).

Curriculum Link: Participants suggested that Healthy Schools resources be link with the Manitoba Physical Education/Health Education curriculum.

Targeted Provincial Campaigns

Successes/Strengths

The majority of feedback regarding the successes of targeted provincial campaigns included statements such as “raising and increasing awareness” about “healthy living activities and healthy lifestyles”.

Challenges/Concerns

The information collected relating to the challenges of the targeted provincial campaigns were summarized into two themes: 1) participation and 2) sustainability. Other comments were noted however themes were not evident.

Participation: Challenges regarding participation in the targeted provincial campaigns included the “lack of advance notice for initiatives” and “outcome evaluation”. Participants also thought that we needed to “increase the number of participating schools”.

Sustainability: Sustainability referred mainly to funding. Participants commented about the energy and time required to apply for the campaigns and episodic versus sustained funding.

Other (Specifically the Healthy Kids, Healthy Futures)

Successes/Strengths

Four themes were identified under “other” Healthy Schools successes: 1) promotion/awareness, 2) feedback, 3) partnership, and 4) policy/guidelines.

Promotion/Awareness: Participants felt that the messaging of Healthy Schools is increasing. The initiative also “makes people think about healthy living” and that “kids are becoming more engaged”.

Feedback: Participants identified the consultation and forum sessions as successful. They felt that the “open dialogue happening” was positive.

Partnership: Increased inter-agency collaboration and partnerships between health, education and others was recognized as successful.

Policies/Guidelines: Statements about policies and guidelines included “mandated policies give direction” and the “flexibility of guidelines is positive”.

Challenges/Concerns

Participants’ feedback relating to the challenges of other Healthy Schools related activities were summarized into four themes: 1) grade 11 and 12 physical education and health education, 2) sustainability, 3) coordination/structure, and 4) perceptions.

Grade 11/12 PE/HE: Participant comments within this theme varied, including inquires about resources, time allocation, professional support, and the absence on Health Education in the curriculum.

Sustainability: Participants identified sustainability as a challenge, specifically in terms of “keeping the momentum going” and the “increase workload on school staff”. Participants also inquired “will the funding continue?”

Coordination/Structure: “Clearer model of delivery”, “mainstreaming”, “simplification”, and “facilitating partnership” were suggested by participants as methods to address the coordination and structure of Healthy Schools activities.

Perceptions: Participants indicated that individuals working in Health and Education may have different perceptions about Healthy Schools.

Opportunities to Strengthen Healthy Schools

Participant discussions regarding identifying opportunities to strengthen Healthy Schools were generally consistent across each of the four components; therefore data from all discussions were collated and themed collectively. Appendix IV includes specific statements and themes generated during these discussions within each component. Seven themes were identified as a result of these discussions including 1) community coordinator, 2) sustainability (financial and lifelong), 3) promotion/awareness, 4) target populations, 5) coordination/collaboration, 6) evaluation, and 7) curriculum.

Community Coordinator: Participants indicated that there should be a “facilitator”, “coordinator”, “liaison”, “consultant”, “connector”, or “champion” at the “school”, “community”, “divisional”, or “regional” level to facilitate Healthy Schools promotion, activities, networking, and partnerships.

Sustainability: Sustainability referred to both financial as well as lifelong sustainability. Participants felt that funding was essential, it needed to be long-term and extended into the community. Participants felt that there needed to be student leadership, parent involvement, regional pooling of funds, and continuity in order to achieve sustainability for lifelong health.

Promotion/Awareness: Methods for promoting Healthy Schools and increasing awareness to the greater community included social marketing, the development of a communication strategy, creating a common vision, celebrating successes, sharing what is working, and continuing dialogue between stakeholders.

Target Populations: Participants indicated that resources should be culturally appropriate and that there needs to be multiple approaches to accessing information including websites, hard copy materials, and presentations.

Coordination/Collaboration: Coordination and collaboration of other initiatives with Healthy Schools, including training and programs, was suggested as an opportunity to strengthen Healthy Schools. This also included combining and

supporting committees and partnerships with common visions and integrating initiatives to all levels (e.g. daycare, schools communities).

Evaluation: Participants identified evaluation as an opportunity to strengthen Healthy Schools. Suggestions included developing indicators, measurable outcomes, action research, and evidence-based evaluation.

Curriculum: Participants indicated that Healthy Schools and related health materials should be linked with the Manitoba Physical Education/Health Education curriculum. Participants also expressed interest in the implementation of the Grade 11 and 12 Physical Education/Health Education curriculum.

Priorities

In consideration of Manitoba's Healthy Schools Model and the feedback generated as a result of the consultation Healthy Schools will carry out the following four priorities. These priorities will be developed, planned, and implemented over a period of two years.

Models of Partnership/Leadership

Healthy Schools will conduct an environmental scan of health-education partnerships and leadership models within Manitoba and within other jurisdictions in Canada. A report will be prepared based on the findings as a tool for health and education stakeholders.

Regional Workshops

Healthy Schools will hold regional workshops throughout Manitoba to bring health and education stakeholders together to provide a facilitated opportunity to collaborate and develop Healthy Schools plans.

Healthy Schools Awareness

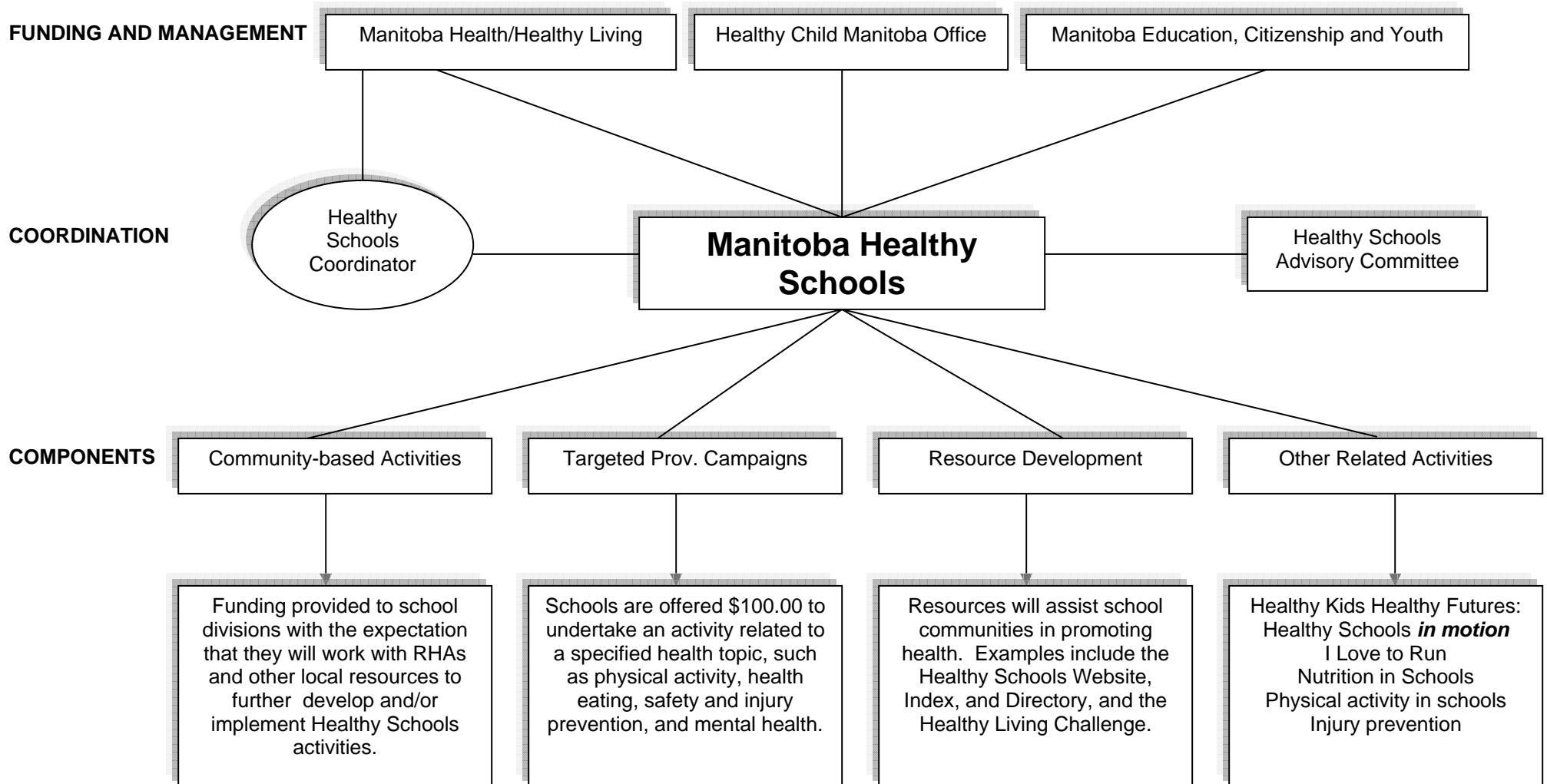
Healthy Schools will generate materials and opportunities to increase awareness and for stakeholders to more readily access information related to Healthy Schools.

Evaluation

Healthy Schools will continue to be evaluated on an ongoing basis at the provincial level. Healthy Schools will also work with the Joint Consortium for School Health to identify indicators and outcome variables to evaluate Healthy Schools within Manitoba and Canada

Appendix I

Healthy Schools Structure



Appendix II

Handout 1 Facilitated Table Group Discussion

Purpose: To gather participant feedback on the successes and challenges of the elements of the Healthy Schools Initiative

Time available: 45 minutes

Instructions:

1. Invite a volunteer from your table to facilitate this discussion and to keep notes on this sheet.
2. Invite each participant at your table to share one *significant success*, and one *continuing challenge*.
3. List responses below using brief phrases.
4. After all have shared, select one key idea for each component of the Healthy Schools Framework and write it on an index card - green for successes, pink for challenges.

What do you see as significant successes of this initiative?

What challenges warrant further attention?

Relate your feedback to Healthy Schools Framework Components:

On each card submitted by your table, please write the number (1,2,3, or 4) to identify the program component to which the card most closely relates.

- 1. Promoting community-based activities consistent with the Healthy Schools model
- 2. Developing province-wide resources
- 3. Promoting targeted provincial activities in response to issues affecting health and wellness of the school community

Other (Including Healthy Kids, Healthy Futures)

Handout 2 Facilitated Table Group Discussion

Purpose: To identify methods and strategies to strengthen Healthy Schools

Focus question:

"What can we do to strengthen this component of the Healthy Schools initiative?"

Instruction:

1. In your table groups, review data on successes and challenges.
2. Discuss *opportunities to strengthen this component*.
3. List on a flip chart sheet *promising opportunities to strengthen this component*.
4. Select your top 3 priorities and mark with a "star".
5. Choose a spokesperson to report on your group's work.

Time available: 45 minutes

Appendix III

Successes and Challenges of Healthy Schools

Community-based Activities

Successes/Strengths

Partnership

- Developing community partnerships
- Growth of resources (i.e. Partnerships)
- Program has engaged partnerships
- Community involvement – schools, family/parent, and community
- Synergy: Community networking and partnerships
- Recognizes a need for community collaboration

Sustainability

- Forces focus and action
- The funding has helped some change
- Funding sparked creative thinking and approaches
- Grants are good starters but...
- Increased awareness of relevant health issues for children and youth
- Created common vision and awareness
- Raised awareness – private sector, general public, and schools
- Schools are using HS to augment activities already going on
- \$ for support
- Target \$ - large \$

Other

- Initiatives and resources can be adapted to the needs of the population
- Process – consultations, evaluations, partnerships (RHA & division)

Challenges/Concerns

Coordination/Awareness

- Lack of a full time coordinator to facilitate these initiatives
- Need to increase coordination and communication between schools within schools divisions and among school divisions
- Disconnect between initiatives targeting same groups and same risks (e.g. HS and Chronic Disease Prevention Initiative)
- Coordination between schools and RHAs
- Need to strength the link between HS and preschool programming (Healthy Child, Parent Resource Centres, etc.)
- Need to make HS connected to healthy communities
- Lack of communication = confusion

- Increase awareness of HS to general community

Partnership

- Need better partnerships with health professionals
- Strengthening partnerships
- Partnerships – who, what, where, how, why
- Strengthening and broadening partnerships
- Difficulty keeping partnership with schools/RHAs since funds have been administered through schools
- School-community partnerships
- Drawing recreation commissions into schools
- Joint-use agreements

Sustainability

- Sustainability – what’s the next step?
- Sustainability due to competing school priorities (e.g. \$100.00 – one time initiative)
- Perception of initiative as add-on vs integration

Target Populations

- How to get parents involved?
- Connecting community and home with the schools (role modeling)
- Reaching marginalized populations
- Incorporate cultural focus (food, dance spiritual)
- How to build meaningful collaboration with communities and families.
Require different strategies to reach and involve different populations (i.e. suburban, newcomers, rural, aboriginal)

Other

- Reporting and funding amounts unbalanced
- How to integrate healthy activities into school activities (to look at school policies through this lens?)

Provincial Resources

Successes/Strengths

- Phenomenal website – great as another tool in the toolbox
- Calendars
- Website – central location of information & resources
- Resource availability & awareness (e.g. website)
- Resources – bin & DVD
- Web resources – “One stop shop”
- The evidence based & best practice information helps support the work – user friendly
- More tangible resources are made available

- Tangible resources
- Website & resources are valuable

Challenges/Concerns

Accessibility

- Increase access to and use of website
- Resources in French
- Inclusiveness – access, availability (First nations, adults, immigrants)
- Need for culturally/economically appropriate resources and promotion
- Challenge to know resources & activities are culturally appropriate given large numbers of new Canadians in Manitoba

Curriculum Link

- Link the resources to health curriculum
- Streamline web-based resources re. grade levels

Other

- Too much information on the website (too many resources)
- Too much to access the funding & confusion about funding sources
- Significant confusion in the structure of the grants (i.e. division applications vs school applications)
- A lot of paperwork = mere pennies
- Grants need to be of enough \$ to make the admin/application worthwhile
- Tinkering is not solid practice
- Disjointing agendas from levels of government

Targeted Provincial Campaigns

Successes/Strengths

- Availability of funding for community based activities
- Provides school and/or division choices and flexibility on use of \$
- Funding encourages participation
- Funding promotes incentive
- Intent of infrastructure (gov/health/ed) is valuable to promote dialogue
- Provides resources otherwise not available
- Actively engaging students move towards active healthy lifestyles
- Helmets
- TPCs raised awareness and resulted in action
- Campaigns raised awareness
- Increased awareness of health living activities & outcomes
- Awareness increased health living
- Greater awareness of health nutrition
- Nutrition in schools has improved
- Having schools create nutrition policies

- Excellent farm safety days – Interlake
- Bike helmets – access and safety awareness
- Government support - \$, policy

Challenges/Concerns

Participation

- Lack of advance notice for initiatives
- Increase the number of participating schools
- Outcome evaluation?
- Increase response rate in surveys

Sustainability

- \$
- Energy and time required
- Episodic vs sustained funding
- Sustainability of initiatives that have been implemented by school divisions (i.e. Friends program, Safe Teen, Breakfast programs)

Other

- Implementation of mandated PE time k-12
- Dedicated liaison HE/PE person in each division
- Wellness issues need to be integrated into the whole school environment – not only HE/PE
- Need broad mental health strategy (part. suicide prevention for at risk groups)

Other

Successes/Strengths

Promotion/Awareness

- Message is getting out, awareness is increasing
- Promoting healthy living to a wider audience
- Makes people think about healthy living
- Kids are becoming more engaged
- Positive school culture

Feedback

- Consultation with Manitobans
- Open dialogue happening
- Forum sessions

Partnership

- Increased inter-agency collaboration & partnership

- Partnerships – health, education, others

Policies/Guidelines

- Mandated policies give direction
- Flexibility of guidelines is positive

Other

- The fact there is some funding is good
- Collection of baseline data
- In motion promotion

Challenges/Concerns

Grade 11/12 PE/HE

- Implementation of initiatives re resources, time allocation, professional support (e.g. grade 11 & 12 PE/HE)
- What is the plan for 11/12 curriculum
- High-school involvement
- Absence of focus on Health Education in Grade 11 & 12

Sustainability

- Keep the momentum going with Healthy Schools
- Will the funding continue? – Sustainability for the initiative
- Increase in workload on school staff

Coordination/Structure

- Fragmentation – clearer model of delivery required
- Need Simplification – combine committees – too many names
- Lack of mainstreaming all the “pieces” of the initiatives
- Facilitating partnership between agencies (gov, non-gov, health, sharing resources)

Perceptions

- Different perceptions of “Healthy School”
- “Health” needs to learn to speak “Education” language – educational outcomes for children, not chronic disease prevention

Other

- Evaluation feedback to schools

Appendix IV

Opportunities to Strengthen Healthy Schools

Community-based Activities

Provincial Resources

Targeted Provincial Campaigns

Other

Community Coordinator

- Use a facilitator to focus on activities and bring people (i.e. city, professionals, parents, schools, RHAs, HCM P-CC) together. HS their only responsibility in their community
- Infrastructure, coordinators – Divisional HS Coordinator – outcomes
- Networking - Concept of community connector
- Promote and fund the idea of having a full time (part time) coordinator for each school division
 - This person would be liaison between other professionals (e.g. RHA) and schools/teachers.
 - Each school would have a local HS rep/contact person
 - Coordinator needs to access a wide variety of community groups/services and build partnerships
- Need for consultant staff at school division to keep HS in focus (i.e. designated HS coordinator)
- Establish a dedicated HS liaison to assist the school champion
- Recognition of local champions/initiatives which support HKHF

Sustainability

- School grant money format needs to be extended to the community for sustainability
- Sustainable funding - Projects – value of grants must be worth the effort – longer than one year
- Build in ongoing administrative costs into funding model (not just seed) to ensure sustainability of comprehensive school health (instruction/ environment/supports & services)
- Where is the sustainability?
- Long term planning
- Create an initiative that will include parents with the intent of creating sustainability
- Continuity of themes to build momentum and sustainability
- Pooling regional \$ (health & education) to promote HS (i.e. coordination of projects)
- Development of student leadership
- Financial support is essential – need long term funding to do long range planning to ensure sustainability
- Involve students in the decision-making (i.e. HS kids committees)

Promotion/Awareness

- Increasing awareness to the greater community
 - Link HS messages to workplaces (e.g. in motion)
 - Focus the message – cradle to grave
 - Multi-systems approach – bridging to community centres, etc.
- Social marketing – advertising dollars
- Comprehensive communication strategy that reaches front line → education, health, social
- HS Toolbox
- Improved access to internet resources
- Message to create common vision and perception of HS (celebrate successes, share what is working?)
- Continue dialogue between stakeholders
- Increase awareness within school communities of how physical, mental, emotional health impacts academic learning & chronic disease prevention in tangible way

Target Populations

- Help parents develop habits so they will teach children. Respect values. Include in planning
- Cultural and diversity of appropriateness of resources
 - Multiple approaches to information access – website, hard copies, presentation, different languages
- Provide links on website that are culturally language specific (i.e. aboriginal, French, etc.)

Coordination/Collaboration

- Promote initiatives across agencies – share info, have reps develop & attend steering committee in their own community (Vision and action plans)
- Tie in other initiatives (i.e. Safe Schools Act) to HS planning. Tie in training initiatives (i.e. ASIST to HS planning)
- Form inter-sectoral linkages with school, health, community partners
- Human and financial resources for building partnerships
- Broad timelines to promote partnerships
- Funding – ongoing – depending on partnering – access to front line
- Simplify – combine committees with common vision (i.e. parent council & HS & CDPI; in motion & parent council & school division, etc.) and plan from a strategic direction and common vision
- Ensure a coordinated approach to HKHF
- Integrate initiatives to all levels – daycare/schools/communities

Evaluation

- Action research and data management
- Develop indicators of success
- Evidence –based evaluation
- Evaluate the funding model to increase school participation
- Build measurable outcomes into plan (increase our ability to measure)

Curriculum

- Link to PE/HE curriculum
- Train the trainers – curriculum development
- Tie HS into learning outcomes
- Integration of mental health and wellness throughout the entire curriculum
- Broaden expertise in schools – mental health (suicide, depression)
- Put \$ where mouth is (i.e. Grade 11/12 PE/HE)
- Use creative approach of implementing credits (gr 11/12) (e.g. credit given for extracurricular physical activities that have life long focus – tennis, scuba diving, cricket, karate, tae-kondo, golf, curling). Build capacity in the communities to maintain & improve their community program base. This approach could include credits for leadership/mentorship/ referees/clinics where high school students could be a resource to help implement planned initiatives of HS. Build internal capacity to maintain active lifestyle throughout their lives.
- Learning how to link/integrate various special interest curriculum provided to schools to supplement provincial curriculum

Other

- Connect school nutrition policy to community vision. Use mandate to encourage participation
- Develop infrastructure to support HS (i.e. playgrounds, walking trails, \$ to hire resources, allow schools to access community centre funding (walking tracks at hockey rinks)
- Objective – is this a public relations activity?
- What/Who is running the agenda? Health/Education – Social Services
- \$100 – modest or cheap