



Introductory Document

Schools that respect and value their students and staff are more likely to have students and staff that respect and value themselves...

Students and staff that respect and value themselves are more likely to feel better about themselves, to participate actively, to support the goals of the school and be more successful ...

- **Introduction**
- **Understanding The Process**
- **Program Tools**
- **Five Paths To School and Student Health and Well-Being**
- **School Success Story**
- **Guiding Principles For Fostering Safe, Healthy, Caring Schools**
- **Steps to a Healthier School**
- **A Helpful Guide**
- **Next Steps**

INTRODUCTION

What is *Voices and Choices*?

Voices and Choices is a practical, do-it-yourself, strategic planning process that is available to secondary schools in Canada from grade 9 (Secondary 3 in Quebec) to graduation (CEGEP 2 in Quebec). It is designed for schools interested in creating a safer, more supportive, health promoting school environment. The materials necessary are all available on-line, and include a *Guide To Implementation*, a *Student Needs Assessment Questionnaire*, and a custom *School Health Profile*. These documents are designed for schools interested in learning about the health-related needs and preferences of their students as well as what can be done in the school community. The outcomes of the assessment will show where help is needed - enabling schools to plan for a healthy, safe, and effective learning environment for all students.

How Can I Get Started?

One of the greatest features of *Voices and Choices* is that it is easy to implement. All of the materials that your school will need are available on this web site. This includes a database that allows you to generate a detailed *School Health Profile*. Participating in a program has never been so easy, inexpensive and efficient.

How Do I Know This Will Work?

This process has undergone three separate rounds of pilot testing. Schools were selected to be representative of large and small student populations in both urban and rural settings. After each pilot project, the program was fine-tuned to ensure that it would continue to meet the needs and outcomes of all participating schools.

“[The program] made us more aware of what students were feeling, of things the school was not emphasizing for them. The change for us is that now, when we make a decision, we ask ‘Is it good for students?’ If it is, we do it.” (Comment from a pilot school)

How Does This Link With Comprehensive School Health?

Voices and Choices: Planning for School Health is one way of implementing the Comprehensive School Health Model at the school level.

***Voices and Choices* will help your school to:**

Improve

- Student learning and achievement
- Student physical, emotional and social health well-being
- Student life skills (communication, decision-making, critical thinking, media analysis, problem-solving)
- Support and involvement from students, staff and parents
- School climate
- School health policies

Reduce

- Discipline problems, negativity and violence
- Absenteeism
- Alienation and drop out rates

UNDERSTANDING THE PROCESS

What Are Students Saying?

Students talk. They tell us things all the time, in many ways. The question is - how do we listen so that we can hear them and respond through appropriate programming? We do our best, but here is the reality check: in busy school environments, there is rarely a spare moment to address any kind of short and long term planning. “A safer and healthier place to be” sounds nice, but how can we ensure that the voices are heard? How do we make the necessary time? Is it worth the investment?

Voices and Choices will help schools to respond to this situation. It requires minimal costs, an investment of time and energy, and a genuine desire to make schools safer and healthier for all members within the school community.

Voices and Choices: Planning for School Health involves:

- Accessing and using this web site;
- Forming a school health committee;
- Using the *Student Needs Assessment Questionnaire* to find out how students are doing;
- Entering the responses using the software provided on-line;
- Interpreting the *School Health Profile* report generated by the on-line database;
- Developing a strategic school health plan;
- Developing program action plans that include short, medium and long term policy and program changes that will meet the students’ expressed needs as well as the school’s identified needs;
- Reviewing the process and programs regularly; and celebrating the successes.

PROGRAM TOOLS

Everything you need is available on this web site! This includes:

- This introductory document - *Voices and Choices: Planning for School Health*
- A *Letter of Agreement* between your school, Health Canada and other partners and a *School Demographics Questionnaire* providing information about your school community. The signed letter and completed questionnaire will enable you to download the data entry software.
- A *Guide To Implementation* to help you through the process.
- The *Student Needs Assessment Questionnaire* - A downloadable questionnaire that assesses student needs and preferences.
- A database where questionnaire responses are entered to create the *School Health Profile*.

Financial investment + Personal investment = A healthier school climate
(photocopying) (time and energy)

FIVE PATHS TO SCHOOL AND STUDENT HEALTH AND WELL-BEING

There are five key factors/paths that influence school and student health and well-being. Although each path is important in and of itself, each path also interrelates with each of the others. For example, student psycho-social and physical environments affect their personal health practices which in turn affect their ability to look after themselves, learn effectively and contribute to the school community. When developing a comprehensive school health program, it is important to consider all of these five paths.

Comprehensive School Health (CSH) is defined as *a broad spectrum of programs, policies, activities and services that take place in schools and their surrounding communities. The approach is designed to affect not only individual health behaviours, but also to improve the environments where*

1. Psycho-social Environment (School Climate)

The **psycho-social environment** refers to the safety and supportiveness of the psychological and social environment that students perceive in their particular setting. This includes both formal and informal relations with teachers, the administration, peers, and family. The quality of these conditions is largely a result of decisions and choices made by individuals at various levels, such as school administration, teachers and school staff, and municipalities.

At the school level, there is often a certain amount of decision-making flexibility that can influence the health of students (and the health of teachers and staff). This “felt” or “experienced” environment, known as the “school climate”, can either contribute to or take away from a student’s health – it is never neutral. The school climate is affected and supported by policies and how these policies are carried out on a daily basis.

A healthy, safe, supportive school climate:

- Is free from discrimination;
- Enhances self-esteem;
- Fosters cooperative, caring, respectful behaviour;
- Respects individual differences and cultural traditions;
- Fosters relationships and communication among administrators, staff, students and parents.

Example: Many schools are concerned about violence and bullying in school. Some schools have started social skills and communication programs or peer-mediation and peer-mentoring

programs to help deal with bullying on school grounds and in the halls. Other schools have launched programs to help develop respect for other cultures and races to reduce racism.

2. Physical Environment

Physical environment refers to the health and safety of the school's physical environment, such as air, noise and lighting conditions, and the quality of work- and play- space. These issues are particularly important in schools that offer fine art or technical programs, or for inner city schools with very little green space.

Example: Some pilot schools have started schoolyard greening programs to improve the natural physical environment. Other schools have had their portables checked for molds that may cause allergic reactions.

3. Personal Resources

Personal Resources refers to a student's perception of:

- Their capacity to cope with change and stress;
- Their sense of coherence or meaning in life;
- How much influence and control they feel they have over their lives, health and work;
- How many people they feel they can count on in times of trouble; and
- Their ability to make free and wise decisions and choices.

A student's personal resources are made up of the sense of self-efficacy that they develop when they learn and practice social and coping skills, as well as their sense of the social support available to them through their psycho-social environment.

Since students are working to accomplish the developmental tasks of adolescence, the opportunity to learn and practice social and coping skills in a safe and supportive environment is very important for the optimal development of their personal resources.

Example: Many schools have developed programs, either as an integral part of the curricula or as part of student orientation, to help new students adjust to the school and feel that they belong and are accepted. For example, hosting introduction barbeques, twinning second-year and first-year students, or ensuring that peer-helpers are available to all students.

4. Personal Health Practices

Personal Health Practices refers to those aspects of a student's personal behaviour that affect health, including physical activity habits, smoking, drinking, eating habits, sleep, use of medications and other drugs, and so on. Students must develop knowledge, values, attitudes, beliefs and skills that will help them to make good choices regarding their health behaviours and

practices. This is acquired in many ways, including formal curriculum and instruction in class, and through informal learning opportunities outside of class. School policies that support positive health promoting practices are an important element of a health promoting school.

Example: School policies related to the type of food available in the cafeteria and through dispensing machines is an example of school policies that support healthy eating choices. The availability of the school gym and the encouragement and support students receive to participate in daily physical activity is another example.

5. Support Services

Support Services refers to the kinds of assistance for students and their families that can be provided through the school or in collaboration with other community service providers. These services include counseling for personal, emotional, or learning difficulties; provision of special support facilities or programs; extracurricular education on anger management, conflict resolution, and time management; provision of daycare facilities, and so on. Support services can cover the spectrum of health, psychological and social services that students may need to access in order to maximize their educational experience.

Example: Some pilot schools indicated that they used community resources **in addition to** their own resources to help fill these support needs. For example, the Cancer Society provides smoking cessation programs and ALANON and ALATEEN groups were started at school. One school rearranged access to guidance services and the school psychologist offices. Another school provided social services with an office in the school to serve students and their families. Others started school day care centres to serve students and staff, and to provide cooperative education placement opportunities.

SCHOOL SUCCESS STORY – Interconnecting the Five Paths to School and Student Health and Well-Being

One of the pilot schools realized that 45% of the student population smoked, and decided that they really needed to take action. They invited the local Cancer Society to offer smoking cessation programs. They also changed their smoking policies and the location of the smoking area. Although the smoking rate decreased in the short term, over time many students started smoking again.

The School Health Committee realized that part of the problem was due to the students arriving by bus approximately an hour before school started. They spent that time ‘hanging out’ in the smoking area. The School Health Committee suggested running extra-curricular programs and intramurals before school and making the library, gym and cafeteria available. This plan reduced the need to book late afternoon buses to take students home after school (since many after school programs ran in the morning instead). Along with these activities, the Cancer Society continued to offer the cessation programs and the smoking rate declined and stayed down. This example

shows that the change in personal health behaviours was influenced by changes in the physical and social environment, school policies, and the support services available to the students.

GUIDING PRINCIPLES FOR FOSTERING SAFE, HEALTHY, CARING SCHOOLS

These guiding principles serve as the foundation for fostering a healthy school environment and promoting student health. Sharing these principles with members of your school community may help to bring others on board in support of your school's planning process.

1. Health is a **prerequisite** for learning.
2. A safe, health-promoting school is based on **democratic principles**.
3. A safe, health-promoting school fosters young people's ability to take action and generate change in a **socially responsible** manner.
4. Students are in their formative years and are **developing and changing** during their time in school.
5. A safe, health-promoting school meets the **needs of all its students** regardless of their current level of health or the group they belong to.
6. Safe, health-promoting schools recognize that an individual's health and well-being is influenced by an **interdependent set of factors or determinants**, including personal health practices and coping skills.
7. Safe, health-promoting schools **adapt to the special features** of their environments.
8. Safe, health-promoting schools support the development of a strong overall **school health policy**.

STAGES TO A HEALTHIER SCHOOL – HOW DO WE GET THERE FROM HERE?

Stage 1	Building Commitment
Stage 2	Establishing the School Health Committee
Stage 3	Conducting the Needs Assessment
Stage 4	Interpreting the School Health Profile
Stage 5	Creating the School Health Plan
Stage 6	Developing the Program Action Plans
Stage 7	Reviewing, Evaluating and Celebrating

Stage 1 – Building Commitment

This program is important to everyone. Gather commitment and support from a wide audience that includes students (of course!), administration, faculty, non-teaching staff, parents, governing councils, and the community. Time and resources need to be allocated to make this work, and a spirit of flexibility and working together to improve “OUR” school community needs to prevail.

Do you have a vision of what a safe, health promoting school would be like? Do others share your vision? How can this vision be achieved?

Example: Most of the pilot schools gained a commitment from the school superintendent and trustee, as well as from the Parent-School Council, principal, Guidance Department, department heads and Student Council. In some schools, the principal was the person to introduce the idea, while in others it was a parent, public health nurse, teacher or Student Council.

Stage 2 - Establishing the School Health Committee

In order to be successful, each school will need a committee that is comprised of more than one or two people. Participation should come from all parts of the school community, including administration, teaching and other staff, students and parents. Remember that students are critical to this process. Try to engage students of varying ages and from diverse backgrounds. The support from the school administration is also important. Securing time and energy in this area will definitely help the Committee to succeed.

Once the Committee has been formed, ensure that it meets regularly. As the momentum for the *Voices and Choices* grows, the Committee may need to meet more often. When you do meet, be sure to listen to and consider the voices and opinions from all members of the Committee.

Example: The pilot schools that experienced the most success in developing the School Health Plan (Stage 5) were those that had more students than adults on the School Health Committee. These students came from diverse backgrounds. The teachers on the Committee facilitated the process, and the students took the lead role. In many schools, the Public Health Nurse was an invaluable team member. One of the most successful schools had the full support of the school principal as a key member of the Committee.

Stage 3 – Conducting the Needs Assessment

Part A – Preparing For The Needs Assessment

An essential part of *Voices and Choices* is comprised of assessing student needs and preferences utilizing a Student Needs Assessment Questionnaire. This Questionnaire provides students with an opportunity to voice their needs and preferences in an objective and confidential manner. The method your school chooses for administering the Questionnaire will help determine the eventual impact - the development and implementation of Program Action Plans (Stage 6).

Example: Some pilot schools chose to designate one subject or class as the data collection time where every student, during the course of the week, would complete the Needs Assessment Questionnaire in that class. Other schools chose a specific day and arranged an assembly timetable, having every class complete the Questionnaire during this same time. Much will depend on how your school is structured and what is practical for you. This will also vary depending on whether or not the Questionnaire is being completed on the computer or on paper.

Part B - Promoting The Needs Assessment

Your students' answers can be entered into the database available on this web site. It is suggested that a team leader be chosen to manage a group dedicated to do this process, likely an active member of your Committee. While this can be a time-consuming step, it will ultimately lead to a very accurate, thorough profile of your student population! It is important to remind all members involved in this stage to **maintain complete confidentiality throughout the process.**

You will find it helpful to know that many of the questions come from the World Health Organization Cross-National Study: Health Behaviours in School-Aged Children, and have been administered to thousands of children world-wide over the past 12 years.

Part C - Administering the Needs Assessment Questionnaire

Entering the data from the completed questionnaires is the next important activity. In addition to

providing for the administration of the questionnaire (for example, in ensuring the confidentiality of the process), it is also important to consider strategies for doing the data entry.

Once the data is entered, the database will generate a confidential school-specific [School Health Profile](#) (Stage 4). The [Profile](#) will help your Committee create a vision for a healthier school ([Creating a School Health Plan](#) - Stage 5) and from there, develop short, medium and long-term plans ([Developing the Program Action Plans](#) - Stage 6).

Example: This process could be completed by a group of parents from the School Council or a group of students involved in the School Health Committee. This step must be completed carefully and verified to ensure the data and the School Health Profile are accurate.

Stage 4 – Interpreting The School Health Profile

The School Health Profile contains valuable information on students’ needs and preferences. This extensive document contains a large volume of data. The Guide to Implementation (available on-line) provides direction and suggestions on how to interpret the information. For example, you may wish to break into smaller study groups during this process to examine the School Health Profile from different paths leading to school and student health and well-being. The sub-committees would report back to the larger Committee. Once the data is understood by the Committee, the information can be shared with students, parents, administration, faculty and staff. It will be the foundation to developing your vision of a healthy school – the [School Health Plan](#) (Stage 5).

Example: Many of the pilot schools sensed that they had problems, and had an idea of where the problems were. However, the School Health Profile allowed them to look deeper at the severity of the problem and understand the differences among various grades and between male and female students. Many schools were surprised at how many students felt that they were not treated with respect or felt that they had no one to count on at school or at home.

Stage 5 - Creating the School Health Plan

The School Health Plan is your Committee’s vision of a healthy school. While many schools will be tempted to develop immediate programs to tackle different issues, it is strongly recommended that the School Health Committee first **take the time to develop a vision** that considers the School Health Profile as well as plans for the short (1 year), medium (2-3 years) and long (5 years) term. Keep in mind that the strategies and plans must involve several or all of the paths to school and student health and well-being.

The School Health Committee may wish to use the same sub-committees that were used to analyze the School Health Profile. Since the school population and therefore the Committee will change each year, the results should be re-verified using focus groups or some other subjective consultative process annually.

Stage 6 – Developing the Program Action Plans

This is your chance - be creative! Now that the School Health Plan has been approved, go ahead and jump in! Your Committee can now plan specific activities and programs that will meet the needs of your students. Consider the short, medium and long-term plans when developing specific activities.

Example: One of the pilot schools noticed a very high stress level among its students with a strong feeling of social isolation and having no one to count on at school. These students also felt stressed by time-management issues. In the short term, the school offered students time-management and stress-management programs. In the medium term, they ordered individual student planners and spent time teaching them how they could be used. In the long term (the next year), they re-organized the timetable in the school so that the students had a homeroom and were taught by their homeroom teacher. They also set up a system where second year students were paired with first year students from their own feeder school, planning a number of social activities to introduce those students to the school.

Stage 7 - Reviewing, Evaluating and Celebrating

As you progress through implementing the activities and strategies, take some time to determine how you are doing. Did you achieve what you wanted? Are you closer to your vision of a safe, caring, and health promoting school? Do your plans and programs follow the guiding principles to promoting safe, caring, healthy schools? How is each program working? These are just some of the questions you should ask. This step, although critical, is often overlooked.

It is recommended that the School Health Plan be reviewed twice each year - at the start and end of the school year. By reviewing the programs regularly, you will determine whether they are still relevant or have achieved what was intended. For example, you may no longer require a smoking section if you have succeeded at reducing the number of smokers at your school!

Be sure to inform the school community, including students, staff, parents and administration, about the school health activities and strategies, what has been done and what has been achieved. Remember, you require their participation in order to gain results.

Example: Assemblies, announcements, posters and newsletters are effective ways to let people know what is happening. The local newspaper may be interested in an article on the changes at school. The School Health Committee may wish to set up an award system for teachers and students. Many of the pilot schools found that once they had received the School Health Profile they could prepare and give presentations to the school officials and community groups to share the needs that were expressed by the students and request their help.

Each program should have its own evaluation plan that looks at participant satisfaction as well as

the impact of the program. In addition, the Committee should keep track of basic school data such as absences, disciplinary actions, incidents of violence, and school climate changes.

A HELPFUL GUIDE

You have just read through a condensed version of the steps involved in *Voices and Choices: Planning for School Health*. There are many documents you can access to assist you in implementing this planning process in your school, in particular, the comprehensive Guide to Implementation. The Guide to Implementation explains the history and core of the *Voices and Choices* planning process, and also provides: detailed strategies and suggestions for implementation; insights resulting from previous piloting experiences; sample letters, tables and forms; as well as useful hints and guidance throughout. It will increase your understanding of the strategic process and will quickly become an invaluable tool.

Taking The Time That It Takes

Remember, you can't do all of this overnight! Although taking the time that is required may be frustrating, the benefits will be worth it. This process is about being inclusive, building relationships, and empowering socially responsible people in a democratic manner.

NEXT STEPS

You've finished reading this overview of the *Voices and Choices* process. What's next?

- 1 - Decide to go forward;
- 2 - Start building commitment with key partners;
- 3 - Download and print the *Student Needs Assessment Questionnaire* and *Guide to Implementation*;
- 4 - Start establishing your School Health Committee;
- 5 - Complete the *Letter of Agreement* and *School Demographics Questionnaire* and contact the Canadian Association for Health, Physical Education, Recreation and Dance (CAHPERD) to obtain your login and password; and
- 6 - Access the database and go!

Voices and Choices is an inexpensive, easy-to-follow planning process that will encourage your students to voice their needs and preferences and allow your school to develop relevant strategies to address them. You can help your students and your colleagues by making your school a safe, healthy and enjoyable place to be.

*“This [process] really helped us
to come to grips with the needs of young people –
with the things that are causing them stress.”
(Comment from a pilot school)*