SHE online school manual

5 steps to a health promoting school

Colophon

Title

SHE online school manual: 5 steps to a health promoting school

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Acknowledgements

The content of the *SHE online school manual* is based on the manuals *HEPS Tool for Schools: A Guide for School Policy Development on Healthy Eating and Physical Activity* and the Dutch online *Manual healthy high school* (*Handleiding Gezonde School Middelbaar Beroepsonderwijs*). The introductory sections on *why is it important in school and what works?* and *the 6 components of the whole-school approach* are based on the document *Promoting health in schools: From evidence to action*.

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Contents

1. Introduction

1.1. What is the purpose and target group?

What is the purpose of the manual?

1. To provide you with an introduction to health promoting schools;

2. To support you in becoming a health promoting school or in improving an existing health promoting school.

Who is it for?

The *SHE online school manual* is intended for school management, teachers and other school staff who are involved in the development of health promoting schools in the primary and secondary school setting. You can use it with the assistance of local/regional health or education officers if they are available.

While the focus is on local primary and secondary schools, the information may also be helpful to those involved in national health promoting school policy development and for use in other academic settings.

1.2. How is it structured?

The manual is a step-by-step guide on how to become a health promoting school, presented in five, consecutive phases. As you can see from the following diagram (Diagram 1) the phases represent an on-going and cyclical process. In the *manual*, there is a section for each phase. For each phase, key concepts and actions are described to help you complete the necessary actions in that phase. Most of the actions you will take to become/update a health promoting school fit into one of the five phases. Communication and evaluation are two components of this process that you should think about and plan for in all phases.

Diagram 1. Key phases for a whole-school approach to becoming and remaining a health promoting school
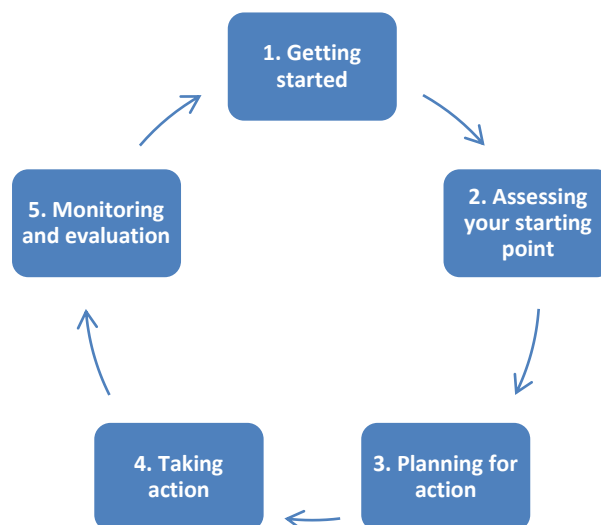
The *manual* includes two companion resources that are designed to help you complete specific phases:

- **SHE rapid assessment tool**: can be used in phase 2 in order to help you assess your school's starting point regarding your policies and practices and start to determine what you want to focus on in your health promoting school. The rapid assessment tool is available online as part of the manual and as a printable document.
- **School action planner**: is meant to be used along with the *manual* in phase 1, 2 and 3 of the process. It is designed to assist you in the process of making your health promoting school action plan.

Note: The manual does not include suggested health topics to address in your health promoting school. Choosing your health topics is part of the process. The content of your health promoting school should be your decision as a school, which you will make during phase 2.

1.3. How can it be used?
The *manual* can be used in different ways depending on your school community's needs and priorities. It is meant to support you in the process of becoming a health promoting school. Most schools may already have done a lot of work on health promotion, such as teaching health topics as part of the curriculum or making projects to promote social/emotional health. The five phases to become and remain a health promoting school can be used systematically to make a more comprehensive action plan and to put your plan into practice.

For schools that are already health promoting, the phases can be used to assess and update the current health promoting school plan and activities to make further improvements.

Note: Some of the information or terms may not be relevant for every school or country; we suggest that you adapt the information in this manual to make it appropriate for your setting and situation.

1.4. What is health?
There is no single definition of health. However, health can be described as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity".[1]

Lifestyle and living conditions are two important factors in health as a broad concept.[2]

- Lifestyle includes health behaviours and habits such as diet, exercise, substance use and sexual behaviour. Individuals often have an influence over their own lifestyle choices.

- Living conditions refers to the settings where people live and work as well as how the surrounding environment and society impact an individual's life. Living conditions can be difficult but not impossible to change, and this is important to try to improve.

- Lifestyle and living conditions are interconnected. For example, living in a safe neighbourhood, where there are places for children to play outside increases the likelihood that the children will get enough physical activity.

Health is achieved through the interaction between people and their environment. Therefore, promoting health includes both individual behaviour and quality of their social relationships, environment and living conditions. Health promoting schools reflect how these individual and environmental factors are influencing health and well-being.

1.5. What is health promotion in school?

Health promotion in schools can be described as "any activity undertaken to improve and/or protect the health of everyone in the school community".[3]

Health promotion in schools includes health education, what you teach in the classroom. But it also includes efforts to create a healthy school environment, school policies and curriculum.

A health promoting school is a whole-school approach. It is more than a school that has health promoting school activities. A health promoting school addresses health and well-being in a systematic and integrated way and has a written school plan or policy. It is action-oriented and participatory; the whole school community, including students, teaching/non-teaching staff and parents, takes an active role in the decision making and activities. It also focuses on capacity building which relates to developing the knowledge, skills and commitment of all school community members to promote health and well-being.

1.6. Why is it important in school?

Health and education are interconnected:[3]

- Healthy children have a greater learning capacity and better school attendance

- Children who attend school are more likely to be healthy

- Students who have a positive connection with their school and significant adults are less likely to participate in risky behaviours and are more likely to have positive learning outcomes

- Educational attainment is positively linked to long-term economic prosperity and health outcomes

- Promoting the health and well-being of school staff can lead to reduced staff absenteeism and higher work satisfaction

- By actively promoting the health of school staff as well as students, the school staff will have the potential to be positive role models

Therefore, promoting health in your school can support you in reaching your school's educational, social and staffing objectives as well as impact the health of the whole school community.

For additional information on why health promotion is important in school, see SHE factsheet 2; the factsheet is available on the SHE network website.

1.7. What works?

Several factors have been found to contribute to effective health promoting schools. These factors include:[3]

- Developing and sustaining democracy and participation within the school community

- Ensuring school community members, including students, staff and parents, have a sense of ownership in the life of the school

- Following the whole-school approach to health promotion in place of the traditional classroom-only or single intervention only approach

- Creating a social environment that supports open and honest relationships within the school community

- Creating a climate in which there are high expectations of students' social relations and academic achievement

- Using diverse learning and teaching strategies, to account for different learning styles including providing the same information through different channels (e.g., curriculum, policy/rules, activities outside the classroom)

- Exploring health issues in the context of students' lives and community

- Keeping in mind that health promoting school outcomes occur in the medium to long-term (3-4 years after becoming a health promoting school) and that effective implementation is a key to success

1.8. Whole-school approach

The *manual* makes use of the whole-school approach to health promotion. The approach focuses on achieving both health and educational outcomes through a systematic, participatory and action-oriented approach. It is grounded in the evidence of what has been shown to work in school health promotion research and practice. For more information on what works, refer to this section (1.7) in the manual.

The whole-school approach to health promotion can be divided into six components:

- healthy school policies
- school physical environment
- school social environment
- individual health skills and action competencies
- community links
- health services

For more information on the six components, see Appendix 1, 1.1. 6 components of the whole-school approach.

By addressing health and well-being simultaneously through the six components, they reinforce each other and will make your efforts to promote health more effective.

For example, healthy eating behaviour can be promoted through school policies that regulate which foods can be served and made available at school. The school canteen can be designed to be a positive social and physical environment where students and staff come to eat and socialize. By creating a positive environment, students and staff will be less likely to go off campus for lunch where they are more likely to choose less health food options. Further, nutrition, food appreciation and knowledge of healthy food choices can be taught in the classroom as a group and individually by the school nurse or other health staff. Involving parents and local restaurants and other businesses can further strengthen your efforts in the school setting.

Relevant appendices:

- Appendix 1. Additional information: Introduction
  - 1.1. 6 components of the whole-school approach

2. Phase 1: Getting started

2.1 Making the commitment

Your decision to become a health promoting school can arise from different situations and can be initiated by different actors either in or outside your school community. For example:

- National or regional health authorities in your country have made it their goal to assist schools in becoming health promoting schools and approach you to gain your support and co-operation in becoming a health promoting school.

- School staff notice a trend in health topics (e.g., mental health, substance use, bullying or overweight) in your school and decide to address these problems through a health promoting school approach.

- Specific schools in your region or country have become a health promoting school. The attention they receive leads your school staff to become aware of the advantages of incorporating health promotion into your school community.

- It is now your government's education policy to implement the heath promoting school approach in schools, requiring you to become a health promoting school.

- Parents of students have raised issues with your school about a particular health topic, e.g., mental health, life skills, the quality of food that is offered. You want to address this problem and build it into a health promoting school approach.

- You want to better organise and improve your existing health promoting school activities.

Your motivation is important for the discussion and the decisions you will make when becoming a health promoting school. Regardless of how the decision had been reached, your health promoting school should include the six components of a whole-school approach outlined in 6 components of the whole-school approach.

2.2. Ensure the support of school leaders

The initial support and sustained commitment of the school leaders, school management and head teachers, is essential to becoming and remaining a health promoting school. While health and education officers from outside the school are important in the process, school leaders should take a leading role and responsibility for the health promoting school in partnership with the other school community members.

If the decision to become a health promoting school is coming from outside the school, the school leadership may have to be convinced of the benefits of becoming a health promoting school and express their long-term commitment.

The continued and active support of school leadership is important because a health promoting school is a long-term, evolving process, to be planned, carried out, evaluated and improved. *

- It may take you a whole year to establish support and to make your health promoting school action plan.
- Once you have a good plan, carrying out the actions in a complete and systematic way is key to the success of the health promoting school.
- Most goals will be achieved between 3-4 years after becoming a health promoting school.

*Refer to Diagram 1 (section *1.2.)* in this *manual* for a visual image of this process.

To effectively communicate the benefits of becoming a health promoting school to your school leaders and get their support, it is very helpful to develop a communication plan. For more information on developing a communication plan, see phase 3, section *4.4.*

Planning for communication in the manual. Also see the corresponding section in the *School action planner*.

Relevant appendices:

- Appendix 2. Additional information: Phase 1
  - o 2.1. Questions: Communicating the advantages to school leaders

2.3. Gain school community support

Gaining the support and consensus of your school community is crucial to the effectiveness of your health promoting school. Members of the school community need to share a similar vision of what a health promoting school is and what they want to achieve. It helps when there is a sense of ownership and feeling of being involved in the decision making among the whole school community.

Head teachers can play an important role in motivating other school community members, e.g., other teachers and school staff.

Suggestions for building consensus within your school community:[2]

1. Organise a meeting (e.g., for staff, parents or students) or a school assembly. At the meetings, the head teacher and health representative can involve your school community in a dialogue about becoming a health promoting school. This should be an open discussion in which participants can share their opinions and concerns. At the same time, it is also your opportunity to present the advantages to becoming a health promoting school. When preparing for the meeting/assembly, you may want to refer to section *4.4. Planning for communication* in the *manual* and section *4.3.* in the *School action planner*.

2. Visit another health promoting school. Taking your colleagues, students and their parents to see a health promoting school can help them see the advantages of the health promoting school approach. Ultimately, it can motivate them to support the decision to become a health promoting school.

2.4. Identify and engage other stakeholders

There will be other individuals or groups outside the school community who are interested and important in the process of becoming a health promoting school. These stakeholders are individuals or groups, such as community leaders and local public health agencies, who could assist in the process of becoming a health promoting school.

Identifying and engaging these stakeholders can lead to stronger support for your health promoting school within the broader community. Further, engaging local health experts and developing a partnership with them can lead you to become a more effective health promoting school. Local health experts can provide advice and support in developing, implementing and evaluating your health promoting school.

Note: Each school has their own stakeholders. Some stakeholders will be common to most schools and other will be specific to the school and the school community's priorities. For example, if the school wants to make the route to school safer for walking or cycling, the local or regional government would be an important stakeholder.

Relevant appendices:

- Appendix 2. Additional information: Phase 1
    - o 2.2. Engaging other stakeholders
    - o 2.3. Example: Gaining politicians' support

2.5. Identify your available resources

Having support for your efforts to become a health promoting school will make your school plan and activities more effective and efficient. At the same time, having sufficient resources to carry out the changes you want to make is equally important.

Before you start planning your health promoting school, you need to take a look at what you already do with regard to school health promotion and what resources you have available to you to further expand and improve your current efforts.

Resources include:

- **Human resources** such as school staff, parents and outside experts who are already involved in activities at your school
- **Financial resources** including funding that can be used in the process of becoming and remaining a health promoting school

In doing this you may find that:

- You can plan and carry out your health promoting school with limited resources, and you have the resources that you need.
- You don't currently have sufficient resources. You need to mobilize human capital and/or find a way to raise money or apply for funding.
- There may be a regional or national scheme that can assist you in obtaining additional human or financial resources.
- Your health promoting school activities will have to be limited based on your current resources.

2.6. Set up a working group

Setting up a health promoting school working group is an important first step in your preparation to become a health promoting school. Your health promoting school working group can consist of representatives from your school community and may also include important stakeholders from outside the school.

Potential members represent your school community, are well respected and competent or particularly interested in the field of school health promotion and are motivated to participate.

Members of the health promoting school working group may include:

- School director or principal
- Head teacher
- Students (past/present)
- Parents
- Teacher who teaches health education
- School nurse/school doctors
- School social worker or psychologist
- Physical education staff
- School governors or boards of management
- Health/education experts outside the school

Once your health promoting school working group is established, it is important to assign a coordinator who will organise the group activities. The coordinator should be someone who can make the time commitment and can competently take on this leadership role. She or he has the support of the whole school community and has the capacity to effect change in the school. She or he may volunteer to be the coordinator or be asked to take on the role.

The document *School action planner* can be helpful in establishing a health promoting school working group.

Note: You may already have a school committee or other group that can serve as your health promoting school working group.

 Relevant appendices:

- Appendix 2. Additional information: Phase 1
    - o 2.4. What does a working group do?
    - o 2.5. Questions to identify potential working group members
    - o 2.6. Tips for setting up a working group
    - o 2.7. Example: A working group: Setting up & carrying out tasks

2.7. Start to plan for communication
Communication is an important part of every phase of becoming a health promoting school. Within the school community, communicating the right messages and using the right channels will help you gain support for the health promoting school. It will help clarify important steps in the process and can help ensure that the school community

has a sense of ownership for the process and results. It is also important to have good communication with stakeholders outside the school community, e.g., to inform them about your health promoting school, gain their support and possibly ask for their assistance.

The messages and channels used will depend on the target group and can differ depending on the phase you are in. For example, the messages you want to communicate to the school community will be different when you are just getting started compared to when you are planning for action.

From the beginning, e.g., when you want to get support from school community members and outside stakeholders, it is helpful to make a communication plan. In this plan you map out your communication goals, messages you want to get across and channels you wan to use for each target group. Doing this will help you be more organized and effective.

In your school there may be staff who can help you in making the communication plan. To get more information and to get started, see section *4.4.Planning for communication* in the manual and 4.3. in the document *School action planner*.

2.8. Start to plan for evaluation

When you are setting up a health promoting school working group, it is recommend that you start planning for evaluation. It may seem early in the process, but a well thought out and meaningful evaluation requires early planning. This will make the whole process go better.

Once you have established a working group, one of the first tasks can be to decide who will do the evaluation. Will your health promoting school working group members coordinate and carry out the evaluation? Do you prefer to bring in an evaluator from outside the school? For example, an outside evaluator may come from a local or regional health agency or a local university in the department of social science, public health or education. For more information on the steps in the evaluation process, see the section *4.5.Planning for evaluation* in the manual.

Once the evaluator or evaluation team have/has been established, it is a good idea to start planning for the evaluation, e.g., what activities will need to be carried out, when, who and what is your budget. The details of the evaluation plan, such as what to evaluate and which methods to use can be determined later when you have assessed your school's situation and have chosen your priorities. Your evaluation plan is a part of your overall action plan.

3. Phase 2: Assessing your starting point

3.1. Assessing your starting point

In this phase of becoming a health promoting school, assessing your school's health status is a central starting point; this includes identifying your school's current health and well-being related policies and practices to determine your school community's priorities and needs. It also includes an assessment of organizational, physical and personal factors and how these factors encourage or hinder the school's health promoting activities.

You may choose to use the *SHE rapid assessment tool* to help you in making this assessment or choose your own strategy. The *SHE rapid assessment tool* consists of a series of questions related to the whole-school approach. Discussing and reaching a consensus on these questions can help you decide what your school's needs and priorities are for your health promoting school. Making this assessment of your school can help you establish a starting point for development, monitoring and evaluation of your health promoting school.

If you decide to use the *SHE rapid assessment tool* it can be used in combination with other assessment methods. For example, it can serve as a starting point for discussion and be followed up with a priority setting workshop; through the priority setting workshop, you can ensure that your health promoting school priorities are priorities of your school community.

Note: You can download a copy of the *SHE rapid assessment tool* on the SHE network website.

Relevant appendices:

- Appendix 3. Additional information: Phase 2
    - 3.1. Questions to help assess your starting point
    - 3.2. Priority setting workshops

3.2. Setting priorities

An effective health promoting school takes a broad approach to promote health and well-being. At the same time, it is important for you to set priorities regarding which health topics to focus on. We recommend that you focus on 2 or 3 health topics, introducing one topic per year, to ensure that your school can effectively carry out and continue them.

The health promoting school working group can play an important role in prioritizing health topics, but their specific role will depend on the school. Your health promoting school working group may decide to choose the health topics. For example, they may using the *SHE rapid assessment tool* and further discussion, choose tentative priorities and then ask other school community members for feedback before finalizing their choices.

Priority setting workshop

Alternatively, your health promoting school working group can play a supervisory role in assisting the school community in setting priorities. This approach can take the form of a priority setting workshop.

In the priority setting workshop, a selection of school community members are separated into groups of school staff, parents and students and guided by workshop leaders to prioritize and choose health topics to be addressed in the health promoting school. The health promoting school working group then uses the results of the workshop(s) to finalize the health topics.

Questionnaire-based feedback

Instead of the priority setting workshop, school community members can complete a written questionnaire in which they indicate to what extent different health topics are important to them. After gathering the results, the two or three most highly scored items are included as health promoting school priority areas.

Note: Once you set priorities you may find that addressing your priorities requires involving outside stakeholder in your health promoting school, e.g., experts on a specific health topic.

Relevant appendices:

- Appendix 3. Additional information: Phase 2
    - 3.1. Questions to help assess your starting point
    - 3.2. Priority setting workshops

4. Phase 3: Planning for action

4.1 Planning for action
Once you have assessed your school's starting point and have identified your school community's needs and priorities you can use this information to make your health promoting school action plan.

In this phase, members of your school community work together to decide the future of your health promoting school, i.e., what they want to focus on, what they want to achieve and how and in what timeframe.

It is recommended to focus on implementing one priority per school year. That is, in the first school year activities related to priority A are implemented. In the second school year the activities related to priority A will continue and new activities related to priority B will be put into action. In school year three activities related to priority A and B will continue and activities related to priority C will be put into action. Continuing the activities related to each priority may include checking regularly whether a certain

activity which was introduced is still in place. By phasing in priorities in this way, the amount of time spent on priorities that were introduced earlier will be less and the activities will be more focused on maintenance/refinement then introducing new things.

Developing an action plan

A next step in turning your health promoting school ideas into actions is to develop a concrete action plan. The action plan helps you to achieve your health promoting school aims and objectives and to evaluate the success of your health promoting school. It includes a list of strategies and activities that will be used to achieve the aims and objectives along with a timeline of when they will be implemented. It might also be useful for you to write down the materials that you will use and who will be responsible for carrying out specific activities.

Note: Your action plan should also include a strategy for preparing the school community to implement the health promoting school plan, for example, providing your school staff with related professional development training.

Before you develop the action plan, it is advisable to link up with regional education or public health experts for guidance in formulating a realistic plan.

You can develop your own action plan using the School action planner.

Relevant appendices:

- Appendix 4. Additional information: Phase 3
  - 4.1. Things to consider when writing your plan

4.2. Aims and objectives

Developing clear and reasonable aims and objectives helps to clarify the health promoting school goals over the next school year and coming 3-5 school years. Aims and objectives also set the stage for evaluation; they are the basis for determining whether the health promoting school was successfully implemented and whether it achieved the intended outcomes.

- Aims are the overall desired improvement in health and well-being and should be based on the chosen priority areas.
- Objectives are aims broken down into measurable activities and outcomes that are expected to achieve the aims.

  Objectives should be SMART, i.e., Specific, Measurable, Achievable, Relevant and have a Timeframe in which they will be reached. SMART objectives help you in making your evaluation plan.

Process and outcome objectives

There are two types of objectives, process and outcome objectives.

Process objectives are activities that will be implemented to achieve the aims, e.g., a specific number of teacher training sessions related to health promotion or the number

of students who participated in the priority setting workshop. Process objectives correspond with the process evaluation.

Outcome objectives are measurable outcomes, more specific versions of the aim that determine whether the aim was achieved. For example, an outcome objective may be a measurable change in student/staff health behaviour or emotional well-being. Outcome objectives correspond with the outcome evaluation.

Note: See Appendix 1, 1.1. 6 components of the whole-school approach when coming up with your aims and objectives. Ideally, you will approach your priorities through several if not all of these channels. This will help ensure that your health promoting school is effective and imbedded structurally in the school which will ensuring that it is sustained.

Be realistic when choosing the timeframe for completing the objectives and the level of change that is expected. Health and/or education experts from outside your school community can help you in this process.

Relevant appendices:

- Appendix 1. Additional information: Introduction
  - 1.1. 6 components of the whole-school approach
- Appendix 4. Additional information: Phase 3
  - 4.2. Example: Addressing school bullying and violence

4.3. Indicators

An indicator can be compared to a road sign; it "shows whether you are on the right road, how far you have travelled and how far you still have to go."[4] In other words, indicators help measure the health promoting school's progress, how far you have come and how far you still have to go to reach the aims and objectives. Indicators reflect the programme/activity development and implementation process or outputs/outcomes; they are used in monitoring and evaluation of the health promoting school.

Indicator should be SMART (Specific, Measurable, Achievable, Relevant and have a Timeframe in which they will be reached).

Note: Sometimes your objectives can serve as indicators, but sometimes you will have to create separate indicators. This will depend on how complex, specific, and measurable your objectives are.

4.4. Planning for communication

Communication plays an important role in all the phases in becoming a health promoting school. For example, good communication is important in:

- Gaining support for your health promoting school from members of the school and the surrounding community and keeping that support

- Expressing who is responsible for which activities, e.g., when carrying out your health promoting school action plan and making sure the activities are completed on time

To communicate effectively in different situation, a communication plan can be very useful.

Steps in the communication plan:[5]

1. Make clear communication goals
2. Make clear and simple messages
3. Decide on good communication channels
4. Describe all the communication activities
5. Make a budget for carrying out the communication activities

Note: The first three steps are described in the *manual*; you can write down key components of your communication plan in the *School action planner*, sections 4.3.*Planning for communication* and *4.5.2.Table: Health promoting school communication plan*.

Make clear communication goals[6]

It is important to have clear communication goals as a basis for your communication activities. Communication goals are what you want to achieve with your communication messages.

- The goals should relate to the knowledge, attitude or behaviour of the target group.
- The goals should be SMART (Specific, Measurable, Achievable, Relevant and have a Timeframe in which they will be reached).

For example, here is a goal for the target group school staff related to knowledge: All of the school staff are aware of the benefits of becoming a health promoting school within the first three months of the planning process.

Examples of possible target groups:

- Students
- School board
- Teaching and non-teaching staff
- Parents
- School health professionals (e.g., school social worker and school nurse)
- Local health agencies
- Local media
- Community leaders

Make clear and simple messages

Once you have made your communication goals, it is important to come up with clear and concise messages for the target groups based on the communication goals.

We recommend spending time to making the right messages. Looking at the research on which messages work can be very helpful. In most situations, it is better to use a positive message. For example, you can say that 'students will be healthier' or 'students will be sick less frequently'.

Here are some tips to creating effective messages:

- Think about whether a positive or a negative message is more appropriate for your target groups and goals
- Think about whether a serious message should be used or whether humour would be more effective
- Make the messages SMART
- Relate the messages to knowledge, attitude or behaviour
- Think about how the messages can support you in becoming a health promoting school

Decide on good communication channels

The right communication channel is as important as the message itself. When choosing a channel of communication, it can be helpful to ask yourself if it assists you in reaching the communication goal. The channel should also be appropriate for your specific target group. If the parents of your students do not use the internet or social media, online and social media channels are not appropriate for spreading communication messages to this group.

Some examples of channels for communication are:

- Brochures, flyers or posters
- School newsletters
- School website
- Informational meetings (e.g., school assembly or meeting with teachers and parents)
- Press release
- Social media (Twitter, Facebook, Hyves)

4.5. Planning for evaluation

The evaluation for your health promoting school should be planned as part of your health promoting school action plan. Once you have chosen your health promoting school priorities, aims and objectives, you have a better idea what you want to evaluate and in what timeframe.

Steps in the evaluation process[5]

There are several steps to planning and carrying out an evaluation; they are as follows:

1. In **phase 1 (of becoming a health promoting school):** Begin planning for the programme evaluation

2. In **phase 1:** Decide who will conduct the evaluation (e.g., members of the health promoting school working group or an external evaluator in a local or regional health agency; evaluator in a university social science, public health or education department).

3. In **phase 2-3:** Develop an evaluation plan including details on the evaluation design, timeframe, necessary resources and assignment of tasks

4. In **phase 3:** Chose an appropriate evaluation method, such as interviews, observations or questionnaires. The appropriateness of the evaluation method will depend on several factors, e.g., how much time and resources you have and what it is that you are measuring. **Note:** The results from the initial assessment of the school's starting point serve as the starting point for the health promoting school evaluation.

5. In **phase 5:** Carry out the evaluation

6. In **phase 5:** Use the evaluation results to make adjustments to the existing health promoting school

In the *School action planner*, you can fill in your own evaluation plan.

Relevant appendices:

- Appendix 4. Additional information: Phase 3
  - 4.4. Questions when planning for evaluation
  - 4.5. Evaluation types: Process, output & outcome

4.6. Writing and revising your plan

Your health promoting school working group is responsible for writing the health promoting school action plan, but we advise you to keep the school community informed of the progress in a way that is simple and clear. It is also good to get feedback from diverse school community members before finalizing your health promoting school action plan. This ensures a sense of ownership for and commitment to the plan and to carrying it out. It might be easier to get feedback in the form of questionnaires adapted for the different respondents (i.e., students, teaching/non-teaching staff and parents).

Note: it will take time to get and apply the feedback. This time should be calculated into the health promoting school action plan.

Once all the feedback on the draft of the plan is collected, your health promoting school working group should discuss the feedback and makes the necessary changes.

Relevant appendices:

- Appendix 4. Additional information: Phase 3
    - 4.6. Questions to discuss when writing and revising your plan

5. Phase 4: Taking action

5.1. Spreading the word about your final plan

Becoming a health promoting school is a collaborative process, shared by the whole school community. Therefore, distributing and celebrating the final health promoting school plan is part of the process. This gives everyone involved a chance to appreciate the fruits of their labour. It is also an opportunity to inform and gain further support from stakeholders outside the school community.

Deciding on how to distribute your final health promoting school plan and to whom is part of your communication plan.

The P*lanning for communication* section of the *School action planner* and the *manual* can help you decide on your communication strategy.

Relevant appendices:

- Appendix 5. Additional information: Phase 4
    - 5.1. Channels for communicating your final plan

5.2. Making your plan part of everyday practices

In order to achieve your health promoting school aims and objectives, you will have to make your plan part of the everyday life of your school community. To turn your plan into practice, you will have to carry out the strategies in your health promoting school action plan. Accordingly, the specific activities related to each objective will have to be organized, delegated and provided with sufficient resources.

At this stage in the process, you may want to get additional support from parents, students and local partners/stakeholders outside the school community.

Tips for taking action:

- It is advisable to set milestones.[2] Milestones allow you to evaluate the action process along the way and make adjustments accordingly.

- Effective co-ordination and communication is vital at this stage of the process. This ensures that challenges are identified and solved, the necessary actions are taken and are completed on time and that successes can be celebrated. For this

reason, it is important that you take the time to share experiences, progress and challenges.

- Sharing good practice examples of the process of becoming a health promoting school with your whole school community can also ensure that everyone has a good understanding of the vision, process and outcome; can stimulate interest in what has been achieved and generate debate leading to refinements in the health promoting school.

Relevant appendices:

- Appendix 5. Additional information: Phase 4
  - o 5.2. Questions to consider when taking action

6. Phase 5: Monitoring and Evaluation

6.1. Monitoring and Evaluation

Monitoring and evaluation provide you with essential information about the health promoting school plan and activities including:

- Progress of on-going activities
- Challenges of and successes in carrying your plan
- Effectiveness of the health promoting school in relation to intended health aims and objectives
- Appropriateness of the health promoting school for the school community over time

The priorities, needs and desired outcomes in a school community can change. Therefore, planning, adapting and carrying out your health promoting school plan is an on-going process. It requires repeated monitoring, evaluation and revision, at least every 3-4 years.

Note: the idea of being evaluated can be seen as a negative experience by school staff and other members of the school community. They may feel like they are being judged. It is important to communicate the benefit of monitoring and evaluation. It is a learning experience, a chance for improvement.

7. References

1. Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19 June - 22 July 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948. The definition has not been amended since 1948

2. Simovska, V., Dadaczynski, K., Viia, N.G., Tjomsland, H.E., Bowker, S., Woynarowska, B., de Ruiter, S., Buijs, G. (2010). HEPS Tool for Schools: A Guide for School Policy Development on Healthy Eating and Physical Activity. Woerden, NIGZ.

3. St Leger, L., Young, I., Blanchard, C., Perry, M. (2010) Promoting Health in Schools: from Evidence to Action. An International Union for Health Promotion and Education (IUHPE) publication http://www.iuhpe.org/index.html

4. Barnekow, V., Buijs, G., Clift, S., Jensen, B. B., Paulus, P., Rivett, D. & Young, I. (2006). Health-promoting schools—definition and role of indicators in "Health Promoting Schools: a resource for developing indicators"(41-60). IPC, WHO regional Office for Europe, Copenhagen

5. RIVM (2013). Handleiding Gezonde School middelbaar beroepsonderwijs. https://www.gezondeschool.nl/communicatiematerialen-en-instrumenten-gezonde-school-1

6. RIVM (2013). Handleiding Gezonde School middelbaar beroepsonderwijs, Communicatieplan. https://www.gezondeschool.nl/communicatiematerialen-en-instrumenten-gezonde-school-1

7. Bruinen, G. (2009). Effective and efficient health promotion in schools; the Rotterdam experience. In G. Buijs, Jociute A., Paulus P. & Simovska V. (Ed.) "Better schools through health: learning from practice. Case studies of practice presented during the third European Conference on 2 Health Promoting Schools, held in Vilnius, Lithuania, 15-17 June 2009"(33-35). ISBN 978-9986- 649-33-5

8. Vezzoni, M., Morelli, C., Calaciura, A., Mariani, C., Acerbi, L. Tassi, R., Penati, M., Bonaccolto, M., Fantini, Luigi, Sequi, C. & Germani, T. (2009). "My dear Pinocchio": The Italian way to the health promoting school. In G. Buijs, Jociute A., Paulus P. & Simovska V. (Ed.) "Better schools through health: learning from practice. Case studies of practice presented during the third European Conference on 2 Health Promoting Schools, held in Vilnius, Lithuania, 15-17 June 2009"(22-24). ISBN 978-9986- 649-33-5

9. Dawson, M., Bessems, K., Buijs, G. (2006) schoolSlag Prioriteitenworkshop Basisonderwijs. Woerden, NIGZ

10. Sokou, K. (2009). Pupils as health promoters and researchers on understanding, genuineness and respect. In G. Buijs, Jociute A., Paulus P. & Simovska V. (Ed.) "Better schools through health: learning from practice. Case studies of practice presented during the third European Conference on 2 Health Promoting Schools, held in Vilnius, Lithuania, 15-17 June 2009"(48-50). ISBN 978-9986- 649-33-5

11. Lanfranconi, E. (2006). A self-evaluation tool for linking health-promoting schools with school development in Switzerland. In V. Barnekow, Buijs, G., Clift, S., Jensen, B. B., Paulus, P., Rivett, D. & Young, I. "Health Promoting Schools: a resource for developing indicators"(159-168). IPC, WHO regional Office for Europe, Copenhagen

12. World Health Organization (2008) "School Policy Framework: implementation of the WHO global strategy on diet, physical activity and health." ISBN 978 92 4 159686 2

Appendix 1. Additional information: Introduction

1.1. 6 components of the whole-school approach

The whole-school approach to health promotion can be divided into the following six components:[3]

- **Healthy school policies** are clearly defined documents or in accepted practice that are designed to promote health and well-being. These policies may regulate which foods can be served at the school or describe how to prevent or address school bullying. The policies are part of the school plan.

- **School physical environment** includes the buildings, grounds and school surroundings. For example, creating a healthy physical environment may include making the school grounds more appealing for recreation and physical activity.

- **School social environment** relates to the quality of the relationships among and between school community members, e.g., between students and students and school staff. The social environment is influenced by the relationships with parents and the broader community.

- **Individual health skills and action competencies** can be promoted through the curriculum and through activities that develop knowledge and skills which enables students to build competencies and take action related to health, well-being and educational attainment.

- **Community links** are links between the school and the students' families and the school and key groups/individuals in the surrounding community. Consulting and collaborating with community stakeholders will support health promoting school efforts and support the school community in their health promoting actions.

- **Health services** are the local and regional school-based or school-linked services that are responsible for the students' health care and health promotion by providing direct student services. This includes students with special needs. Health service workers can work with teachers on specific issues, e.g., hygiene and sexual education.

Appendix 2. Additional information: Phase 1

2.1. Questions: Communicating the advantages to school leaders

When preparing to communicate the advantages of a health promoting school to the school leaders, it is helpful to consider the following questions and come up with arguments to refute or address them.

1. What might prevent the school management or head teacher from supporting the decision to become a health promoting school? For example:

   a. The school is already involved in similar programmes, e.g., a sustainable or safe school, and is afraid that the health promoting school will overshadow what is already in place or might require additional work. *

   b. Limited time/funding

   c. The belief that health promotion is not a priority for the school setting

   d. Not convinced of the benefit to the school

2. What are the priorities of the school management or head teacher?

*If this example applies to your school, you may want to see the following information

Schools with similar programmes or activities

If your school is already involved in similar programmes or activities to the health promoting school (e.g., safe school or other activities related to health) your head teachers or school management may be reluctant to make another change to become a health promoting school. They may feel that the whole-school approach will replace their current activities.

The health promoting school can provide a framework to organise these other programmes or activities, helping them be more effective. This can be an important communication message to express to concerned school leaders.

2.2. Engaging other stakeholders

How and when these stakeholders are involved in the process of becoming a health promoting school depends on the type of stakeholder and is ultimately your decision. If the stakeholder can assist you in becoming a health promoting school, they should ideally be involved from the beginning and might be a good candidate for the health promoting school working group. You can also engage stakeholders later in the process.

For example:

- Once your health promoting school priorities have been chosen, collaborating with stakeholders outside the school may be necessary to be able to carry out the essential changes.

- Once you have a draft version of the health promoting school plan, you may want to contact stakeholders from outside the school (e.g., community leaders) to get their feedback and support. You may choose instead to inform them of the health promoting school plan in the *Taking action* phase (phase 4) of becoming a health promoting school.

2.3. Example: Gaining politicians' support

In some cases, gaining the support of local politicians is important, but convincing local politicians to support health promotion in schools can be challenging given that the benefits are often observed over the longer term.

In Rotterdam, a city in the Netherlands, local politicians were persuaded to support health promoting schools by using the 'maximizing their potential' message.[7] In this harbour city with high school drop-out rates, local politicians with an interest in educational attainment became ambassadors for the health promoting school approach.

2.4. What does a working group do?

The role of the health promoting school working group is to guide the school community in becoming and remaining a health promoting school.

- The working group does an assessment of the school's current health related policies and practices to determine the needs and priorities of the school community.

- The working group guides the school community through all the phases of health promoting school development and maintenance.

- The working group supports the continued commitment of the school community in becoming and remaining a health promoting school.

2.5. Questions to identify potential working group members

1. Who belongs to or is representative of your school community and what perspective/insight could they provide to the activities mentioned under Appendix 2, 2.4. What does a working group do?

2. Are there organizations/individuals outside your school community who should be in the working group? Think of relevant expertise that may be lacking within the school community.

3. What can their role be or what can they contribute to the working group?

4. Who are the most relevant and motivated members both inside and outside your school community?

5. Can these members commit the time necessary to fulfil their role now and, ideally, the next several school years?

2.6. Tips for setting up a working group

It is recommended to keep your working group small, preferably between 5 and 8 participants. In a larger group, it can be more difficult to reach a consensus and requires more human resource. At the same time, getting the opinions, support and help of all the representatives of the major target groups is necessary.

It is important to engage students actively in the process of developing, carrying out and evaluating the health promoting school. Students have an important perspective and giving them an active role in the process will increase their sense of ownership and commitment to adopting and continuing to follow the new policies and practice. Active participation of students is central to your health promoting school activities.

Once your health promoting school working group has been established it is important to confirm the role of each member and their commitment to their role. Further, members should agree on how often they will meet and how long each meeting is expected to last. See the sections 2.1 and 2.2 (*Getting started*) in the *School action planner* for tables to complete these important steps.

2.7. Example: A working group: Setting up & carrying out tasks

Schools in the Lombardia region of Italy that agreed to participate in the My dear Pinocchio* health promoting school programme were asked to follow three steps:

1. Gain formal approval from the school board

2. Provide a description of the purpose of becoming a health promoting school both in the school plan and on the school website

3. Form a health promoting school working group consisting of teachers, staff, parents, students and health officers

The health promoting school working group was responsible for the following tasks:

1. To define and research the health status in their school

2. To choose health promoting school priorities with the help of the school community

3. To propose aims, objectives and actions to address the health priorities

4. To integrate health topics/ focus areas into the formal curriculum using participatory teaching methods

5. To integrate health topics/focus areas into the school policy, environment and health services

6. To engage in the process of empowerment which involves the school and outside community and promotes participation

7. To evaluate the health promoting school activities and outcomes in collaboration with an evaluation expert at the local university/or health agency.

The health promoting school working group met at least once a month as needed. In the first meeting they discussed their communication plan to communicate the advantages of becoming a health promoting school to the school community; they had follow up meetings to plan for all the phases of becoming a health promoting school.

*This example is based on the *My dear Pinocchio: The Italian way to the health promoting school*, a case study in *Better schools through health: Learning from practice.[8]*

Appendix 3. Additional information: Phase 2

3.1. Questions to help assess your starting point

Before using the *SHE rapid assessment tool* or other assessment method, it is helpful to first discuss the following questions as a health promoting school working group. The questions can help you begin to think about and assess your school's starting point.

1. Do you already have an existing school policy that focuses on promoting the health of the school community? If yes, is it generally known to and used by staff/the school community? Is it currently in use?

2. Do you have any current priorities in relation to health promotion and well-being in your school?

3. What are your current practices around health promotion in your school? Do they differ by grade level or teacher? Do they include the entire school community?

4. What organizational factors promote or hinder health promoting activities in the school by students and staff? For example, the belief that this is a job for the health education teachers only and not a job for the whole school.

5. What physical factors promote or hinder health promoting activities in the school by students and staff?

6. What individual factors such as attitudes, beliefs or time, promote or hinder health promoting activities in the school by students and staff?

7. Are there ethnic, religious or socioeconomic differences in health behaviour with your school community? If so, what are these differences and how can they be addressed?

8. Are there stakeholders outside your school community who currently supporting your school health promotion efforts? If so, who are they and what are their roles?

9. What are the current human and financial resources that you have available for your health promoting efforts?

3.2. Priority setting workshop

The purpose of the priority setting workshop is:

- To obtain further school community support for becoming a health promoting school
- To gain consensus on and a sense of ownership for the health promoting school focus and priorities
- To discuss and choose priority areas

Role of the health promoting school work group: One or two health promoting school working group member(s) can serve as the workshop leader(s). They develop a

strategy for choosing and approaching potential workshop participants and organizing the workshop(s). The entire working group votes on the final health topics to include in the health promoting school based on the results from the workshop.

How the workshop works: Members of the school community are selected or volunteer to take part in the workshop. They are divided by groups of school staff, parents and students.

We suggest carrying out the workshop in three parts:[9]

1. **Introduction:** Participants are informed about the outcome of the school assessment and provided with an overview of how the workshop works along with the goals and process of setting health priorities.

2. **Setting priorities:** The workshop participants are guided by the workshop leader to choose several health priorities.

3. **Conclusion**: As a group, the participants choose 3-5 health priorities to address over the next 3-5 years, introducing one topic per year.

At the end of the workshop, each group can present their final health priorities. The workshop leader or leaders compile(s) the results and presents them to the health promoting school working group for discussion and final priority setting. The workshop can be carried out in 1.5–2 hours.

Involving students
Depending on the students' age and capacity to understand and participate in setting health priorities, it may not be appropriate to include them in a workshop group. You will have to make this judgment. If the students do participate, the workshop should be adapted to their level of development.

Alternatively, it might be more appropriate to ask the student's teacher to lead a priority setting session in the classroom, consisting of brainstorming, prioritising and finally choosing two or three priorities.

Appendix 4. Additional information: Phase 3

4.1. Things to consider when writing your plan

When writing your action plan it is important to consider the following things:

1. The characteristics, needs and priorities of your school community

2. The action plan/activities in the action plan should be reasonable in the expected completion time and with consideration of your available human and financial resources

3. The tasks, roles and timeline for action should be clearly outlined and documented. The *School action planner* may be helpful in mapping out the details before writing the planning document

4. A limited number of activities and focus areas should be introduced at one time. Carrying out too many changes at one time may overload your school staff, reducing quality and motivation

4.2. Example: Addressing school bullying and violence

An alarming trend in school bullying and school violence lead the headmaster at the 24th primary school, Piraeus, Greece[10] to invite researchers and health promoters from the Institute of Child Health to help in developing a health promoting school plan. The school's starting point was assessed with the collaboration of researchers and school teachers.

The main objective of the health promoting school was to develop a friendly school emphasizing understanding, genuineness, and respect among school students, parents and teachers. The objective was chosen in collaboration with the students, teachers and health promoters.

Students chose and carried out the health promoting school activities with the guidance of teaching staff.

Activities:

- Students, guided by teachers, did research on the experience and feelings of the school community regarding bullying

- Students outlined their vision of a health promoting school

- Students wrote stories and made drawings of both positive and negative school events

- Students did role-play and theatre performances related to communication, friendship and problem solving

- Students worked to make the school an emotionally pleasant and rewarding environment

- 5 school teachers received 9 hours of training related to creating and evaluating the health promoting school, developing skills related to school health promotion and practicing methods of active learning

- The health promoting school was celebrated with a festival and exhibition to present the students' work to the school community

4.3. Example: Mapping-out the action plan

The following matrix is based on the schema that a school in Switzerland made for their health promoting school with the aim of being able to evaluate their programme.[11]

	What do we want to change? (quality aim)	How do we see the change? (indicator)	How do we want to achieve the aims? (actions)	When and how do we measure the change? (evaluation)
Aim 1	To increase the participation of students and parents	Students are involved in decisions; parents have an official delegation	Install a school council or parent's meeting and a method for recording and feeding back of the meetings content to the whole school/school principal	At the end of the school year, the work of the student council will be evaluated; in summer of the second year it will be clear how the parents' meetings worked
Aim 2	Avoid violence-meet conflicts and difficult situations in a constructive way	Students meet difficult situations through dialogue, perhaps with the support of a third neutral person	Peacemaker project which aims to increase student dialog and respect for each other	Monthly evaluation at the meeting of the peacemaker kids and written evaluation after two years

4.4. Questions when planning for evaluation

When planning for evaluation, the following questions related to evaluation may be helpful to consider. If you choose to answer them in your evaluation, you will have to develop corresponding indicators and measurement methods:

1. To what extent have the activities been implemented as planned?

2. To what extent have the aims and objectives been reached?

3. What are the difficulties and challenges and how can they be addressed?

4. What lessons can be learned from overcoming the challenges?

5. What are the attitudes of the school staff toward the new health promoting school practices?

6. What are the attitudes of parents toward the new health promoting school practices?

7. What are the attitudes of the students toward the new health promoting school practices?

8. Have the health promoting school successes been communicated and celebrated?

4.5. Evaluation types: Process, output & outcome

Evaluation types

One way to classify evaluation types is by process, output and outcome evaluation.

Process evaluation measures to what extent the health promoting school activities are carried out as planned. It is a way to monitor the progress and process of the health promoting school programme and in doing so, to assess what works, what doesn't work and why. Once you know what isn't working and why, you can make changes to the activities, communication or resources so that the programme process is more faithfully and effectively executed. At the same time, successes can be celebrated.

Output evaluation measures the short-term processes and changes

For example:

- A more supportive environment
- A health promotion section added to the school website
- Parents evening on health promotion
- Provision of bicycle storage
- To provide healthy options in the school canteen
- Increased knowledge about making healthy choices and a healthy lifestyle

Outputs are the result of health promoting school activities. The results of the process and output evaluation provide helpful information for mid-way modifications to the plan and programme.[12]

Outcome evaluation measures to what extent the outcome objectives and/or indicators have been achieved or how effective the health promoting school has been in impacting positively on health.

4.6. Questions to discuss when writing and revising your plan

When writing and revising your action plan, it may be helpful to discuss the following questions. The questions may help you refine your plan.

- Are your chosen focus areas and aims based on the health promoting school framework and school values?

- Are your chosen priority areas and aims based on your school community's current health needs and priorities as well as the vision for future school development?

- How will the proposed aims and objective influence the teaching objectives, school targets and organization of everyday activities?

- How will this health promoting school plan/activities influence the existing school policies?

- Have the members of your school community, including students been sufficiently consulted during the plan development process?

- Are there specific groups of students or components of school life that should receive particular attention in the health promoting school plan/programme as shown in the needs assessment (assessing your starting point)? If so, have they received appropriate attention in your action plan?

- Have all the suggestions and comments been analysed systematically and applied to reflect the wishes of the school community?

- Are the proposed aims and objectives SMART and reflective of your school community's feedback?

Appendix 5. Additional information: Phase 4

5.1. Channels for communicating your final plan

The channels you choose to use to inform school community members and stakeholders outside your school community about your final health promoting school plan will vary per school and target group. However, possible channels are as follows:

- Circulate the plan among all the parents and school staff by publishing it on the school website and advertising it in the school newsletter

- Organise informational meetings to present and discuss the health promoting school plan

- Inform the students through student council meetings, classroom discussions, school assemblies, posters and other visual communication methods

- Have a health promoting school noticeboard

- Organise awareness events, for example in the school canteen

- Involve the local media in raising local (surrounding) community awareness of the plan and inform them about the health issues

5.2 Questions to consider when taking action

- Do members of your school community have a sense of ownership for the health promoting school plan and a commitment to putting it into action?

- Have you promoted your health promoting school in the local community?

- Is your school staff confident in their ability to carry out your plan?

- Is there sufficient time, human and financial resources to adequately carry out your plan?

- Are tasks, targets and timetables clearly presented and communicated?

- Do you have a system in place to provide on-going support and motivation to staff during the action process?

- Have you considered how you will inform and motivate new students, staff and teachers about your health promoting school?

- Are there conditions in place to continue carrying out your health promoting school activities over the longer term?