Meeting Planner

Provide the information requested, and check off the tasks as they are completed.

☐ Meeting date, time, and location have been set:

Date _____   Time _____   Location _____

☐ Notify participants of the meeting

    ☐ Reminder letter   ☐ Media release

☐ The purpose of the meeting has been decided:

Purpose _____

☐ A chair or leader for the meeting has been chosen, and he or she has been involved in preparing the agenda or has been fully briefed:

Chair or meeting leader _____

☐ The agenda will accomplish the meeting's purpose, encourage commitment and involvement, and provide clear leadership roles.

☐ Necessary resources have been identified and include:

    ☐ Sign-in sheet

    ☐ Printed agenda

    ☐ Minutes of previous meeting

    ☐ Background materials

    ☐ Proposals

    ☐ Worksheets

    ☐ Transparencies

    ☐ (Other) _____

☐ Members have been asked to serve as:

    ☐ Note taker _____

    ☐ Timekeeper _____

    ☐ Presenters _____

    ☐ Sign-in greeter _____

    ☐ Refreshment providers _____

    ☐ Refreshment servers _____

☐ The following logistical matters have been considered:

    ☐ Tables for sign-in and refreshments

    ☐ Chair arrangements

    ☐ Newsprint and markers

    ☐ Easel or chalkboard

    ☐ Outlets for audiovisual equipment

    ☐ Podium and microphone setup

☐ Child care will be provided by _____

☐ Transportation will be provided by _____

Script and Transparencies

Introduction: The transparencies and script may be used for the organizational meeting to guide opening remarks and explain a school health council (SHC). The script answers the following questions: Why is school health important? What do school health programs include? What is a school health council? These same materials can be adapted for use with other audiences to explain comprehensive school health and SHCs.

Transparency 1: Promoting Healthy Youth and Healthy Schools

Title slide

Transparency 2: The health of our children depends on our families, schools, and communities.

Research confirms what we have known all along. The health of children and adolescents depends on their families, schools, and communities.

- Youth who feel connected to their families and schools are healthier and less likely to get in trouble.
- When parents are involved in schools, student learning, behavior, and attitudes improve.
- Health is everyone's business – not just the school's, family's, or health care facility's responsibility.
- But families, schools, and government agencies are limited in what they can do alone to address the health issues of youth.

Transparency 3: "Efforts to improve school performance that ignore health are ill-conceived, as are health improvement efforts that ignore education." *(Health Is Academic)*

We hear a lot of discussion today about improving student performance and our schools. It is important that health be a part of these plans to enhance learning. In addition, when we plan to promote health in the schools and community, we need to think about the whole school. Health improvement and school improvement are interrelated and critical to each other's success.

Transparency 4: "If schools do not deal with children's health by design they deal with it by default." *(Health Is Academic)*

Some would argue that schools have no business addressing health issues and that they need to stick to teaching the basics. Unfortunately when schools do not deal with health issues proactively, they end up dealing with these issues later when they become a problem or a crisis.

Transparency 5: What are the most pressing issues facing the children and youth in our schools today?

Let's take a few minutes to identify some of the most pressing issues facing students in our school district today. What do you think they are? (Write participant responses on a flip chart or blank transparency.)

Which of these issues relate to health? (Check or circle those that relate to health.)

Transparency 6: Behaviors that affect health and learning

As you can see, the health issues currently facing children and youth differ from those 30 to 40 years ago. Then children were often harmed by infectious diseases, but advances in medications and vaccines have largely addressed these problems.

More than ever, the health of children and adults is linked to the behaviors that they choose to adopt. These six behaviors account for most of the serious illnesses and premature deaths in the United States.

- Tobacco use
- Unhealthy dietary behaviors
- Inadequate physical activity
- Alcohol and other drug use
- Sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended pregnancies

Transparency 7: Children and youth are at risk

Health statistics show us how widespread these problems have become:

- More than 3,000 youth start smoking every day.
- Daily participation in high school physical education classes dropped from 42 percent in 1991 to 27 percent in 1997.
- Three of every four youth do not eat the recommended daily amount of fruits and vegetables.
- Each year, almost one million teens become pregnant, and three million become infected with a sexually transmitted disease.
- More than 30,000 youth die in motor vehicle accidents each year.

Transparency 8: Why do schools need to address health issues?

The problems caused by these behaviors reduce children's attendance at school and contribute to their failing in school. Education and health are linked. Schools alone do not address all the health needs of children and youth. However, schools provide a crucial opportunity to prevent or reduce risky health behaviors.

Prevention programs that reduce health risks and improve the health status of children work. After looking at many research studies, the Centers for Disease Control concluded that for every dollar invested in:

- Effective tobacco education, society saves an estimated $26.45 in health care and other costs
- Alcohol and other drug use prevention, society saves $5.69
- Prevention of early and unprotected sexual activity, society saves $5.10

However, school health programs are more than just a single prevention program designed to reduce teen smoking or increase seat belt use. Rather, it is a coordinated and comprehensive approach to health that:

- Seeks to reduce risk factors and strengthens protective factors that affect students' health and learning
- Gains support from students, parents, friends, and adults within the community
- Incorporates many different strategies for promoting and educating about health
- Employs a program planning process that includes a wide variety of stakeholders

Transparency 9: A model for school health

The Centers for Disease Control created a model for coordinated school health that includes eight key parts. They are:

1. *Health education* curriculum in grades K-12 that addresses the physical, emotional, mental, and social aspects of health. Designed to help students improve their health, prevent illness, and reduce risky behaviors.
2. *Physical education* curriculum in grades K-12 that promotes lifelong physical activity.
3. *Health services* that provide preventive services, education, emergency care, referrals, and management of acute and chronic health problems. Designed to prevent health problems and ensure care for students.
4. *Nutrition services* that integrate access to nutritious and appealing meals, nutrition education, and an environment that promotes healthy eating.
5. *A healthful school environment* that provides a safe, healthy, and supportive climate for learning.
6. *Counseling and psychological services* that include individual and group assessments, interventions, and referrals. Designed to prevent problems early and enhance healthy development.
7. Health promotion for staff that includes assessment, education, and fitness activities for school faculty and staff who serve as role models for students.
8. Family and community involvement that includes school health councils and coalitions to build support for school health programs.

Transparency 10: Outcomes of school health improvement efforts

Evaluation of early efforts to start coordinated school health programs show great promise. Schools that implemented programs showed improved attendance and:

- Less smoking among students and school staff
- Lower rates of teen pregnancy
- Increased participation in physical fitness activities
- Greater interest in cholesterol levels and healthier diets
- Increased use of school health and counseling services, which resulted in fewer discipline problems and delayed the onset of risky behaviors

Transparency 11: "Never doubt…"

Schools alone can't be responsible for the health and well-being of children and youth in their communities, but they play an important role. By creating a school health council, schools can find partners within their communities to identify health problems and concerns, set priorities, and design solutions. Local leaders and parents know what is needed by their communities and children. When engaged as decision makers, communities have proven time and again that they are up to the task of addressing local problems and supporting schools in their tasks.

Transparency 12: School Health Council

An SHC is a core group of parents, youth, educators, and others who represent different segments of the community. The key purpose of an SHC is "advising." The group works together to give advice and support to the school on all parts of its school health program. The council is not part of the school's administrative structure nor does it hold any legal responsibilities. The kind of advice given depends upon the role the school wants it to serve.

Transparency 13: Councils can help with…

SHCs can help with:

1. *Program planning,* such as participating in curriculum review, identifying emerging health issues, encouraging innovation in health education, and providing inservice training programs
2. *Advocacy,* such as ensuring that sufficient resources are given to support school health and health education programs, helping to build understanding between the school and community, and linking the school to other community resources
3. *Fiscal planning,* such as helping to raise funds for local programs and preparing grant applications
4. *Education,* such as initiating policies related to smoking, alcohol use, and the sale of nutritious foods, and organizing schoolwide health promotion events
5. *Evaluation and accountability,* such as ensuring that the school's health and physical education programs are achieving their goals, obtaining input from parents and school staff, and identifying health needs

Transparency 14: Benefits of a Council

In the letter that invited you to this meeting, we included the information sheet "Benefits of a School Health Council" (page 1-14). Can you think of any other benefits not listed on this handout?

Transparency 15: Membership should…

Membership on a school health council should be as representative of our school and community as possible. We want to involve people with a broad variety of education, experiences, opinions, economic levels, gender, race and ethnic backgrounds, and ages. Key leaders from the community and school need to be included as well as those we may not typically think of for those kinds of leadership and volunteer activities.

Transparency 16: Who can be a member?

Here are some examples of the kind of people that we want to involve.

Transparency 17: Who else do we need to involve?

Can you think of others who we need to contact and ask to be involved in this effort?

Promoting Healthy Youth and Healthy Schools

Our children's health depends on our families, schools, and communities.

- Youth who feel connected to their families and schools are healthier and less likely to get into trouble.

- When parents are involved in schools, student learning improves.

- Health is everyone's business.

- But families, schools, and agencies are limited in what they can do alone.

"Efforts to improve school performance that ignore health are ill-conceived, as are health improvement efforts that ignore education."

Health Is Academic, 1997

"If schools do not deal with children's health by design, they deal with it by default."

Health Is Academic, 1997

What are the most pressing issues facing the children and youth in our schools?

Behaviors that affect health and learning

- Tobacco use

- Unhealthy dietary behaviors

- Inadequate physical activity

- Alcohol and other drug use

- Sexual behaviors that result in HIV infection, other sexually transmitted diseases, and unintended pregnancy

Children and youth are at risk

- More than 3,000 youth start smoking every day.

- Daily participation in high school physical education continues to drop.

- Three of every four youth do not eat the recommended amount of fruit and vegetables.

- Almost one million teens become pregnant, and three million contract STDs each year.

- More than 30,000 youth die in motor vehicle accidents each year.

Why do schools need to address health issues?

- Education and health are linked.

- Prevention programs work.

- There is a need to address physical, mental, social, and emotional health.

- Most effective approaches are coordinated and comprehensive.

A model for school health

- Health education

- Physical education

- Health services

- Nutrition services

- Healthful school environment

- Counseling, psychological, and social services

- Health promotion for staff

- Family and community involvement

Outcomes of school health improvement efforts

- Improved student attendance

- Less smoking among students and staff

- Lower rates of teenage pregnancy

- Increased participation in physical fitness activities

- Greater interest in healthier diets

- Fewer discipline problems

"Never doubt that a small group of committed people can change the world. Indeed, it is the only thing that ever has."

Margaret Mead

School Health Council

- Made up of a core group of parents, youth, educators, and other community members

- Gives advice and support to the school on all parts of school health

- Helps promote healthy behaviors and a healthy environment

Councils may help with…

- Planning programs

- Advocating for health programs

- Raising funds

- Educating the community

- Assessing needs and evaluating programs

- Coordinating resources, services, and programs between the school and community

Benefits of a council

- Increase parent and community involvement in the school
- Link schools with community health resources
- Provide a means for improving school health policies and programs
- Educate the community about the school and health issues

Membership should…

- Represent all segments of the community

- Involve people with a wide variety of backgrounds and experiences

- Include key players in the community and school

- Involve the least powerful as well as the most powerful

Who can be a member?

- Parent and teacher organizations

- Youth

- Health care providers

- Business people

- Community leaders

- Extension staff

- Human service agency representatives

- School personnel

- Clergy

Who else do we need to involve?