

Indicators of School Administrator^a Support for a Coordinated Approach to Enhance Student Health and Learning¹

Schools are ideally situated to address the physical, cognitive, emotional, social, and environmental factors that affect the health and learning of young people throughout their development. What administrators DO can make a powerful difference! The following indicators identify concrete actions that define leadership for a coordinated approach to policies, practices, and activities that impact student health and academic success.

Administrator support for addressing the physical, social, intellectual and emotional health of students and staff, to maximize academic achievement, is demonstrated by:

Essential Structures

- The district's^b vision/mission includes a statement concerning the importance of students' health and well-being as a foundation for academic success.²
- The school district has officially appointed at least one individual with dedicated time and authority to oversee and to manage a coordinated and multi-disciplinary approach to supporting student and staff health including health education, health promotion, health services and a healthy environment.^{3, 4} The designated individual(s) have written job descriptions, distinct positions identifiable on the district's organizational chart, and are regularly involved in the district's decision-making processes.
- The school district has established a health advisory council^c that meets regularly and works with district staff to determine district health priorities, support the development and implementation of policies, programs and services, and foster community partnerships that promote health as a foundation for school success.^{5, 6}

Data Driven Planning, Implementation, Evaluation

- The district's administrators encourage, support, and participate in multi-disciplinary strategic planning based on the documented health needs of students and staff, using current and local student health and education data.
- Health-related goals and objectives, with measurable outcomes, are included in the district's strategic plan and School Improvement Plan(s).
- The district's administrators recognize that effective programming requires a minimum 3-5 year commitment in order to begin to see and document positive outcomes.⁷
- There is an established system for reporting progress, at least annually, on achieving health goals and objectives and for revising strategies when needed.

Resources

- The district's administrators assure that the district allocates significant fiscal and human resources, collaborative planning time, physical space, technological support, data, communication systems, materials and supplies, to support the designated staff person(s) in facilitating measurable health and academic outcomes. At least some of these resources are dedicated line items in the annual budget.
- The coordinating position(s) is/are at least partially funded as a line item in the district's budget, rather than solely through grant or other temporary funding sources.

Support for Innovation

- The district's administrators encourage health-related collaboration and innovation involving district-wide personnel representing all program areas and community partners. This includes a willingness to blend funding and share district resources to achieve shared, mutual goals.

Advocacy

- The district's administrators understand, model, and can articulate the inextricable link between academic achievement and the physical, emotional, cognitive, and social health of students and staff. They actively advocate with staff and American School Health Association (ASHA). 6/1/09

district decision-makers, as well as families and the wider community, for the need to address both health and academic outcomes in order for children and youth to realize their full potential.

Support for Staff as Healthy Models

- District administrators provide opportunities for staff to practice and model healthy behaviors,⁸ such as:
 - Access to fitness facilities at school
 - Time for physical activity or another health-related activity during staff development days
 - Incentives for participation in individual health risk assessment and health promotion activities
 - Identification of a personal health objective as part of professional development plans.

References

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3. Homer, J.B., and Hirsch, G.B. Systems dynamics modeling for public health: Background and opportunities. *Am J Public Health*. 2006; 96: 452-458.
4. Midgely, G. Systemic intervention for public health. *Am J Public Health*. 2006;96: 466-472.
5. Bogden, J. Fit, healthy, and ready to learn. National Association of State Boards of Education; 2000.
6. Shirer, K, Miller, P.P. Promoting healthy youth, schools & communities: A guide to school health councils. American Cancer Society; 2003.
7. Fixen, D.L. and Blasé, K.S., “What Works?” for implementing “What Works” to achieve consumer benefits. National Implementation Research Network, University of South Florida, Louis de la Parte Florida Mental Health Institute. Presentation at the Treatment for the Homeless TA Workshop. 2006.
8. Directors of Health Promotion and Education. School employee wellness: A guide for protecting the assets of our nation's schools. Accessed on 4/7/2008 at: <http://www.schoolempwell.org> .

Definitions

- a. Use of the term **administrator** is intended to include Superintendents and Assistant Superintendents and/or other mid-level administrators, including district-wide health coordinators, directors of departments/divisions/ component areas, and principals, depending on the size and governance structure of the school system.
- b. Use of the term **district** is intended to mean the local education agency (LEA), which might vary in size and governance by state. It might include one cluster of elementary, middle and high schools or several clusters spanning many miles. It might also include several clusters in a suburban or small city setting, or several regions in an extremely large urban setting.
- c. Use of the term **health advisory council** is intended to include any coordinating body (by any name), that includes school staff from all levels, parents, students, community agencies and organizations, school board members, and private businesses with a vested interest in supporting the health, safety, and wellness of school-age children and youth. Council members are engaged to contribute expertise, personal passion, time, and other kinds of support to the decision-making process and related activities. There could be several working committees (by any name) dedicated to specific focus areas that report regularly to this council to contribute to the council's “Big Picture.”