



ASHA Position Statement: The Role of the School Health Coordinator

The American School Health Association (ASHA) believes that healthier students are better learners. School health programs continue to evolve to meet the changing needs of schools and students. A coordinated school health approach, such as that described in the Whole School, Whole Community, Whole Child (WSCC) model, is an integrated set of planned, sequential, school-based and community-based policies, programs, activities, and services designed to support the physical, social, emotional, and educational development of every student. This integrated system of supports, which may extend beyond one school department or division, requires passionate leadership, effective communication, and an understanding of both the educational and health systems. The school health coordinator provides direction and oversight, fostering collaboration among school/district departments, students, parents/families, and the community. The school health coordinator ensures that all school system health initiatives, services, and programs, are aligned, complementary, efficient, and effective. The goal of employing a school health coordinator is to reduce the duplication of efforts, maximize resources, and ensure that evidence-based programs and interventions are provided that build and sustain a healthy school community.

BACKGROUND

In 1987, ASHA's *Journal of School Health* introduced the eight-component Coordinated School Health (CSH) model, authored by Diane Allensworth and Lloyd Kolbe, two prominent leaders in school health. This model, adopted and promoted by the Centers for Disease Control and Prevention (CDC), noted how health and learning are inextricably intertwined and school programs, the family, and community need to work collaboratively to improve student health and academic achievement. In 2006, the ASCD launched the Whole Child Compact ASCD proposes a broader definition of achievement and accountability that promotes the development of children who are healthy, safe, engaged, supported, and challenged.

In 2014, [ASCD](#) and the [CDC](#) released the ten component Whole School, Whole Community, Whole Child WSCC model to ensure greater collaboration, integration and alignment between the health and education sectors. The WSCC model calls for synergistic and integrated policies and practices that support both health and learning. The school health coordinator plays a critical role overseeing this work.

School health coordinators serve an individual school or may be assigned multiple schools within a district. Some school health coordinators serve an entire district at the central office level. No matter where they serve, school health coordinators have specific responsibilities.

- 1. The school health coordinator strengthens and implements school health policies that align with federal and state laws and regulations and best practices.** The reauthorization of the Elementary and Secondary Education Act, Every Student Succeeds Act (ESSA), includes health education and physical education as a part of a well-rounded education program. There are numerous federal laws and programs that support student health and safety. The school health coordinator plays an essential role in implementation of the ESSA and other federal mandates at the local and state level.
- 2. The school health coordinator serves as a liaison to community health and safety programs.** The coordinator builds bridges, acts as a facilitator and specializes in collaboration, partnership-building, data collection, report writing, training, advocating and is the overall school “champion” for the health, safety, and wellness of students and staff.
- 3. The school health coordinator communicates school health and safety priorities to the district administration, building principals, staff, parents/families, community organizations and students using a variety of tools.** The coordinator skillfully engages all stakeholders including students, parents/families, and the community, to support the connection between health and learning. Artful communication builds collaboration with both in-school and out-of-school professionals and keeps everyone informed on the work of school health.
- 4. The school health coordinator conducts assessments of student health needs and evaluates school health policies, activities and programs.** The coordinator researches funding opportunities, uses data to develop funding proposals to support programs, services, and special initiatives, implements funded proposals, develops and manages a school health budget, and uses best practices to evaluate activities.
- 5. The school health coordinator provides professional development for school personnel on policies and health-related issues.** The coordinator organizes and trains school health teams, updates the local school board and community and attends school health team and community service meetings and workshops.

- 6. The school health coordinator establishes and maintains a Health Advisory Committee representing all the components of the WSCC model.** These qualified and trained professionals from both school and community settings implement an integrated and collaborative approach to meet the needs of the whole child. At the very center of the WSCC model is the student—a critical element and stakeholder in the development and implementation of school health policies and programs.

To stay current in the field, the coordinators have an ethical responsibility to engage in professional learning opportunities, such as state and national conferences, and to participate in local, state and national school-health organizations such as ASHA. The coordinator may also supervise and evaluate personnel, if licensed and trained to do so.

Whether employed as a district employee or district contractor, a district or school level administrator should be responsible for supporting, implementing and assessing the work of a coordinator. This ensures consistency in policy and program delivery and communicates the importance of the work done by the coordinator.

Research shows that successful school health programs and services are contingent on administrative support and buy-in, a school-based health team, and a school health coordinator. The school health coordinator, as recommended by the CDC, supports intentional coordination of health and wellness programs and activities in schools and school districts as described in the WSCC model.

CONCLUSION

ASHA believes that school health is an array of programs and services centered in several educational departments, and in some school districts, involving public health departments, healthcare organizations, and community agencies. ASHA believes that the success of a coordinated school health approach is contingent on engaging a school health coordinator who has a background in both health and education and who understands how schools work. Additionally, ASHA believes that the individual needs a formal education in a health-related field such as health education, physical education, public health, nursing or medicine. School health coordinators need exceptional communication skills, passion, intelligence and strong planning and collaboration skills focused on both short-term and long-term results. The school health coordinator is the key organizer, clearinghouse, moderator, implementation specialist and program evaluator for the WSCC model. Without a school health coordinator, it is difficult to successfully design, implement, and evaluate school health programs and services to meet the needs of every child.

ABOUT ASHA

The mission of the American School Health Association is to transform all schools into places where every student learns and thrives. ASHA is a unique multidisciplinary organization that provides a means for those employed by local, state and national education and health organizations to work collaboratively and synergistically with concerned parents and community members and with colleagues in higher education to meet ASHA's mission. ASHA members represent the ten components of the coordinated school health model. ASHA helped build the foundation for such a collaborative approach and today, the organization continues to define and strengthen our nation's efforts to improve the lives of children, families, and communities.

References:

- ASCD. *Centers for Disease Control and prevention (CDC). Whole School, Whole Community, Whole child: A Collaborative Approach to Learning and Health.* ASCD: Alexandria, VA: 2014. Available at: <http://www.ascd.org/programs/learning-and-health/wsc-model.aspx>. Accessed February 25, 2016
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