

Coordinated School Health Programs (CSHP)

“Health and education go hand in hand: one cannot exist without the other. To believe any differently is to hamper progress. Just as our children have a right to receive the best education available, they have a right to be healthy. As parents, legislators, and educators, it is up to us to see that this becomes a reality.”

(Dr. Antonia Novello, Former US Surgeon General, 1992)

Why is there a need for Coordinated School Health Programs?

The Michigan Youth Risk Behavior Survey indicates that:

- 30% of high school students were in a physical fight in the last thirty days.
- 26% have experienced the symptoms of clinical depression in the last year and 16% seriously considered suicide.
- 23% have used tobacco and 38% have used alcohol in the last thirty days.
- 37% have tried marijuana.
- 42% have had sexual intercourse.
- only 17% eat five or more servings of fruit and/or vegetables a day.
- 33% are not physically active.



What are Coordinated School Health Programs?

A coordinated school health program consists of **eight interactive components**. Schools by themselves cannot, and should not be expected to, address the nation’s most serious health and social problems. However, schools can be the facility in which many agencies work together to maintain the health and well-being of young people.

- 1. Health education** – A planned, sequential, K-12 curriculum that addresses knowledge and skills related to the physical, mental, emotional and social dimensions of health.
- 2. Physical education** – A planned, sequential, K-12 curriculum that provides cognitive content and learning experiences in a variety of movement, sport, and rhythm areas.
- 3. Health services** – Services provided for students to appraise, protect, and promote health.
- 4. Nutrition services** – Access to a variety of nutritious and appealing meals that accommodate the health and nutrition needs of all students.

- 5. Counseling, psychological, and social services** – Services provided to improve students’ mental, emotional, and social health.
- 6. Healthy school environment** – The physical and aesthetic surroundings and the psycho-social climate and culture of the school.
- 7. Health promotion for faculty and staff** – Opportunities for school staff to improve their health status through activities such as health assessments, health education and fitness activities.
- 8. Parent/community involvement** – An integrated school, parent, and community approach for enhancing the health and well-being of students.

What's the connection between learning and Coordinated School Health Programs?

1. **School health education** can change students' health behaviors and attitudes and is a cost-effective way to promote health and prevent disease and high risk behaviors.
2. Students who participate in intense **physical education programs** at school demonstrate increased concentration; improved mathematics, reading, and writing test scores; and reduced disruptive behavior.
3. **School health services** can increase student attendance and reduce suspensions and drop-out rates.
4. **School nutrition services** offering breakfast programs are linked with increases among their students in academic test scores, daily attendance rates, and class participation.
5. **Counseling, psychological, and social services** can result in decreased absences, decreased disciplinary referrals, and improved grade point averages.
6. A **healthy school environment** contributes to fewer absences due to respiratory illness and fewer behavior problems in the classroom.
7. Teachers participating in **school-site health promotion programs** have higher morale and fewer absences.
8. Strong **school-family-community involvement** enhances teacher morale, parent ratings of teachers, support from families, student achievement, and school reputation.

What does the Comprehensive School Health Coordinators' Association (CSHCA) do to help implement Coordinated School Health Programs?

- Encourage and facilitate the formation of broad-based school health advisory councils
- Provide training and technical support for implementation of the Healthy Schools Action Tool
- Provide training, tools, and research data to assist local school teams in advocating for Coordinated School Health Programs
- Partner with community health and mental health agencies to seek funding and develop a system of coordinated school-linked and school-based services

For More Information

- Comprehensive School Health Coordinators' Association
www.cshca.org
- Education Materials Center, Central Michigan University
www.emc.cmich.edu
- The Centers for Disease Control and Prevention, Division of Adolescent and School Health
www.cdc.gov/HealthyYouth/CSHP
- CSHP At-A-Glance
www2.edc.org/MakingHealthAcademic/cshp.asp
- Kappan Special Report: A Load Off the Teachers' Back
www.pdkintl.org/kappan/ktys9901.htm



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