

Ontario Healthy Schools Coalition

Terms of Reference

(Revised May 15, 2009; Original October 30, 2002)

Vision: Every child and young person in Ontario will be educated in a healthy school.¹

Mission: In partnership with key stakeholders who are committed to promoting the health and learning of the children and youth of Ontario, the Ontario Healthy Schools Coalition (herein referred to as "the Coalition" endeavours to:

- Raise awareness of the benefits and need for healthy schools
- Build the knowledge base and capacity for implementation of a healthy schools approach
- Influence policy development and the provision of adequate public funding for healthy schools
- Provide a forum to share healthy schools initiatives and best practices across health, education and related sectors.

Membership: The Ontario Healthy Schools Coalition is an Ontario-wide, broad-based coalition, with members from health units, school boards, hospitals, mental health agencies, universities, health-related organizations, education-related organizations, and parent and student organizations. Membership is open to all individuals and organizations committed to promoting healthy schools in Ontario. This is an evolving group. We will continue to welcome any interested individuals or organizations who wish to support our vision, mission and values. The OHSC was formed in December 2000.

Membership fees: There is an annual membership fee for individuals and organizations who wish to receive communications through our Listserv, participate in teleconferences, and vote at meetings. Membership fees are set by the Core Steering Committee.

There are two categories of membership in the OHSC:

1. Organizational- payment of the membership fee allows an unlimited number of participants per organization
2. Individual- this is for those individuals not attached to a member organization

Benefits of membership include information-sharing and participation in planning the future work of the Coalition.

Membership fees are collected for the January to December time period.

¹ A *healthy school* is one that promotes the physical, mental, social and spiritual health of the whole school community. It constantly strengthens its capacity as a healthy setting for living, learning and working. See the section later in these Terms of Reference on the "Definition of a Healthy School and a Healthy Schools Approach" for further elaboration of this concept.

Meetings: Four teleconferences per year and one face-to-face Annual Forum, at times and locations agreed to and recorded in meeting minutes. Meetings may also be called as needed by the Co-Chairs.

Coalition Structure:

Co-Chairs: Two individuals responsible for conferring with Core Steering Committee and/or membership for direction on OHSC vision, goals, priorities, and position on issues that arise; setting meeting agendas; responding to complex enquiries, including requests for letters of support; drafting correspondence and reports as needed; and approving expenditures from the OHSC expense account prior to processing. They are also responsible for reviewing the Terms of Reference annually, and suggesting modifications to them as necessary. Originally one Co-Chair represented OPHA and the other represented the Centre for Health Promotion, University of Toronto. In future, any member may serve in this role. Co-Chair positions will become open at the time any Co-Chair resigns or if 75% of members vote to remove a chair from office at a duly held meeting. An acting Co-Chair may be designated by the Core Steering Committee in the interim until the position is filled at a duly held meeting or Forum.

Core Steering Committee: 10-12 individuals (including the Co-Chairs, but excluding the Administrative and Membership Coordinators who may attend but are not members) willing to advise and direct as needs arise, including participate between meetings to provide prompt direction on behalf of the OHSC re proactive strategic action and response to enquiries or requests. An effort will be made to ensure representation from different regions in Ontario and workgroups, if applicable. The Core Steering Committee will have authority to make decisions on organizational activities, workgroup formation, public relations, grant applications and day-to-day operations. Quorum is 50% plus one of Core Steering Committee members. Consensus among the Core Steering Committee will be sought in major decision-making. In the case of an impasse, decisions will be made on a 50% plus one basis. Composition of the Core Steering Committee will be reviewed annually and changes made as necessary to meet the needs of the organization. Positions on the Core Steering Committee will become open if any member resigns. Notice of openings will be made at the earliest regularly scheduled meeting and on the Listserv.

Workgroups:

From time to time workgroups may be formed to pursue priorities set by the Coalition each year. Each workgroup must have a Core Steering Committee member on it who can report between meetings. Each active workgroup will report at Coalition meetings throughout the year or until their goals are achieved.

Secretariat: The Ontario Public Health Association (OPHA) provides administrative support for the Coalition's Listserv, Membership Database, Initiatives Database, financial accounts and website.

Financial support for the Coalition is received from the Ministry of Health Promotion and administered through the Nutrition Resource Centre at OPHA, with a fiscal year of April 1 to March 31.

Administrative Coordinator: Is a paid position for the Coalition responsible for handling day-to-day operations, e.g., moderating Listserv, responding to general enquiries, organizing teleconferences/meetings (including securing locations and refreshments and producing meeting minutes and attendance lists), monitoring Initiatives Database, and liaising with OPHA re website postings and other issues when necessary. Also responsible for managing OHSC income/revenue account (from membership fees and forum surpluses) and expense account, in collaboration with OPHA staff, Membership Coordinator and Co-Chairs (including submitting a brief financial report prior to each teleconference or as requested). The Administrative Coordinator is hired by the Co-Chairs and accountable to the Core Steering Committee.

Membership Coordinator: Is a paid position for the Coalition, responsible for welcoming new members and handling Listserv/membership enquiries, collecting annual fees, maintaining Listserv and Membership Database, and liaising with OPHA. The Membership Coordinator is hired by the Co-Chairs and accountable to the Core Steering Committee.

Requests for Support:

When a request for a letter of support or collaboration comes in, the request will be brought to the next meeting of the Coalition or referred to the Core Steering Committee for review. The request will be assessed based on its consistency with our set goals and priorities for the year, our capacity to lend support, the availability and appropriateness of other organizations or individuals to fulfill the request, etc. A decision will be made by the Core Steering Committee.

Definition of a Healthy School and a Healthy Schools Approach:

Comprehensive approaches to school-based health promotion are known under a variety of names, such as Comprehensive School Health, Health Promoting Schools, Coordinated/Comprehensive School Health Program, Quality School Health, Healthy Active School Communities, and Living Schools. The term “Healthy Schools” communicates the common underlying theme. It is a straightforward phrase for use with all audiences. The Ontario Healthy Schools Coalition has defined a “Healthy School” as one that “promotes the physical, mental, social and spiritual health of the whole school community.” Furthermore, a Healthy School, “is one that constantly strengthens its capacity as a healthy setting for living, learning and working” (as is a “Health Promoting School” according to the World Health Organization international concept)

A Healthy School includes:

- High quality instruction and programs
- A healthy physical environment

- A supportive social environment
- Community partnerships

These components are outlined in the Ontario Ministry of Education's *Foundations for a Healthy School* document that was distributed to all schools in December 2006. The components are also broadly consistent with the *Canadian Consensus Statement on Comprehensive School Health* produced by the Canadian Association for School Health and the *What is Comprehensive School Health?* definition of the Canadian Joint Consortium for School Health. Note that healthy school policies are embedded within each component, and that community partnerships can enhance access to resources and services.

The OHSC fully endorses and includes in its vision of Healthy Schools the international (WHO) definition of a health promoting school, the *Canadian Consensus Statement on Comprehensive School Health* and Joint Consortium for School Health Comprehensive School Health definition, and the Ontario *Foundations for a Healthy School* framework. The *Foundations for a Healthy School* document provides direction to comprehensively (using the above four components) address a number of health topics: healthy eating, physical activity, bullying prevention, personal safety and injury prevention, substance use and abuse, healthy growth and development, mental health, and others. The WHO further explains that a health promoting school:

- Fosters health and learning with all the measures at its disposal.
- Engages health and education officials, teachers, teachers' unions, students, parents, health providers and community leaders in efforts to make the school a healthy place.
- Strives to provide a healthy environment, school health education, and school health services along with school/community projects and outreach, health promotion programmes for staff, nutrition and food safety programmes, opportunities for physical education and recreation, and programmes for counselling, social support and mental health promotion.
- Implements policies and practices that respect an individual's well being and dignity, provide multiple opportunities for success, and acknowledge good efforts and intentions as well as personal achievements.
- Strives to improve the health of school personnel, families and community members as well as pupils; and works with community leaders to help them understand how the community contributes to, or undermines, health and education.

Health promoting schools focus on:

- Caring for oneself and others
- Making healthy decisions and taking control over life's circumstances
- Creating conditions that are conducive to health (through policies, services, physical / social conditions)
- Building capacities for peace, shelter, education, food, income, a stable ecosystem, equity, social justice, sustainable development.

- Preventing leading causes of death, disease and disability: helminths, tobacco use, HIV/AIDS/STDs, sedentary lifestyle, drugs and alcohol, violence and injuries, unhealthy nutrition.
- Influencing health-related behaviours: knowledge, beliefs, skills, attitudes, values, support.

The Ontario Healthy Schools Coalition further emphasizes that:

- Certain **values** are fundamental to the character and sustainability of Healthy Schools. These include: *equity, inclusion, meaningful participation, collaboration and partnership building, empowerment, democracy, wholistic health, life-long learning, healthy, sustainable environments and communities, and evidence-informed decision-making and evaluation.*²
- Healthy schools are characterized by grassroots **partnership building** involving school staff (administration, teachers, non-teaching staff), students, parents, and community agencies.
- A healthy school is underpinned by broad **commitment** to an evolving shared vision of a safe, healthy and caring school community.
- Healthy schools promote empowerment of youth and **active participation** of all partners, including students, in democratic decision-making.
- Healthy schools require **structures** (e.g. existing or new committees) **and processes** (taking a proactive, preventative approach through visioning, assessing school strengths and needs, prioritizing, planning using the *Foundations for a Healthy School* framework, implementing, evaluating, celebrating) to identify and address health-related issues in an ongoing, sustainable way, as part of school improvement planning.
- To build and maintain a Healthy School, it is very important to seek broad agreement on, and implement health-supporting **policies and guidelines**.
- High quality **instruction** should use active learning approaches and at a minimum involve physical and health education from kindergarten to grade 12 as well as cross-curricular reinforcement of health concepts.
- **Education and training** of teachers and others in the healthy schools concept and approach is critical.
- Healthy Schools provide increased access to health and other support **services** such as guidance, social services, psychology services, child protection, etc.
- A supportive **social environment** is marked by a positive school climate or culture created through such activities as peer support initiatives, parent or family involvement, role-modeling, community, media, and governmental support, school clubs and intramural teams, etc.
- A healthy **physical environment** can be created through attention to areas such as play structures, air, water, equipment, cleanliness and hygiene, safe food handling, healthy food choices, universal breakfast, lunch or snack programs, enforcement of non-smoking on school property, etc.

² This list was derived from those values named by the European Network of Health Promoting Schools, the WHO Health Promoting Schools definition, Physical and Health Education Canada's Quality School Health model, and the Ottawa Charter for Health Promotion.

- Healthy Schools focus on **protective factors**/ developmental assets/ resiliency
- Healthy Schools contribute to reducing health inequities and addressing many **determinants of health**, such as: income and social status; social support networks; education and literacy; employment/working conditions; social and physical environments; personal health practices and coping skills; healthy child development; access to health services; etc.
- Overall, healthy schools promote a **healthy, active lifestyle**, which can enhance student learning