

## **ANCHORAGE SCHOOL DISTRICT: PREVIOUS WORK WITH COORDINATED SCHOOL HEALTH**

"A Load Off the Teachers' Backs" published as a Kappan Special Report in January 1999 <http://www.pdkintl.org/kappan/ktys9901.htm> detailed the promise of coordinated school health programs (CSHP) as a health and wellness model for schools, school communities, and school districts as a whole. The primary goal of the systems approach was to positively affect health behaviors of students, staff and the larger school community to reduce poor health outcomes and the myriad of factors attributing to the soaring numbers of at-risk children.

In the Anchorage School District, the Health and Physical Education Curriculum Coordinator, Sharon Vaissiere, embraced the concept and launched a coordinated school health project with 3 schools in 2001.

Participating schools were identified based on their readiness to embrace a new project and prior existence of a school team that periodically reviewed safe and drug free schools' issues. A 4-day, retreat-style training was provided by Tena Hoyle and Associates with grant monies from the American School Health Association <http://www.ashaweb.org/i4a/pages/index.cfm?pageid=3278> to teams of staff members from 5 schools in August before the start of school.

"The Mariner Model" was introduced as a planning tool used by school teams to assess their overall needs, acknowledged strengths and weaknesses, and priorities for action with regard to the 8 components of coordinated school health: namely, 1) school environment, 2) health services, 3) school food services, 4) health instruction, 5) physical education instruction, 6) guidance/psychological/social services, 7) staff health and wellness, and 8) family/business/community collaboration. Teachers were expected to implement their action plans in schools with technical support from Ms. Vaissiere but without monetary support in the form of addenda for the additional responsibilities. Within one year, the program languished at 2 of the 5 schools due to the limited time the staff ultimately had to pursue this effort in the face of heightened curriculum requirements and academic testing. The remaining 3 schools: Willow Crest Elementary, Ptarmigan Elementary and Ravenwood Elementary persisted for 2-5 years with support and renewed yearly training until grant monies were no longer available and staff turnover resulted in a shift in focus and on-site leadership.

Where coordinated school health thrived at Willow Crest Elementary for 5 years, magic happened. Each year, health and wellness priorities for the school were mapped for the year with strategies for improvements identified and implemented according to the decisions made at regular, school- health-improvement-plan team meetings. Staff wellness took the form of staff recreation nights, healthier eating in the staff lounge and at meetings, and the sharing of personal hobbies. Student self-esteem rose with the gallery-like display of student portraits taken and framed in conjunction with the school-business partner, Costco. Family school engagement increased with evening spaghetti feeds with prizes and a planned academic focus. Absenteeism, suspensions and other disciplinary actions were tracked and strategies put in place to reduce negative and unhealthy impacts on learning within the context of the coordinated school health project.

And then, key staff members transferred to other schools, funding for additional training for new school teams was unavailable, and the energy to sustain the project was lost amidst a barrage of emerging, new priorities like the federal "No Child Left Behind" mandate.

## **LESSONS**

Coordinated school health model sells itself with many intrinsic benefits for staff, students, families as well as documented improvements!

## **NEED CONSISTENT**

- ◆ Leadership (key staff, key teachers, key community) from year-to-year with succession planning;
- ◆ Funding; grant funding may be used to begin but is too fickle to sustain;
- ◆ Strategic planning for year; should consider 5-year plans with ways to incorporate new mandates, new programs.

## **CHALLENGES**

- ◆ No Child Left Behind mandates;
- ◆ Teacher turnover;
- ◆ Change in teacher profile: many new teachers still practicing the science and art of teaching with little extra time for added responsibilities beyond those associated with their classrooms.