

Healthy Students are Better Learners: Connecting Instructional Focus with the Wellness Action Plan

Students must be motivated and able to learn. Health issues such as poor nutrition, physical inactivity, asthma, teen pregnancy, violence and aggression, hyperactivity and inattention, and poor vision have the ability to negatively impact student-learning outcomes. Research indicates that educationally relevant health issues disproportionately impact urban minority youth, and that these health disparities play a role in the achievement gap. There are indirect and direct pathways through which these health issues impact academic achievement¹:

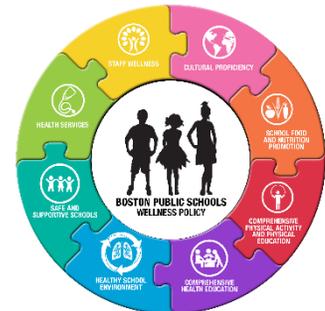
- Cognition (executive functioning, memory, concentration, and attentiveness)
- Connectedness and engagement with school (attitudes and beliefs: motivation, self-concept, satisfaction)
- Sensory perceptions (vision, hearing, etc.)
- Absenteeism
- Dropping out of school

Health issues may influence multiple pathways; for example, an obese student may not be getting enough physical activity which research has shown greatly influences cognitive functioning and positive psychological well-being.² Additionally, obese students are more likely to be bullied and thus suffer from anxiety or depression which affects their connectedness to school. In turn, connectedness to school is associated with higher absenteeism and dropout rates.

By systematically addressing educationally relevant health inequities, BPS can reduce educational achievement gaps and improve health. Our efforts need to focus on the **prevention** of Boston priority health issues (Table 1) and promotion of overall well-being. High quality, strategically planned, and effectively coordinated programs and policies are the key.¹

The Wellness Action Plan is part of the Quality School Improvement Plan

The home, community, and school environment influence student health behaviors. The BPS Wellness Policy is designed to create a healthy school environment that makes the healthy choice the easy choice and ensures students are learning the skills they need to make those choices. BPS has identified eight policy areas that support the physical, social, and emotional well-being of students and their readiness to learn.



Just as you assess the learning environment of your school, there are tools to help you assess how well your school meets the District Wellness Policy and creates a healthy school environment. The Healthy Schools Program Assessment (an online tool provided by the Alliance for a Healthier Generation) identifies areas that need improvement and highlights those areas in which a school is doing well. The school Wellness Council should take into account the recommendations from the assessment and policy guidance found in the *BPS Wellness Policy Toolkit* in order to complete the Wellness Action Plan (WAP) template, setting select goals for improvement in areas where the school does not meet the requirements and/or wants to go beyond. Once the Wellness Council has completed the school's Wellness Action Plan, the Instructional Leadership Team (ILT) will then consider the BPS priority health issues' impact on learning (Table 1) and their school's WAP goals, to **select one Wellness Action Plan Goal** that can support the school's chosen **Instructional Focus (IF)**. While the school may need to do work in a number of policy areas, the wellness focus should be a **school-wide effort**, with an aspirational goal of impacting academic and health outcomes.



¹ Charles E. Basch, "Healthier Students Are Better Learners: A Missing Link in School Reforms to Close the Achievement Gap," *Equity Matters*, no. 6 (March 2010).

² CDC. Physical Activity Facts. <http://www.cdc.gov/healthyschools/physicalactivity/facts.htm> Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion

Steps for Creating the WAP & Aligning a Wellness Policy Focus with the Instructional Focus

Step 1. Assess your school health environment (Wellness Council)

To assess your school's health environment, complete the Healthy Schools Program Assessment on the Alliance for a Healthier Generation website, available by logging on here: <https://schools.healthiergeneration.org/>. This assessment will help you determine what areas of the policy your school may need to improve on and help you to create wellness goals for your Wellness Action Plan (WAP). Complete **all modules in the Healthy Schools Program Assessment**, including those that are labeled as optional. Then visit the Action Plan tab and download the Action Plan Excel file. Also review the BPS Wellness Policy (see the Policy one-pagers in the BPS Wellness Policy Toolkit).

Step 2. Create Wellness Goals (Wellness Council)

Work with your School Wellness Council to develop and write your WAP. Schools should select **3** health and wellness goals to work on. The Action Plan you download in Step 1 provides goals, action steps, and implementation strategies that you may choose from, or alternatively, your Wellness Council may prioritize ones from the BPS Wellness Policy with guidance from the BPS Wellness Policy Toolkit.

1. For each criteria/goal selected, identify the action steps necessary to achieve the goal, along with a lead person and deadlines for each step.
2. Identify the component(s) of the BPS Wellness Policy that each goal addresses.
3. Outline these goals and action steps on the WAP template (refer to guidance document for details)

For detailed guidance on steps one and two, refer to the WAP Template, available on the Health and Wellness Department website (<http://www.bpshealthandwellness.org/>) and attached. For any questions please contact the Health and Wellness Department by email at healthandwellness@bostonpublicschools.org

Step 3. Select one Wellness Goal that will most directly impact your Instructional Focus (ILT)

Now that the Wellness Action Plan (WAP) is complete select **one** of the three **WAP Goals** that will need school-wide effort, affects the **Instructional Focus (IF)**, and improves student health.

Step 4. Write a brief narrative that describes the connection between your Wellness Goal Focus (Step 3) and Instructional Focus

Use the data and information in **Table 1** (see next page) to help you write a narrative describing the alignment between your Wellness Policy Focus Goal and Instructional Focus. Describe how your Wellness Goal supports a whole school approach to the IF. Please include which area of the policy your wellness goal aligns with, the student health issue it is targeted at improving, the academic impact of this health issue and the effects these academics impacts have on your IF.

Ex. In our effort to reduce obesity, we will ensure that all students receive at least a 150 minutes of physical activity per week, including 80 minutes of PE. Twenty-five percent of the PE curriculum focuses on teaching personal and social skills. Furthermore, physical activity (PA) is shown to improve cognition and increase student engagement and connection to school. Therefore, increasing PE and PA will support our IF of student discourse. For more examples of connection statements see the IF toolkits.

Wellness Policy Focus and Instructional Focus

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Step 5. Attach entire Wellness Action Plan (WAP) to your Quality School Improvement Plan and Submit WAP to the Health and Wellness Department

1. Submit the WAP as a part of the overall QSP (include complete WAP as an appendix to the QSP).
2. Submit a copy of your WAP to the Health and Wellness Department by email to: healthandwellness@bostonpublicschools.org.

Table 1: Boston Health Priorities: Linking Wellness and Academics

Educational Impacts	BPS Student Health Data	BPS Wellness Policy Areas: Toolkit Resources and Supports
Obesity: Inadequate Nutrition & Physical Activity and Inactivity		
<ul style="list-style-type: none"> Reduced cognitive function and focus^a Limited school connectedness^b Increased absenteeism^b Increased likelihood to drop out of school due to lack of engagement^b 	<ul style="list-style-type: none"> 40.6% of screened students across the district were overweight or obese in 2013-14 SY³ 23% of HS and 15% of MS students were not physically active for at least 60 minutes on 0 days (in the past week)^{4,5} 33% of HS and 48% of MS students ate breakfast daily^{4,5} 	
Mental and Behavioral Health: Mood, Aggression, Violence, Hyperactivity & Inattention		
<ul style="list-style-type: none"> Reduced cognitive function and focus^a Reduced sensory perceptions^a Limited school connectedness^a Increased likelihood to drop out of school due to lower levels of educational attainment^a Increased absenteeism^b 	<ul style="list-style-type: none"> 30% of HS students reported experiencing depression⁴ 13% of HS students were bullied on school property⁴ 21% of HS and 54% of MS students have been in a physical fight^{4,5} 	
Asthma		
<ul style="list-style-type: none"> Reduced cognitive function in terms of focus and memory^a Increased absenteeism due to doctor visits, hospitalization, and environmental triggers at school^a Limited school connectedness^b 	<ul style="list-style-type: none"> 14% of students across the district have a known asthma diagnosis³ 23% of HS students have ever been told by a doctor or nurse that they had asthma⁴ 	
Sexual Health: Teen Pregnancy and Sexually Transmitted Infections		
<ul style="list-style-type: none"> Increased likelihood to drop out of school^a Increased absenteeism^b Limited school connectedness^b 	<ul style="list-style-type: none"> 47% of HS and 10% of MS students had ever had sexual intercourse^{4,5} 6% of HS students have been pregnant or gotten someone pregnant⁴ 37% of HS students that are currently sexually active do not use condoms⁴ 	

^a Strongly supported by evidence

^b Theoretically supported

Cultural Proficiency Impacts all Health Issues



³ 2013 SNAPNurse and BPS District Wellness Council 2013-14 Annual Report on Wellness Policy Implementation

⁴ 2013 Boston High School Youth Risk Behavior Survey, www.bpshealthandwellness.org

⁵ 2013 Boston Middle School Youth Risk Behavior Survey, www.bpshealthandwellness.org