The Alberta Health Services (AHS) Healthy Child and Youth Development (HCYD) Team recently released the *AHS Framework for the Comprehensive School Health (CSH) Approach*. This framework provides high-level guidance on the CSH approach for AHS staff. It focuses on four main components that support the creation of healthy school communities: foundational principles, the pillars of CSH, the community development process, and shared responsibility between health and education sectors. A more detailed guidance document that provides contextual details and evidence related to the CSH approach is has also been released to support AHS staff in using this framework.

This framework is intended to:

- Establish a consistent provincial direction for CSH within AHS.
- Promote consistency in the use of language and terminology related to CSH within AHS and between AHS staff members and external stakeholders.
- Provide an evidence-based approach for building healthy school communities that AHS staff can adapt based on local needs, capacity, and levels of readiness.
- Increase the use of evidence-based strategies for creating healthy school communities by AHS staff, thereby improving the health of Albertan children and youth.

It is anticipated that AHS staff will use this framework to build new and foster existing partnerships that contribute to healthy school communities. Although these documents have been developed for AHS staff, it is recognized that many partners and stakeholders across Alberta play critical roles in creating healthy school communities. To give you a better understanding of the approach to building healthy school communities that is endorsed within AHS, we have provided a copy of the *AHS Framework for the CSH Approach*. Educational resources and tools are also available to support school community stakeholders in using the CSH approach, and you can access these on the AHS website at [www.albertahealthservices.ca/csh.asp](http://www.albertahealthservices.ca/csh.asp)

To request a copy of the more detailed companion guidance document titled *Comprehensive School Health: An Evidence-Based Approach for Creating Healthy School Communities*, please contact:

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Framework for the Comprehensive School Health Approach
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Comprehensive School Health (CSH) is an internationally-recognized and effective approach for building healthy school communities. It can be used to address a variety of health issues and can improve health and education outcomes for children and youth. Evidence from Alberta and Canada reveals that there is substantial room for improving behaviours of children and youth related to many health issues, including: body image, bullying, nutrition, injuries, mental health, stress, sleep habits, obesity, physical activity, sexual health, alcohol use/misuse, tobacco use, and drug or substance use/misuse. Moreover, schools are among the most influential settings for the development of long-lasting health behaviours, life skills, and self-esteem among children and youth. CSH-related work in Alberta is not clearly owned by any one organization or sector, and involves participation from the health sector, the education sector, academia, and community organizations.

The Alberta Health Services (AHS) Framework for the CSH Approach was created based on consultations with AHS staff members and a review current research. This framework is intended to:

- Establish a consistent provincial direction for CSH within AHS.
- Promote consistency in the use of language and terminology related to CSH within AHS, and between AHS staff members and external stakeholders.
- Provide an evidence-based approach for building healthy school communities that AHS staff can adapt based on local needs, capacity, and levels of readiness.
- Increase the use of evidence-based strategies for creating healthy school communities by AHS staff, thereby improving the health of children and youth in Alberta.

To reflect the role of AHS in facilitating the CSH approach, the framework includes these components:

**Foundational Principles** that contribute to successful school health promotion initiatives

- Collaborative
- Evidence-Based
- Holistic
- Student Engagement
- Sustainable

**Pillars of CSH** that can be used to plan multi-component school health initiatives that address priority health issues in a holistic manner

- Social and Physical Environments
- Teaching and Learning
- Healthy School Policy
- Partnerships and Services

**The Community Development (CD) Process** which is an effective approach for creating healthy school communities and empowering these groups to take ownership of their health and well-being

- Prepare
- Create a Shared Vision
- Determine the Priority Issues
- Develop an Action Plan
- Implement and Monitor
- Reflect, Evaluate, and Celebrate

**Shared Responsibility for CSH between Health and Education Sectors** which promotes the sustainability of healthy school communities and involves AHS staff facilitating the CSH approach and offering supportive resources or expertise while education sector staff drive school health promotion initiatives from within their organizations.
A companion guidance document, *Comprehensive School Health: An Evidence-Based Approach for Creating Healthy School Communities – Guidance Document for AHS Staff*, is available to provide AHS staff with greater detail on this framework and the CSH approach.

The AHS Framework for the CSH Approach is an evidence-based, long-term strategy for improving population health in Alberta. It supports many of the broader strategic priorities and outcomes within AHS. This framework provides guidance on CSH and supports a shared understanding of this approach among AHS staff. By using this framework, AHS staff will contribute to more consistency in the level, type, and quality of support that is provided to school communities in Alberta and to improvements in the health and educational success of Albertan children and youth.
Introduction

Comprehensive School Health (CSH) is an internationally-recognized and effective approach for building healthy school communities. It can be used to address a variety of health issues and can improve health and education outcomes for children and youth. An environmental scan conducted with Alberta Health Services (AHS) staff members in the fall of 2010 revealed that the characteristics of school health promotion within AHS are diverse and dependent on the context, history, organizational structure and geography of each zone. Current school health promotion activities vary from well-developed CSH programs in some areas to ad-hoc school health promotion projects in other parts of the province. This environmental scan also demonstrated the need for more consistent understanding and application of the CSH approach across AHS (as appropriate, based on local needs and context). The framework builds on existing school health promotion initiatives and successes within AHS zones, the input of AHS staff members, and the international evidence regarding the CSH approach.

Purpose and Intended Audience

The purpose of the AHS Framework for the CSH Approach is to:

- Establish a consistent provincial direction for CSH within AHS.
- Promote consistency in the use of language and terminology related to CSH within AHS, and between AHS staff members and external stakeholders.
- Provide an evidence-based approach for building healthy school communities that AHS staff can adapt based on local needs, capacity, and levels of readiness.
- Increase the use of evidence-based strategies for creating healthy school communities by AHS staff, thereby improving the health of children and youth in Alberta.

This framework is intended for front-line and management-level AHS staff members who work directly or indirectly with schools or school jurisdictions, particularly those who focus on school health promotion initiatives. AHS staff who would like more detailed information on the CSH approach can refer to the companion guidance document, Comprehensive School Health: An Evidence-Based Approach for Creating Healthy School Communities – Guidance Document for AHS Staff.

Development of this Framework

With oversight and direction from the AHS Provincial CSH Steering Committee, the AHS Healthy Child and Youth Development (HCYD) team led the development of this framework and its companion guidance document based on feedback from nearly 200 AHS staff members who participated in an environmental scan in 2010 (focus group or online survey). Steering committee members and over 55 additional AHS staff members representing all AHS zones and key provincial departments helped to refine the content of these documents through a series of reviews and consultations in 2011 and 2012.
Underlying Assumptions

When applying this framework, it is important to keep in mind the following underlying assumptions:

- AHS staff members are involved in a diverse range of activities and partnerships related to CSH. This framework is intended to complement, not replace or discredit, existing practices.
- AHS staff will use the framework to plan strategies that are appropriate for their local context. With the understanding that Alberta’s population is diverse, this framework is intended to guide AHS staff through this process, and not to prescribe a standard approach.
- School health promotion initiatives will be prioritized differently by each zone and department within AHS. This framework provides evidence-based guidance that can be adapted to meet local needs and priorities. It is anticipated that AHS zones and departments will use these recommendations to guide practice when appropriate.
- This framework is complemented by other evidence-informed resources that support school-based health promotion. Recommendations and guidance within the framework may evolve as new evidence emerges.
- Other Alberta organizations may use different approaches and terminology related to school health. Regardless of such differences, AHS staff will continue to develop partnerships with external organizations that are consistent with the framework and contribute to the overall goals of the CSH approach.

Current Context Surrounding Comprehensive School Health

CSH stems from work done in the 1950s by the World Health Organization’s (WHO) Expert Committee on School Health Services. The Ottawa Charter for Health Promotion was created in the 1980s and provides the basis for the CSH approach. At present, the CSH approach or similar approaches are supported within many countries, including Canada, the United States, Australia, and multiple European nations.

Several terms are used to describe a similar approach for creating healthy school communities: CSH (Canada), Health Promoting Schools (HPS) (Europe and Australia) and Coordinated School Health (USA). All are based on the Ottawa Charter for Health Promotion, and include the same principles that are incorporated into the AHS Framework for the CSH Approach. Box 1 provides definitions for several key terms that are used within this framework.
Box 1

*Key Terms used in this Framework*

<table>
<thead>
<tr>
<th>Key Terms used in this Framework</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong> is a resource for living, and a positive concept emphasizing social and personal resources as well as physical capabilities and assets.</td>
</tr>
<tr>
<td><strong>Health Promotion</strong> is the process of enabling people to increase control over, and to improve their health.</td>
</tr>
<tr>
<td><strong>Comprehensive School Health (CSH)</strong> is an internationally-recognized approach for building healthy school communities and supporting improvements in students' educational outcomes.</td>
</tr>
<tr>
<td><strong>School Health Promotion Initiative</strong>, in the context of this framework, is a broad term to describe any application of the health promotion process in the school setting. These initiatives may involve full or partial use of the CSH approach.</td>
</tr>
<tr>
<td><strong>A Healthy School Community</strong> is one that supports the wellness of all its members (students, teachers, staff, parents) and continuously strengthens its capacity as a healthy setting for living, learning and working.</td>
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</table>

**Comprehensive School Health in Alberta**

Within Alberta, momentum related to the CSH approach as a strategy for school health promotion has been building over the past few years. CSH-related work in Alberta is not clearly owned or funded by any one organization or sector, and involves participation from the health sector, education sector, academia, and community organizations. Within AHS, practice related to school health promotion varies between zones and departments. In general, AHS focuses on the provision of targeted health services (e.g. immunization, speech and language therapy) as well as health promotion initiatives, some of which are based on the CSH approach. AHS staff who contribute to healthy school communities include:

- Allied health professionals including Physiotherapists, Speech and Language Therapists, and Occupational Therapists
- Content experts from Nutrition Services, Mental Health Treatment, Mental Health Screening and Early Identification, Mental Health Promotion, Injury Prevention, Addictions Prevention, Tobacco Reduction, and Oral Health
- Health Promotion Coordinators within the provincial Healthy Weights Initiative
- Mental Health Capacity Building Project staff
- Public Health Nurses
- Zone-based school health promotion staff

Figure 1 illustrates examples of various organizations and initiatives that contribute to healthy school communities in Alberta.
Figure 1

Examples of Organizations and Initiatives that Contribute to Healthy School Communities in Alberta
Rationale for the Comprehensive School Health Approach

Health status and behaviours influence students’ abilities to learn and succeed in the school setting, both academically and behaviourally\textsuperscript{11-15}. Likewise, educational achievement is a strong predictor of health status, and is recognized as a key determinant of health in Canada and elsewhere \textsuperscript{10,12,16-19}. Evidence from Alberta and Canada reveals that there is substantial room for improving health behaviours of children and youth related to many health issues, including: body image, bullying, nutrition, injuries, mental health, stress, sleep habits, obesity, physical activity, sexual health, alcohol use/misuse, tobacco use, substance use and misuse (Box 2).

Box 2

\textit{Selected Indicators of the Current Health Status of Children and Youth}

- Only 62\% of young people who are considered normal weight feel their body is the right size \textsuperscript{20}.
- Approximately 25\% of children have been bullied \textsuperscript{21}.
- Less than 50\% of children and youth consume adequate amounts of fruits and vegetables \textsuperscript{22}.
- Injuries, which are often preventable, are the leading cause of death among children and youth \textsuperscript{23}.
- Thirty-nine percent of 15-19 year olds report feeling pressured to accomplish more than they can handle and 64\% report cutting back on sleep to get things done \textsuperscript{24}.
- Nearly 60\% of children and youth aged 6-19 years have had a cavity at least once in their lives \textsuperscript{25}.
- Approximately 22\% of Albertans aged 2-17 are overweight or obese \textsuperscript{26}.
- Almost 35\% of 6-11 year olds do not meet the minimum recommendations for physical activity of at least 7 hours per week \textsuperscript{27}.
- Twenty-two percent of grade 9 and 10 students report having had sexual intercourse \textsuperscript{20}.
- Fourteen percent of grade 6-8 students and 44\% of grade 9-12 students have tried smoking cigarettes \textsuperscript{28}.
- Among grade 7-12 students, 50\% reported binge drinking in the previous year (5 or more drinks on one occasion) \textsuperscript{28}.

Schools are among the most influential settings for the development of long-lasting health behaviours, life skills, and self-esteem among children and youth \textsuperscript{1,2,20}. Regardless of socioeconomic status, ethnicity, culture, or other demographic factors that may influence health status and access to related programs and services, almost all children and youth can be reached through Alberta’s education system (Box 3), making it possible to reach sub-segments of the population who may experience health disparities \textsuperscript{10,12,14,29-31}. Schools also provide a point of contact with a proportion of the adult population (staff, parents, community members) that is significant from a public health perspective (Box 3) \textsuperscript{12,14}. Schools are a unique community resource to promote health for children, families, and teachers in a cost-effective and efficient manner \textsuperscript{10,17,18}.
Box 3
*The Potential Reach of School Health Initiatives in Alberta*

The Potential Reach of School Health Initiatives in Alberta

- There were nearly 590,000 students registered in public, separate, private, or charter schools in Alberta’s Kindergarten to Grade 12 education system for the 2011-2012 school year.\(^{32}\)
- Nearly 50,000 certified teachers, school support staff, and administrators are employed within Alberta’s education system.\(^{33}\)
- Although it is difficult to estimate the true reach, school health promotion initiatives can extend beyond school grounds to reach families and communities to have a much broader impact.\(^{14}\)

The CSH approach is effective for improving both health and education outcomes. Successful application of the CSH approach can improve mental health and emotional well-being; aggression and bullying; injuries; nutrition; physical activity and fitness levels; substance use and misuse; sexual health; and, relationships.\(^{2,34-41}\) As well, the CSH approach has been linked to higher test scores in core subjects (math, science, and reading) and standardized tests, higher rates of high school completion, and lower drop-out rates.\(^{39,41,42}\) The AHS Framework for the CSH Approach provides guidance for AHS staff on the application of this approach.
The Alberta Health Services Framework for the Comprehensive School Health Approach

Consistent messaging and language related to school health across the province will increase the overall effectiveness of communications and collaborative work with partners from the education sector. AHS staff members from all zones recognize the need for improved consistency and standardization in the CSH messaging and approach used and promoted by the organization. The AHS Framework for the CSH Approach provides this type of guidance for AHS staff members who work with school communities.

The AHS Framework for the CSH Approach is consistent with the Process Model that Supports the Development of a Healthy School Community from the Alberta Healthy School Community Wellness Fund (Wellness Fund). The Wellness Fund Model, released in 2012, integrates the Joint Consortium for School Health (JCSH) Framework for CSH with the internationally-recognized Community Development (CD) process and includes the key stakeholders needed to create sustainable healthy school communities. To reflect the role and function of AHS in facilitating the CSH approach, the AHS Framework for the CSH Approach builds on the Wellness Fund Model and includes the following key components:

**Foundational Principles for CSH**
These principles, identified through consultation with AHS staff and a review of relevant research, contribute to successful and sustainable school health promotion initiatives.

**Pillars of CSH**
These pillars from the JCSH Framework for CSH can be used to plan multi-component school health initiatives that address priority health issues in a holistic manner.

**The CD Process**
This cyclical series of steps is recognized around the world as an effective process for creating healthy school communities and empowering these communities to take ownership of their health and well-being.

**Shared Responsibility for CSH between Health and Education Sectors**
From an AHS perspective, joint ownership between health and education partners is critical to the success and sustainability of healthy school communities. AHS staff can help to facilitate the CSH approach and provide necessary resources and expertise, while education sector staff can drive school health promotion initiatives from within their organizations.

Each of these components is described in more detail below.
Framework for the Comprehensive School Health Approach

Foundational Principles for Comprehensive School Health

These foundational principles contribute to successful implementation of the CSH approach and creation of healthy school communities. These principles are supported by research and are consistent with input from AHS staff members who participated in a focus group or online survey in 2010. Efforts to create healthy school communities using a CSH approach should be guided by the foundational principles described on the following page.
Collaborative

Strong partnerships between the health and education sectors, families, and community members lead to action that is more effective, efficient, relevant, and sustainable \(^3,10,17,45-48\). In many areas of the province, AHS has long-standing relationships with school community stakeholders. It is important that AHS staff at all levels continue to build new relationships and maintain existing relationships with both internal and external partners. These stakeholders include, but are not limited to: students, parents, teachers and other school staff, school administrators, school councils, school jurisdiction staff, school boards (trustees), superintendents, and community partners. Internal partnerships and collaboration within AHS are also critically important for creating consistency in the messages and approaches taken with school communities, and reducing potential duplication of efforts.

Evidence-Based

To achieve meaningful change in student health and educational outcomes, it is necessary to employ strategies and interventions that have demonstrated effectiveness, as evidenced by high-quality research and evaluation studies. This framework is based on evidence from Alberta and around the world. It is also important for AHS staff members to supplement this framework with evidence-based strategies that meet the needs of their local school communities.

Holistic

The most effective school health promotion initiatives are holistic in terms of both structure and content and must recognize the underlying connections between multiple health issues and characteristics of the whole school environment \(^10\). A holistic approach to addressing the physical, social, mental, intellectual, and spiritual dimensions of health is important, given that different health issues or behaviours often have similar determinants or root causes \(^10,12,45\). When planning initiatives that will have a positive impact on students’ health and learning outcomes, it is important to consider the underlying determinants of health that exist in school communities.

Student Engagement

Engaging students in all aspects of the CSH approach increases their ownership and the sustainability and impact of school health initiatives \(^49,50\). Using students’ voices and opinions in the context of school health promotion initiatives helps to ensure that the needs of the whole child are met. When students are at the centre of school health promotion initiatives, it helps to build their capacity for understanding health issues and making responsible health decisions over the short and long term \(^49,50\).

Sustainable

The CSH approach is meant to be ongoing and should not be considered a time-limited project. It is critical that schools and school jurisdictions build the capacity to maintain this approach, as AHS staff may not be able to provide high levels of support over the long term to all school communities across the province \(^51\). Building capacity within school communities helps to ensure that school health promotion initiatives will continue in the future. All school communities are unique and should be empowered to take ownership over their own health \(^3,9,17,40,51-53\). By building capacity within schools and school jurisdictions for planning, implementation and evaluation of school health promotion initiatives on a continuous basis, AHS staff members will contribute to sustainable change in a larger number of school communities. Strategies that contribute to improved capacity for sustaining CSH progress within a school community include: providing professional development and training for educators, engaging students, creating supportive policies and procedures, connecting the CSH approach to existing goals and accountability frameworks, obtaining visible and strong support from school and jurisdiction-level administration, and gaining extensive support from community partners \(^9,17,51,53\).
Pillars of Comprehensive School Health

Across multiple health domains, school health initiatives that incorporate multiple strategies (e.g. student education, teacher training, parent training, school-wide improvements to social climate and ethos) are more effective than initiatives employing single strategies. The four pillars of CSH come from the JCSH Framework for CSH (Figure 3), which is the most commonly used model for CSH by AHS staff, and is also used by Alberta Health and Alberta Education within their key documents and resources related to school health. Harmonized action addressing each of the following pillars provides a strong foundation for creating healthy school communities and improving health and education outcomes.

Social and Physical Environments
This pillar encompasses the quality of relationships between school community stakeholders, the emotional well-being of students, and the buildings, grounds, play space and equipment in and surrounding the school.

Teaching and Learning
This pillar includes the resources, activities and curriculum where students gain skills and knowledge required to improve health and well-being.

Healthy School Policy
This pillar includes management practices, decision making processes, and policies and procedures that promote health and well-being and help shape a respectful, caring, and welcoming school environment.

Partnerships and Services
This pillar incorporates connections between schools, families, community organizations, the health sector, and other sectors that support students’ health.

Embedded within these four pillars is the concept that effective school health promotion initiatives target the home, school, and community environments where children and youth spend their time. Schools provide an ideal setting for health promotion activities, but for the greatest effects on health outcomes and student success, these activities must be extended to home and community environments. Involving parents, family members and community members in school health promotion initiatives increases the overall quality of schools and school programming, and enhances opportunities for children and youth to adopt healthy behaviours and improve academic achievement.
The Community Development Process

The diverse composition of each school community in Alberta contributes to the need for a CSH implementation process that is flexible. The CD Process provides this flexibility and is recognized in Alberta and around the world as an effective process for facilitating school health initiatives.9,10,51,58,62

A healthy school community is one that supports the wellness of all its members (students, teachers, staff, parents) and continuously strengthens its capacity as a healthy setting for living, learning and working.9,10 Because healthy school communities develop and evolve over time, the CD process is designed to be cyclical in nature, and it is recognized that different school communities may begin the process at different steps in the cycle and move through the steps in different sequences.9,10,51 Regardless of the starting point or the path followed, effective CSH initiatives involve careful preparation and planning based on input from all relevant stakeholders; clear and realistic goals and objectives; a determination of the needs and priorities within the school community; concrete action plans; and, methods for evaluating change and success.58 The AHS Framework for the CSH Approach incorporates these components into the following steps (Figure 4) 44,62:

1. Prepare by gaining support from key stakeholders, identifying a health champion, forming a collaborative team, and achieving a shared understanding of CSH and what it means to be a healthy school community.
2. Create a Shared Vision of the ideal healthy school community.
3. Determine the Priority Issues by consulting with school community members and completing a school health assessment to identify opportunities for improving student health and learning.
4. Develop an Action Plan to address the high priority health issues identified within the school community.
5. Implement and Monitor to ensure that the action plan meets its intended outcomes.
6. Reflect, Evaluate, and Celebrate to ensure that the goal and objectives of the initiative have been met and positive changes and contributions are recognized.

For more detailed information on the different steps in this framework please refer to the companion guidance document titled Comprehensive School Health: An Evidence-Based Approach for Creating Healthy School Communities Guidance Document for Alberta Health Services Staff.
Shared Responsibility for Comprehensive School Health between Health and Education Sectors

Joint ownership between health and education sector stakeholders contributes to the sustainability of CSH initiatives. Strong partnerships between health and education take time and commitment toward building trust, developing a mutual understanding of each partner’s language and values, and agreeing on appropriate and meaningful responsibilities for each partner. Formal agreements between health and education partners help define clear roles and ensure that the objectives of each partner are identified and achieved. AHS staff can help to facilitate the CSH approach and provide necessary resources and expertise, while education sector staff can drive school health promotion initiatives from within their organizations. Building the capacity of education sector partners to take ownership of the CSH approach on an ongoing basis is critical to the sustainability of school health promotion initiatives.

While school-level implementation of this approach is important, research suggests that schools must be supported more broadly by their jurisdiction to achieve the greatest levels of success and sustainability. When school health promotion initiatives are supported at a school jurisdiction level, it is more likely that resources and infrastructure will be available to facilitate staff training and development, overall coordination of school health promotion initiatives, and more expansive partnerships related to CSH. By prioritizing work at a jurisdiction level, AHS staff can reach a greater number of schools and can promote sustainability, as school jurisdictions improve their internal capacity for supporting individual schools in adopting the CSH approach.

Outcomes of the Comprehensive School Health Approach

Evaluation of the Comprehensive School Health Approach

Well-planned, structured evaluations that are built into CSH initiatives from the outset generate the information needed to demonstrate effectiveness and contribute to the sustainability and continuous improvement of such initiatives. Evaluation of health promotion initiatives, such as those employing the CSH approach, is a challenging process. Identifying a causal path between health promotion initiatives in school communities and subsequent changes in health outcomes is difficult, and unrealistic in most cases. Because of the complex and distant relationship between health promotion activities and changes in disease morbidity and mortality (health outcomes), it is important that evaluations of school health promotion initiatives assess more upstream indicators of process and outcome that contribute to eventual improvements in health outcomes.
It is recommended that evaluations of CSH initiatives target all stages of health promotion efforts, including health promotion actions (process evaluations of education, facilitation, and advocacy activities), as well as several types of outcomes:

- Health promotion outcomes related to health literacy, social influence and action, and healthy public policy and organizational practices
- Intermediate health outcomes related to healthy lifestyle practices (health behaviours), health services, and healthy environments
- Health and social outcomes including mortality, morbidity, disability, quality of life, functional independence, and equity

Further direction on planning evaluations that are aligned with this framework is found in the companion guidance document.

The Comprehensive School Health Approach and Alberta Health Services Outcomes and Priorities

The AHS Framework for the CSH Approach is a long-term strategy for improving population health in Alberta and supports many of the broader strategic priorities and outcomes within AHS. These include medium term outcomes related to cancer and chronic disease prevention, injury prevention, addictions and mental health, social and physical environments, and longer term outcomes such as reduced mortality, morbidity and disability attributed to lifestyle-related health conditions, and improved quality of life, increased life expectancy, and reduced potential years of life lost. Figure 5 provides a map of the short-, intermediate-, and long-term outcomes that may be improved through effective implementation of the AHS Framework for the CSH Approach. In addition to key health promotion outcomes and intermediate health outcomes, Figure 5 also demonstrates how the AHS Framework for the CSH Approach can contribute to the broader outcomes of the Health Promotion, Disease and Injury Prevention unit and AHS.
Figure 5

Conceptual Outcome Map for Broad-Level Implementation of the Comprehensive School Health Approach by Alberta Health Services
Summary

CSH is an effective and evidence-based approach for building healthy school communities. This framework provides guidance on CSH and supports a shared understanding of this approach among AHS staff. This shared understanding will help both front-line and management-level staff to communicate clearly with each other and provide more consistent messages to school and community partners across the province.

The framework recognizes that the CSH approach is not new to AHS and has been part of practice for some zones since the 1990’s. Because Alberta has a diverse population, there are differences between and within the zones. Each school community is unique in terms of demographics, learning needs, health issues, policies and practices, geography and other characteristics. With this in mind, using this framework as a guide, rather than a prescribed or rigid process, will help to meet the distinctive needs in Alberta and contribute to improved health and school success among children and youth.

Successful and sustainable application of the CSH approach requires commitment from both the health sector and education sector at community, regional, and provincial levels. The AHS Framework for the CSH Approach can be used by AHS staff members as a guide for facilitating CSH initiatives with partners from the education sector. By using this framework, AHS staff will contribute to more consistency in the level, type, and quality of support that AHS staff members provide to school communities in Alberta and improvements in the health and educational success of Albertan children and youth.
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