Health Promoting Schools Policy

December 2004

Ministry of Education and Ministry of Health
Republic of Maldives
Health Promoting Schools

POLICY
Foreword

A healthy mind and a healthy body are inseparable, binding upon each other for a productive life. Similarly, a healthy school environment is a pre-requisite to ensure that schools provide an ideal learning place for cognitive, social and emotional development of our children. Children learn best in a safe, healthy and cognitively motivating environment. Inspired by these facts, the Health Promoting Schools Initiative has been initiated with the aim to enable students to care for themselves, and others, and have self-control over factors that affect their health. The programme is also designed to facilitate students to make responsible and productive decisions. Central to the programme is also emphasis placed on creating a school community that promotes all aspects of health, making the school a health promoting environment.

This initiative will involve the entire school community: school management, teachers, students and parents. It will encourage the professional development of teachers and curriculum change to teach health promoting concepts, and engage student in health promoting activities. A monitoring and evaluation component is inherent because it is critical to achieving the outcomes of the programme.

The strategies for achieving the objectives of this new initiative are designed and with the support of our education partners, especially the Ministry of Health, WHO and UNICEF. We thank all our partners and look forward to their continuous support and encouragement during the programme implementation.

Mahmood Shaugee
Minister of Education

December 2004
Health Promoting Schools

Policy
Foreword

Good health and success in educational attainment in schools are interrelated. The primary mission of schools cannot be achieved if students and staff are not physically, mentally, and socially healthy. Best practices from a number of countries indicate that active involvement of schools in promoting health is vital for inculcating healthy behaviour among children and the youth.

The role of schools in promoting health and building a healthy generation was recognised at the very inception of the policy of primary health care in the country. Thus the school health programme was initiated in 1986 as a collaborative effort between the Ministry of Education and the Ministry of Health. Although the strengthening and expansion of the school health programme has been slow, the support and cooperation of schools in promoting health and disease prevention is noteworthy.

The types of health problems common among us have changed dramatically over the past two to three decades. While major life threatening diseases of the past no longer scare us, lifestyle and behaviour induced diseases and conditions are emerging together with new communicable diseases. Credible surveys in and outside the country indicate that alarming proportions of young people are engaged in behaviours that put them at risk of serious health problems. Some issues of concern are related to eating patterns, physical inactivity, use of tobacco and drugs and stressful relationships.

Healthy eating patterns are essential for students to achieve their full academic potential, proper physical and mental growth, and lifelong health and well-being. Similarly, regular physical activity is an important pre-requisite for maintaining and improving physical and mental health and for reducing the incidence of premature death due to non-communicable diseases. Schools can help students and staff, establish and maintain healthy eating patterns and be physically active. Schools also have a responsibility to help prevent tobacco and drug use to ensure the health and the well-being of students and staff as well as their families.

Early development of skills such as problem solving and decision making are essential for students to make pertinent and healthy choices in their adult life. A health promoting school not only provides the students information and knowledge on health issues but also develop their basic life skills within a safe and healthy physical and social environment.

The adoption of a comprehensive health promoting school policy is a landmark development. It is also a challenge that we must all work together to rise to, in the interest of our future generations.

I congratulate the organisations and individuals that contributed to compiling this policy and I applaud the Ministry of Education and the schools participating in this initiative for putting it into practice.

Aneesa Ahmed
Minister of Health

December 2004
Acknowledgements

The development of a Health Promoting Schools Policy has been a joint effort from both the Education and Health sectors. We would like to extend our sincere thanks to all educational and health professionals who took part in developing the policy.

First and foremost we would like to express our heartfelt appreciation and thanks to the Honourable Minister of Education, Dr Mahamood Shougy, and the Honourable Minister of Health, Ms Aneesa Ahmed, for their encouragement and commitment with this critical and valuable cause. With their continuous support we will be able to improve the health of whole school communities in the Maldives, especially children and young people.

We owe our special thanks and wish to express our deepest gratitude to the former Director General of the Educational development Centre Ms. Zahiya Zareer, for her guidance and support, and the former Minister of Health, Mr. Ahmed Abdulla, for his commitment to the Health Promoting Schools initiative.

A special thank goes for Dr. Sheena Moosa and Dr Abdul Muhsin Mohamed for their significant input towards the development of this document. In addition, we would like to express our gratitude to the members of the School Health Co-ordinating Committee for their comments and contributions.

Moreover, we would like to extend a very special thank you to Ms. Nina Jutila and acknowledge with appreciation, her tireless effort and devotion in making this programme and policy documents a reality. And we owe a big thank you to Dr Heidi Brown, Ministry of Health, for her immeasurable contributions to the development of the Health Promoting Schools policy.

We also extend our thanks to Ms. Mariyam Maalika, EDC, for her hard work in designing the layout of the policy document.

Last but not least, we wish to thank the staff at the School Health Unit and the Administration Unit of the Educational Development Centre (EDC).

Hussain Rasheed Moosa
Senior Co-ordinator, School Health Programmes
Educational Development Centre

December 2004
CONTENTS

1. Introduction ........................................ 1
2. School Health Programme .............................. 1
3. Health Promoting Schools ............................. 2
4. Policy Context ........................................ 3
5. School Health Policy .................................. 4
6. Aims and Objectives .................................. 5
7. Strategies ............................................. 6
   7.1 Commitment to the school health policy and partnership for health promotion in schools among key stakeholders ... 6
   7.2 School health services ................................. 6
   7.3 School health education .............................. 7
   7.4 Safe and healthy school environment ................. 8
   7.5 Community involvement .............................. 8
   7.6 Capacity building for school health .................. 9
8. Monitoring and evaluation ............................. 9

Appendices ............................................. 10
Bibliography ........................................... 12
Health Promoting Schools

POLICY
1. Introduction

A health promoting school is a global concept relevant to achieving health and education as expressed in the WHO’s goal of “Health for All” and UNESCO’s “Education for All”. These goals are inseparably linked and they can be achieved together. This will require joint action, enhanced co-operation and new partnerships between health and education agencies, non-governmental organisations and the private sector.

Education and health go hand in hand. We know that happy and healthy children learn well. If children are healthy, they can take full advantage of every opportunity to learn. We also know that successful learning supports health. Educated people are better able to respond to their own health needs as well as those of their families and contribute to the well-being of their communities. As we promote health, we can see the significant investments in education yield the greatest benefits.

Health promoting schools recognises the unique opportunity provided by the school setting to promote lifelong learning, health and wellbeing. Good health and successful learning are mutually supportive. The concept of a ‘Health Promoting School’ can help provide vision and direction for creating a framework for policy and actions that can strengthen both education and health.

2. School Health Programme

The School Health Programme was established in 1986 by the Ministry of Education (MoE) in order to give an additional impetus to the health issues related to school children. The programme includes medical screening of children, health education and awareness on various health issues through core curricular and co-curricular activities, and provision of health information for teachers and parents.

A policy level committee, the School Health Co-ordinating Committee, steers the programme with representatives from the Ministry of Education, Ministry of Health (MoH), schools, Faculty of Health Sciences and NGOs. Within schools the programme is planned and managed by a trained School Health Assistant or a School Health Focal Point who is usually a specially trained teacher of the school. The activities are presently carried out mainly in Male’ schools, while the atoll programme is not working to its full potential.

The current aims of the School Health Programme are as follows:

1. To promote healthy lifestyles among students, by providing them with knowledge and skills that will enable them to be responsible and take decisions to protect their own health and total well-being.
2. To improve the school and family environment and to ensure the protection of the health of the students.
3. To make students aware of their health problems and needs.
4. To enhance the role of students in contributing actively and positively to the national health programme.
5. To ensure that the School Health Programme will become an integral part of the overall education programme.
The concept of health promoting schools established by WHO is about helping schools to build and use their entire organisational capacity to improve health among the students, staff, families and community members. A health promoting school is a school constantly strengthening its capacity as a healthy setting for living, learning and working.

A health promoting school creates health by enabling students to care for themselves and for others, to make decisions and have control over circumstances that affect their health, and by ensuring that the society they live in creates conditions that allow the attainment of health by all its members. A health promoting school aims to achieve healthy lifestyles for the whole school population by developing supportive environments conducive to the promotion of health. It offers opportunities for and requires commitment to the provision of a safe and health-enhancing physical and psycho-social environment.

**A Health Promoting School:**

- Fosters health and learning with all the measures at its disposal.
- Engages health and education officials, teachers, 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 in partnership with school/community projects. Opportunities will also be given for health promotion programmes for staff, nutrition and food safety programmes, physical education and recreation, and programmes for counselling, social support and mental health promotion.
- Implements policies and practices that respect an individual’s wellbeing and dignity, provides multiple opportunities for success, and acknowledges 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.
4. Policy Context

Several national policies recognise the health and wellbeing of children and adolescents as an important and essential goal. Furthermore, the importance of school health has been identified as a central setting for improving health as well as education standards in the Maldives.

One of the goals of the Education Master Plan 1996 – 2005 is to provide the nation with problem solving skills necessary to deal with major national concerns including population, environmental, and health concerns. In addition, it notes that the term ‘education’ entails topics such as health, nutrition, and population as part of the curriculum. These topics are designed to prepare citizens to help not just themselves, but their families, communities, and nation, to achieve social and cultural development as well as economic progress.

The vision of education stresses the quality of education, equity by gender and location, and appropriate opportunities for children with physical or learning disabilities.

The Health Master Plan 1996 – 2005 recognises the need to address the health needs of adolescents and especially adolescent girls. Collaboration between the MOH and MOE is highlighted to ensure that young people receive adequate information and education on health issues so that they will be provided with information and skills to enable them to take responsibility for themselves and their family’s health.

Furthermore, emphasis is given to health education directed toward school age children. With empowerment of children as an aim, the strategy also incorporates other aspects within the school such as the school environment, sanitation facilities, school health services, meals at school and a healthy social environment. Activities in these areas are to ensure and encourage lifestyles in school age children that minimise the risk of preventable diseases and ill health.

The expansion of the School Health Programme has been identified as a key strategy to target the needs of children and adolescents. The aim of the strategy is to expand the programme to the atoll schools; to ensure that critical health issues that are not yet incorporated into the curriculum are incorporated into either the co-curricular or curricular activities; and to include training of teachers to provide them with skills needed for integrating health issues into regular class activities and co-curricular activities.

Several policies within the 6th National Development Plan include the health and wellbeing of young people and the promotion of healthy lifestyles. Specially targeted health areas are drugs and substance abuse, HIV/AIDS and other sexually transmitted diseases, life skills, and population education in the secondary school curriculum.

Vision 2020 sees the people of Maldives having greater awareness of and commitment to healthy lifestyles and stresses the participation of young people in the nation’s progress and prosperity.
5. School Health Policy

Health and education are basic rights of every Maldivian child. All children and young people in the Maldives have the right to belong to school communities which are committed to promoting lifelong learning, health and well-being.

For students to be empowered and learn to take responsibility for their own health and to adopt healthy attitudes, skills and behaviors:

- Every school shall be a safe and healthy place for children and staff to learn and work, with an environment that nurtures learning, achievement, and growth of character.
- Schools shall have a duty to help prevent injury, disease and chronic health conditions.
- All students shall be taught the essential knowledge and skills they need to become “health literate” - that is, to make healthy choices and adopt healthy behaviours throughout their lives.
- Each school shall be organised to reinforce students’ adoption of healthy behaviours, and school staff shall be encouraged to model healthy lifestyles.
- School management shall ensure that the nutrition, health and social services children need in order to be healthy and learn are provided either on the school site or in co-operation with other public or community agencies.
- Every school should have a designated person to coordinate school health activities in school.
- Active participation of the whole school community of students, parents, staff and local agencies shall be encouraged.
- Schools shall have a mechanism for the early detection of children with special needs.
6. Aims and Objectives:

**Overall aim:**
- To promote the health of all children and adolescents in schools in the Maldives.

**Objectives:**
- To foster partnership between the health and education sectors.
- To encourage collaboration with community members, resources and services to respond more effectively to the health-related needs of students.
- To increase the awareness of health issues and healthy lifestyles within the whole school community (students, teachers, parents, members of the school community).
- To develop skills and empower students to maintain and improve their health, prevent health problems, and adopt healthy behaviours.
- To provide a safe and healthy physical and psycho-social environment that will promote active participation and healthy wellbeing of the students.
- To promote physical activities and sports that all students enjoy and can pursue throughout their lives.
- To ensure that important health issues and life skills are included in the school curriculum and skill-based health education is encouraged.
- To ensure all school students have access to health services and proper first aid.
- To assist early detection of childhood disabilities among school children.
- To expand school health into the atoll schools.
7. Strategies:

7.1 Commitment to the school health policy and partnership for health promotion in schools among key stakeholders.

The success of the health promoting schools programme demands an effective partnership between Ministries of Education and Health, non-governmental organisations (NGOS) and other health service providers working closely with the school community. The Health Promoting Schools programme needs to be supported by both ministries, and education and health professionals need to work in partnership to support, develop and implement the programme. As such:

- The existing national School Health Co-ordinating Committee (SHCC) provides an opportunity to foster and strengthen this partnership with its broad based membership of health and education sectors, NGOs and school community. SHCC will enhance the policy level and intersectoral support and action. This advisory group will provide advice and direction to the development of the programme. A subcommittee from SHCC will act as the task force for providing technical guidance and putting into practise the decisions of the SHCC.

- At school level, the school will have a designated person for the coordination of school health activities supported by a school health team. The school will have an overall policy on school health promotion incorporating national and local policies and priorities, and provide opportunities to ensure that all staff, parents and students are aware of the policy. The school will be proactive in addressing health issues and will encourage active involvement from students, teachers, parents and the local community.

- The Ministry of Education will ensure that these school curriculum taught daily in every grade will cover critical health topics that are most relevant and common in the country and physical education to motivate and help students maintain and improve their health, prevent disease, and adopt healthy behaviours.

7.2 School health services

An important component of health promoting schools is health services. Facilities to provide first aid, health screening, counselling and access to basic health services are vital for the health and wellbeing of students:

- The school will ensure all students have a health screening on school entry and every 2 years following the initial check up. This can be done by School Health Assistants, trained teachers and/ or in partnership with local health service providers and NGOs.

- A referral mechanism to the health service will be established to provide appropriate care for students and staff with serious illness, emotional health problems and those requiring emergency medical care following injury.
● The school will have at least one staff trained in first aid available during school sessions and a health room with facilities for providing first aid. Clear procedures in providing care, referral and recording of behavioural and medical information will be in place to support students’ health condition, with a respect for confidentiality ensured.

● The school will actively carry out preventive health care activities such as nutrient supplementation, immunisation and counselling, and provide psycho-social support to those with special requirements in partnership with local social services.

● The schools will have a mechanism in collaboration with the health sector and NGOs to access Information, Education and Communication (IEC), other resource materials and expert assistance in carrying out health programmes.

7.3 School health education

Teaching health issues through the curriculum using appropriate teaching methodologies, by prepared and supported teachers, develop knowledge and motivate and help students to maintain and improve their health. It is important that students are active participants in all aspects of school health programmes and health promoting activities. This is an effective and empowering way to help children and young people acquire the knowledge, attitudes, values and skills needed to adopt healthy lifestyles and support health and education for all:

● Schools will teach health topics that are most relevant and common in the country using participatory teaching and learning methodologies that develop knowledge, skills and attitudes, and motivate and help students to maintain and improve their health, prevent important health problems, and adopt healthy behaviours, by well-prepared and well-supported teachers.

● Schools will allocate sufficient time to teach physical education using teaching methodologies that develop knowledge, motor skills, and positive attitudes; that promote activities and sports coordinated with the health components covered in the curriculum that all students enjoy and can pursue throughout their lives.

● The schools will provide opportunities for extra-curricular activities that enable students to learn and practice basic life skills in the context of priority health issues encouraging them to make appropriate decisions regarding health behaviour. Approaches such as peer education and school health clubs will be encouraged, and health promotion and awareness activities by such groups will be facilitated.

● Schools will provide opportunities for students to actively participate in education and training programmes in health areas and carry out health projects.
7.4 Safe and healthy school environment

Physically, socially and emotionally a healthy school environment is essential in order to promote the health and wellbeing of the school community. Safe school grounds, sufficient sanitation and water, a climate of care, trust and respect, social support and mental health promotion are among the areas necessary for providing a healthy school environment:

- Schools will make safe drinking water available for all students and staff and enough toilets for both genders with hand washing facilities that are properly maintained. Schools will have a mechanism for dealing with litter and environmentally safe waste disposal facilities.

- Schools will ensure the physical school environment is clean and safe for students to play and study. Schools will ensure that the classroom environment is health enhancing and facilitate learning through the provision of adequate lighting, air circulation, noise control and seating arrangements that prevent postural problems.

- Schools will ensure that they have support mechanisms in place to assist students who are disadvantaged and with special needs. Schools will have gender, ethnicity and special needs policies in place.

7.5 Community involvement

Promoting positive interaction between the school and the community is fundamental to the success and sustainability of any school improvement process. Schools need the involvement of everyone - students, staff, parents and local agencies, to succeed in promoting learning, health and wellbeing of the school community. Community partnership creates awareness, a sense of collaboration, commitment and communal ownership. Health projects, awareness raising activities and health promotion activities provided not only for students but also for teachers and parents will promote healthy lifestyles within the whole school community:

- Family and community involvement in the life of the school is encouraged.

- Schools will provide opportunities for parents and teachers to actively participate in education and training programmes in health.

- Health projects are carried out in partnership with the wider school community, and local community members are encouraged to expand their role in school health.
7.6 Capacity building for school health

Effective implementation of the school health policy requires adequately trained, capable and motivated staff, familiar with the concepts of health promoting schools and appropriate teaching methodologies. Capacity building for school health at the national level will be the responsibility of the School Health Unit, EDC and at the local level of the schools:

- Training programmes will be organised at school level to develop knowledge and understanding of the school health policy and Health Promoting School Initiative principles and concepts.

- A course for School Health Assistants will be developed in consultation with the Faculty of Health Science and staff will be trained at school level.

- In-service training programmes will be conducted for school staff and peer educators on critical health topics.

8. Monitoring and evaluation

Developing reporting and evaluation mechanisms to monitor and evaluate the development of health promoting schools, including their degree of implementation and effectiveness, is critical. Examining outcomes of activities is essential in order to build evidence-based practice.

The implementation of the school health policy will be monitored and analysed on an annual basis at central level by the School Health Unit, EDC in partnership with ESQIS, MOE and the schools. Monitoring will utilise criteria for health promoting schools, developed in conjunction with this policy and develop outcome indicators such as impact on health knowledge and behaviour. Feedback will be given to participating schools. Evaluation of the policy will be undertaken after 5 years of initiating implementation.

Research to assess programme development and improve school health programmes will be conducted to inform the future development of health promoting schools and related activities.
Maldives Health Promoting Schools Initiative
Success Criteria

The following are the criteria for schools participating in the Health Promoting Schools programme. A school can aim for one level at a time or achieve targets in more than one level at one go. However, the lower level criteria need to be achieved either before or at the same time while aiming for the higher ones.

<table>
<thead>
<tr>
<th>SCHOOL HEALTH POLICY AND PRACTICE</th>
<th>BRONZE</th>
<th>SILVER</th>
<th>GOLD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▶ the school has a School Health Team, co-ordinated by a named person.</td>
<td>▶ parents and students know about the health promotion policy.</td>
<td>▶ health issues are seen as contributing to school improvement and this understanding informs discussions on policy and practice such as being regular items on staff meetings.</td>
</tr>
<tr>
<td></td>
<td>▶ the school has an overall policy on health promotion/ school health.</td>
<td>▶ opportunities are provided for students’ and parents’ views to inform school policy and practice.</td>
<td>▶ the Healthy School Working Group has developed to include the wider community.</td>
</tr>
<tr>
<td></td>
<td>▶ school staff know about the health promotion/ school health policy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>▶ the school has appointed a School Health Assistant or a School Health Focal Point.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCHOOL HEALTH SERVICES</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▶ a medical/ health room exists for sick or upset children</td>
<td>▶ students and staff with serious illness beyond school treatment capacity are referred for proper treatment</td>
<td>▶ opportunities are provided for partnership working with NGOs providing free-of-charge services (e.g. vision screening, dental health check-ups)</td>
</tr>
<tr>
<td></td>
<td>▶ students’ height and weight are recorded at least once a year and parents are informed of the results</td>
<td>▶ at least one member of staff has been trained in first aid</td>
<td>▶ local health services contribute to the school’s health programme, for example by delivering relevant aspects of the health curriculum or providing training for teachers on specific health topics</td>
</tr>
<tr>
<td></td>
<td>▶ students have a health check-up at least every 2 years provided by a school health assistant, trained teacher and/ or inpartnership with local health service providers and NGOs</td>
<td>▶ clear procedures including recording of information are in place to support students’ health conditions (e.g. asthma and anaphylaxis)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▶ national campaigns for vaccination, de-worming and vitamin A are conducted</td>
<td>▶ counselling and support services are available for socially and emotionally distressed students and those with medical problems</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCHOOL HEALTH EDUCATION</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>▶ sufficient time (min. 1h) each week is allocated to health in the overall curriculum</td>
<td>▶ the school’s health education advocates teaching and learning methodologies that encourage students to work together and places an emphasis on active student participation</td>
<td>▶ students have opportunities to learn and practise life skills in problem solving, decision-making, effective communication, interpersonal skills, coping with stress and critical thinking</td>
</tr>
<tr>
<td></td>
<td>▶ students gain a basic understanding, relevant to their age, of nutrition; disease prevention and hygiene; physical activity; safety; emotional health; oral health; sexual health; tobacco and other substance abuse; and environmental health issues</td>
<td>▶ the school provides opportunities for extra-curricular activities such as nutrition programmes or celebration of World Health Day</td>
<td>▶ opportunities are provided for teachers, school health assistants and parents to attend training and education programmes in health areas</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Appendices

SCHOOL HEALTH POLICY AND PRACTICE
- the school has a School Health Team, co-ordinated by a named person.
- the school has an overall policy on health promotion/school health.
- school staff know about the health promotion/school health policy.
- the school has appointed a School Health Assistant or a School Health Focal Point.

SCHOOL HEALTH SERVICES
- a medical/health room exists for sick or upset children.
- students’ height and weight are recorded at least once a year and parents are informed of the results.
- students have a health check-up at least every 2 years provided by a school health assistant, trained teacher and/or in partnership with local health service providers and NGOs.
- national campaigns for vaccination, de-worming and vitamin A are conducted.

SCHOOL HEALTH EDUCATION
- sufficient time (min. 1h) each week is allocated to health in the overall curriculum.
- students gain a basic understanding, relevant to their age, of nutrition; disease prevention and hygiene; physical activity; safety; emotional health; oral health; sexual health; tobacco and other substance abuse; and environmental health issues.
<table>
<thead>
<tr>
<th>SAFE AND HEALTHY SCHOOL ENVIRONMENT</th>
<th>BRONZE</th>
<th>SILVER</th>
<th>GOLD</th>
</tr>
</thead>
<tbody>
<tr>
<td>▶ safe and clean water for drinking and hand washing is available to all students and staff.</td>
<td>▶ the school has a way of dealing with litter.</td>
<td>▶ Members of the whole school community are aware of their roles and responsibilities in ensuring that the school is a healthy and safe environment.</td>
<td></td>
</tr>
<tr>
<td>▶ there are enough toilets for both genders with hand washing facilities, which are regularly cleaned and in a good state of repair.</td>
<td>▶ the school promotes equal respect for men and women, boys and girls, and for people with different ethnic backgrounds.</td>
<td>▶ School provides opportunities for all students to develop basic first aid skills</td>
<td></td>
</tr>
<tr>
<td>▶ the school promotes a protective environment and actively discourages physical and verbal abuse and violence among students and staff and toward one another.</td>
<td>▶ the school provides support and assistance to students who are at a disadvantage such as students with special needs.</td>
<td>▶ The school is addressing safety and/or environmental issues in partnership with the wider community</td>
<td></td>
</tr>
<tr>
<td>▶ attention is paid to creating and maintaining a safe, clean and welcoming environment, e.g. through refurbishment, display boards, planting trees, etc.</td>
<td>▶ school classrooms have adequate lighting, seating arrangements, air circulation and noise control.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMUNITY INVOLVEMENT</th>
<th>BRONZE</th>
<th>SILVER</th>
<th>GOLD</th>
</tr>
</thead>
<tbody>
<tr>
<td>▶ the school informs parents about the health and social issues the children are learning about in school so parents can support these efforts.</td>
<td>▶ peer support for learning is encouraged, such as older students working with younger ones.</td>
<td>▶ student friendly learning approaches such as peer education are being employed.</td>
<td></td>
</tr>
<tr>
<td>▶ students’ active participation in school life is being encouraged.</td>
<td>▶ the school provides health awareness programmes for the whole school community (students, teachers, parents).</td>
<td>▶ training sessions are made available for parents, key health and education personnel of relevant agencies and local community members to expand their role in school health.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▶ the school provides opportunities for students to be actively involved in the life of their school and communities.</td>
<td>▶ opportunities are provided for the school to contribute to the local community.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▶ school health clubs exist.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Bibliography


Towards Health Promoting Schools, 1998. World Health Organisation, Regional Office for South-East Asia, New Delhi: WHO.