

School Health Promotion in Saskatchewan

Saskatchewan in Profile¹

The name Saskatchewan is derived from the Cree word *kisiskâciwanisîpiy* meaning "swift-flowing river." Saskatchewan became a province of Canada on September 1, 1905. Saskatchewan covers 6.5% of Canada, an area of 651,036 square kilometres. Of this, 591,670 square kilometres are land and 59,366 square kilometres are covered by water.

The government of Saskatchewan has a productive relationship with our province's Métis people and the Federation of Saskatchewan Indian Nations (FSIN). The FSIN was one of the first First Nation political organizations in Canada, and the government of Saskatchewan is proud to have played a key role in its formation.

The 2006 census indicated that Aboriginals comprised 14.9% of Saskatchewan's population. Over the next 16 years, the regions with high concentrations of Aboriginal populations are projected to see an increase in the proportion of Aboriginal young adults (aged 20-29 years). Saskatchewan's Aboriginal communities are primarily children and youth. Youth under the age of 19 make up 47.02% of the overall Aboriginal population, compared to 24.12% of youth within the non-Aboriginal population. The median age of First Nations persons in Saskatchewan is 22 years compared to 37.7 years for the non-Aboriginal population.

Saskatchewan has 159,457 students in provincially-funded schools (2008). Within the province's 29 school divisions, 77.96% of the students are in public schools, 21.3% are in separate schools, and .7% are in Francophone schools. School Community Councils are a required component of the school structure. They are advisory in nature and consist of elected parent and community members as well as appointees.

Saskatchewan is the birthplace of Canadian medicare, with a 50-year history of innovation that serves as a model for health systems around the world. The province of Saskatchewan has a single Minister of Health. The Ministry of Health oversees the strategic direction of the province's public health care system by administering and coordinating the delivery of health services. A network of 13 regional health authorities and the Saskatchewan Cancer Agency provide these health services to residents. The health authorities are funded by and accountable to the Minister of Health for the planning, organization, delivery and evaluation of health services provided within their region. The Ministry's key functions are to support service delivery and to create and manage healthy public policy, which provides guidance to regional health authorities.

The priority areas for the Ministry of Health's population health promotion strategy that impact schools and children include introducing school food policy, increasing physical activity, the promotion of mental well-being and substance use and abuse prevention, including tobacco control. Other traditional areas of public health work include sexual health, immunization and communicable disease prevention.

<http://www.gov.sk.ca/Default.aspx?DN=f80c0ebb-f1c6-497e-8bc0-30c215a5441f>
<http://www.gov.sk.ca/about-saskatchewan/>
<http://www.statcan.gc.ca/pub/91-547-x/2005001/4072106-eng.htm>
<http://www.stats.gov.sk.ca/pop/POP%20AGE%20GENDER%202006.pdf>
<Documents&MediaID=18069&Filename=About+Saskatchewan++2007.pdf>

School Community Councils

School Community Councils are working with parents and community members to develop shared responsibility for the learning success and well-being of all children and youth, and facilitate parent, community and youth engagement in school planning and improvement processes.

The establishment of School Community Councils across the province will create a firm foundation for building a new local governance system to address current issues and meet our future needs in rural and urban communities alike. Regulations define the operations of School Community Councils, the new vehicle for parent and community engagement in schools that was proclaimed in legislation on May 19, 2006.

Core Curricula

The Core Curriculum - an integrated framework of components and initiatives that work together within the classroom and school environment to support the learning - promotes the development of the whole child, intellectually, personally, socially, physically, culturally and spiritually.

The Ministry of Education is currently involved in a learning program renewal. All subject areas and all grade levels are being renewed to change from objective-driven to outcome-focused. Health and physical education are two of Saskatchewan's Required Areas of Study that are being renewed (grades 6-9 are posted and scheduled to be implemented in the fall of 2009). Health education will provide teachers with learning outcomes designed to promote students' understandings, skills, and confidences. These are essential to strengthening student's health-enhancing behaviours, improving the quality of their lives and their interactions with others. The outcomes in the physical education curriculum provide teachers with clear direction in how to support children and youth to engage in active living while establishing and maintaining healthy relationships.

School Health Promotion

Priority areas for the Ministry of Health population health initiatives include introducing school food policy, increasing physical activity, the promotion of mental well-being and substance use and abuse prevention, including tobacco control. This work complements the traditional areas of public health, infection control, sexual health, immunizations and communicable and chronic disease prevention.

In an effort to create environments where it is easier for children and youth to choose healthier foods, several initiatives are underway:

- The Ministry of Education, in partnership with the Ministry of Health and the Ministry of Social Services, is in the process of developing direction for school nutrition policies at the school division level.
- Public health nutritionists in Saskatchewan's health regions work directly with schools/school divisions in the development of school nutrition policy.
- The Ministry of Health, in cooperation with public health nutritionists, developed a resource called *Healthy Foods for My School*. This resource is intended to support schools in selecting nutritious foods and can be found at <http://www.health.gov.sk.ca/healthy-foods-for-my-school>.
- The Ministry of Health monitors the percentage of schools that are implementing healthy food/nutrition policies. The percentage of off-reserve schools implementing written healthy food/nutrition policies increased from 4.4% in 2006 to 21.2% in 2007.

The Ministry of Health's two school-based, youth focused tobacco prevention programs, *View and Vote* and the *Graduate Tobacco-Free Initiative*, are components of the government's ongoing campaign to denormalize and reduce tobacco use in Saskatchewan.

- *View and Vote* allows students in grades 6 to 12 from schools throughout Saskatchewan to get involved in choosing social marketing messages from among the best anti-tobacco advertising in the world.
- With the *Graduate Tobacco-Free Initiative*, the Ministry of Health and the Ministry of Education encourage Saskatchewan's grade 12 classes to provide each other with support in their efforts to graduate tobacco free.
- The Ministry of Health Monitors the percentage of schools that are implementing health foods/nutrition policies. The percentage of off-reserve schools implementing written healthy food/nutrition policies increased from 4.4% in 2006 to 21.2% in 2007.

Examples of School-linked Health Initiatives

Working cooperatively with the Ministry of Education, Saskatchewan *in motion* has provided a *Children and Youth Physical Activity Resource Guide* to every in motion school in the province. *In motion* schools self-declare their commitment to providing 30 minutes of physical activity daily over and above physical education. A *Resource for Secondary Teachers* was also created to provide examples of lessons and activities that teachers at the high school level could use to complement their physical education curriculum. Together, the Ministry of Education and Saskatchewan *in motion* are promoting active living through quality physical education programs enhanced by promotion of physical activity beyond curriculum instructional time.

In an effort to cultivate communities where children and youth are valued as partners in school health initiatives, the Ministry of Health and the Ministry of Education have been supporting health regions and school divisions throughout the province to work together to plan and implement initiatives using the 40 Developmental Assets Framework. This strength-based approach has provided a mechanism for intersectoral work in communities in Saskatchewan to actively engage children and youth.

Challenges and Keys to Success

A major challenge in Saskatchewan is one million people living in a large geographic area. In 2006, Statistics Canada measured Saskatchewan's population density at 1.6 people per square kilometre, lower than any other province except Newfoundland and Labrador, with the majority spread over the southern half of the province in small cities and towns. The populist nature of the province and commitment to maintaining strength in rural communities means that there is considerable effort spent in trying to maintain resources in or close to these communities. This has created systems with history of strong local control and high levels of autonomy within the health regions and school divisions.

The economic, social and educational prosperity of First Nations and Metis people is a priority for collaborative action in Saskatchewan. In 2001, the average income for the province's non-Aboriginal population was \$26,914 compared to \$15,961 in the Aboriginal population. The percentage of people with an education attainment of less than high school is much higher in Aboriginal populations than the general population. Saskatchewan's Ministry of First Nations and Metis Relations works with the

province's Aboriginal peoples and other government agencies to advance common interests and improve social and economic outcomes for these populations. The ministry provides leadership within the provincial government to ensure First Nations and Métis priorities and issues are reflected in the development, coordination and implementation of government policies and programs. Both Health and Education have current initiatives to support culturally appropriate programming.

Benefits to JCSH Membership

- The Ministry of Education and the Ministry of Health continue to identify work priorities common among government ministries as a way to better coordinate efforts and to identify Joint Consortium for School Health activities that align with these areas. The school health coordinators meet monthly and there are quarterly meetings at the management level.
- The school health coordinators have established an electronic network to communicate with existing provincial health and learning networks to widely disseminate information about local and national comprehensive school health initiatives. A recent workshop provided by the school health coordinators to the network of provincial public health nursing managers has resulted in requests from two regional health authorities to support their development of comprehensive school health initiatives. Further workshops are planned for other health and education networks in the province.
- Membership in the Joint Consortium for School Health has increased the accessibility and comprehensiveness of provincial and national information on health and learning. This has enhanced the quality of information provided to the Ministers of Health and Education and to people involved in policy, program planning and implementation.

April 2009

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