Whole School Approach: Connecting Schools to Community Resources to Enhance School Health

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Currently, less than half of U.S. children meet national recommendations for physical activity (The Child and Adolescent Health Measurement Initiative, 2016). Furthermore, since the 1970s, childhood obesity rates in the United States have tripled (Fryar et al., 2014). Factors contributing to rises in obesity include poor nutrition, lack of physical activity, poor sleep habits, ineffective community, and neighborhood design (Centers for Disease Control and Prevention [CDC], 2019b), and higher weight status is linked to more time spent playing video games (Vandewater et al., 2004). In response to rising childhood obesity rates, there has been a call to promote children’s health. Schools have been identified as ideal settings for the promotion of health and physical activity because they have existing infrastructure and access to students and communities (Pate et al., 2013). Additionally, children spend more time in school than anywhere else besides their own homes (Pate et al., 2013).
In tandem with schools being identified as key settings for health promotion, school health, public health, and education sectors have made a call for greater collaboration between entities (e.g., health departments) to improve children’s health (CDC, 2019a). From this call, the Whole School, Whole Community, Whole Child (WSCC) model was developed. The WSCC strives to provide a strong, collaborative approach to learning and health that focuses on all aspects of students’ health. The WSCC model focuses on school health and well-being through 10 components: (a) physical education and physical activity; (b) nutrition environment and services; (c) health education; (d) social and emotional school climate; (e) physical environment; (f) health services; (g) counseling and psychological and social services; (h) employee wellness; (i) community involvement; and (j) family engagement (CDC, 2019a).

Within the WSCC model the physical education and physical activity section has another model embedded within the larger WSCC model; the Comprehensive School Physical Activity Program (CSPAP). A CSPAP is model for organizing and planning activities in relation to the promotion of quality physical education and increased physical activity during the school day (CDC, 2013). CSPAP was created by the CDC in collaboration with SHAPE America – Society of Health and Physical Educators and has five strands that are designed to work synergistically to increase children's physical activity levels (CDC, 2013). Physical activity and physical education are important contributors to overall school health, student well-being, and academic success; research in these areas is well documented (Hunt & Metzler, 2017). However, there are other less documented aspects of the WSCC model that are of equal importance as it pertains to improving children’s health. The role of physical education and health education teachers in CSPAP is often explored, so this article broadens its focus to examine how educators and school districts can contribute to the goals of the larger WSCC model.

The goal of the WSCC model is to strengthen a unified and collaborative approach to school health and learning (CDC, 2019a). No single component can make a sustained impact by itself, so in order to make positive change that is sustainable all components, or at least multiple components, must be functioning together (Weiss et al., 2010). Schools are integral to their communities, and the importance of community involvement (part of WSCC model) has been an increasingly researched concept (Hanover Research, 2014). Community involvement involves schools collaborating with community agencies (e.g., vending suppliers, parents, local government representatives, etc.) to provide resources and services to improve school programs and student learning and provide opportunities for students to participate in community-based learning projects (Dikkers, 2013; Kehm et al., 2015). Research shows that family and community engagement can improve school readiness, academic achievement, and graduation rates (Weiss et al., 2010). Some components of the WSCC model seem like a natural fit when it comes to partnering with community resources. For example, health services, counseling, psychological and social services, health education, and even nutrition services all have community ties that schools can connect with to improve childhood health and development. Other components, such as employee wellness, social and emotional school climate, and physical environment, may seem like they are more separate from community connections. However, there are still ways to connect community resources to even these components of the WSCC model (e.g., partnering with local businesses and community members to update playground atmosphere to improve social climate). In the following sections, we will provide information on utilizing community resources to strengthen three specific components of the WSCC model: employee wellness, social and emotional school climate, and physical environment.

**Employee Wellness**

*Problem.* Employee wellness has become an increasingly larger focus area for many companies and organizations as research continues to show a correlation between health risk factors and decreased work productivity, lower staff morale, and increased health care expenses (SHAPE America, 2018). Absenteeism, stemming from policy and culture as well as personal illness and stress, is a major hurdle for school districts to overcome (Griffith, 2017). On average, one in four U.S. teachers miss 10 or more school days per year, whereas an average U.S. worker misses 3½ days per year (Griffith, 2017). Teacher absenteeism has a negative impact on student learning and unnecessarily increases spending on substitute teachers and associated administration (Griffith, 2017). Furthermore, chronic student absenteeism occurs when teachers are more commonly absent (United States Department of Education Office for Civil Rights, 2016). Stress is another major factor in schools that could directly contribute to absenteeism. The American Federation of Teachers found that 78% of teachers reported feeling emotionally or mentally exhausted by the end of the day (Lever et al., 2017).

Studies have found that teacher absenteeism can directly affect student achievement in school, including lower test scores and less engagement in school (Clotfelter et al., 2009; Herrmann & Rockoff, 2012; Raegen, 2012). This is also a problem from an administrative perspective, because having the highest rates of absenteeism of any workplace results in increased payroll expenses sometimes almost double what other employers’ experience (Aldana, 2019).

Conditions such as poor health and nutrition, obesity, and low morale can be significantly improved through an employee wellness program (SHAPE America, 2018). Schools that implement employee wellness programs have shown a decrease in health care costs, improved staff morale and productivity, and a decrease in the likelihood of teachers being absent (SHAPE America, 2018). In addition to being more productive for their schools, healthy school employees serve as excellent role models for students and can help bring more attention to the importance of overall school health (SHAPE America, 2018).

*Strategies and Resources.* SHAPE America (2018) recommends collaborating with family and community partners to strengthen employee wellness programs in schools; for example, inviting nutrition speakers or other health coaches to lead health trainings. The physical education teacher plays a pivotal role in advocating for different health and exercise classes, depending on staff need. Many health insurance companies also provide financial incentives for health and fitness, smoking cessation, and stress relief programs (America’s Health Insurance Plans, 2019). Other strategies could include partnering with vending companies to provide schools with

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healthy snack options in school vending machines or partnering with local grocery stores to provide healthy options in staff break rooms. Often just calling local businesses and asking them if they would be willing to donate specific items can be successful; for example, calling a local grocery store and asking for a trade of advertising space in the cafeteria in exchange for a small discount on produce for school staff.

Providing teachers with community resources for sleep health or partnering with a yoga/mindfulness instructor to help school staff implement mindfulness in their classroom or daily lives also can benefit employee wellness. Mindfulness (i.e., awareness of the present moment so that one can acknowledge and accept difficult situations) has been shown to help individuals cope with clinical and nonclinical problems (Grossman et al., 2004). In a systematic review, Lever et al. (2017) cited several studies (Flook et al., 2013; Frank et al., 2015) that incorporated mindfulness-based stress reduction techniques into schools by either teacher involvement or instructing teachers how to teach mindfulness in their own classes. The first study, by Flook et al. (2013), showed reduction in psychological symptoms and burnout and an increase in self-compassion, and the second study (Frank et al., 2015) showed similar benefits, in addition to improved sleep quality. Furthermore, communicating with a local health club advocating for school employee training in mindfulness techniques (i.e., yoga) is often successful (Ohbknecht et al., n.d.). In return for conducting a training or session, the health club can promote their programs and facilities. See Table 1.

SHAPE America’s (2018) position statement lists (a) school employees, (b) students, (c) school climate, (d) the school budget, and (e) the health care system as clear beneficiaries of school-based employee wellness programs. School climate, specifically the social and emotional aspects, is an important component of the WSCC model to improve because of its direct connection to student achievement and health (Osher & Berg, 2018). In the next section this article will discuss the current and common issues with social and emotional school climate and provide suggested strategies and resources to improve school climate.

Social and Emotional School Climate

Problem. Mental health includes our emotional, psychological, and social well-being and is affected by any conditions that affect a person’s thinking, feeling, mood, or behavior (CDC, 2018). Even with an increased focus on mental health and wellness in recent years, mental illnesses such as anxiety and depression are still common in both children and adults, with some studies stating that one in three to four adolescents are affected by some kind of mental disorder (Merikangas et al., 2010). Suicide is the second leading cause of death among adolescents aged 15 to 19, which often stems from untreated or ignored stress, depression, and/or anxiety (CDC, 2018). Mental illnesses like depression can increase the risk for many health problems, including stroke, type 2 diabetes, and heart disease (CDC, 2018).
### Table 1.
**Tips and Resources for School Health Issues**

<table>
<thead>
<tr>
<th>Model Component</th>
<th>Problem</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee wellness</strong></td>
<td>Absenteeism: Teacher absenteeism is associated with an unhealthy workplace</td>
<td>Pages 12–16 of this literature review outlines several strategies to combat teacher absenteeism (see Knoster, 2016)</td>
</tr>
<tr>
<td></td>
<td>Mental health: Affects teacher burnout and overall health and well-being</td>
<td>This blog provides four ideas to support teachers’ mental health (Tornio, 2018)</td>
</tr>
<tr>
<td></td>
<td>Stress: Contributes to poor job performance and teacher absenteeism</td>
<td>Ten tips for improving teacher well-being (Reach Out, n.d.)</td>
</tr>
<tr>
<td></td>
<td>Sedentary behavior: Increases risk of health conditions and diseases</td>
<td>This blog provides practices for bringing mindfulness into schools (Osten Gerszberg, n.d.)</td>
</tr>
<tr>
<td></td>
<td>Poor nutrition: Contributes to stress and health problems (e.g., obesity, high blood pressure, etc.)</td>
<td>Provides online resources, YouTube dance videos, online games, and interactive games for classroom physical activity breaks (The Colorado Teaching Initiative, n.d.)</td>
</tr>
<tr>
<td><strong>Social and emotional school climate</strong></td>
<td>Stress and anxiety: Negatively affect health and school performance</td>
<td>Provides access to a peer-to-peer online anxiety and depression support group (Anxiety and Depression Association of America, n.d.) Parent, teacher, and student guide to stress symptoms and solutions (Accredited Schools Online, 2020) Provides access to a K–9 reading program that helps students read and reduce stress and anxiety (K9 Reading Buddies of the North Shore, n.d.)</td>
</tr>
<tr>
<td></td>
<td>Physical and emotional safety: Provides a healthy learning environment for students</td>
<td>Page links to a variety of dating violence resources (National Center on Safe Supportive Learning Environments, n.d.-d) Page links to a variety of emotional safety resources (National Center on Safe Supportive Learning Environments, n.d.-b)</td>
</tr>
<tr>
<td></td>
<td>Depression: Negatively impacts a variety of mental and emotional problems</td>
<td>Provides education, training, and support to unite families and help them heal while coping with mood disorders <a href="http://www.familyaware.org/">http://www.familyaware.org/</a></td>
</tr>
<tr>
<td></td>
<td>Bullying: Causes physical or mental injury or discomfort</td>
<td>Provides links for resources on preventing and responding to discriminatory behavior (National Center on Safe Supportive Learning Environments, n.d.-c) Provides access to training resources for creating safe classroom environments (National Center on Safe Supportive Learning Environments, n.d.-a)</td>
</tr>
</tbody>
</table>
Unfortunately, a high percentage of children do not receive the care they need to combat social, emotional, or mental issues early on, which only causes them to grow and become more of a problem later in life (Power, 2003; World Health Organization, 2016). Mental health is just as important to overall health as physical health and, as such, should be a major focus of schools using the WSCC model to improve school health.

**Strategies and Resources.** Studies have shown that the development of a positive social and emotional school climate increases academic achievement, reduces stress, and improves positive attitudes toward self and others (Durlak et al., 2011; Osher & Berg, 2018). Some simple strategies to improve the social and emotional school climate are cited by Osher and Berg (2018), including (a) supportive relationships (e.g., respectful, encouraging peer and teacher relationships), (b) engagement (e.g., sense of belonging, connection with peers and teachers), (c) safety (e.g., physical and emotional), (d) cultural competence (e.g., being aware of implicit bias and privilege and making students of all cultures feel respected, cared for, and accepted), (e) cultural responsiveness (e.g., culturally diverse teaching styles and strategies to engage all students), and (f) challenge and high expectations (e.g., curricula is rigorous, engaging, and aligned with goals). All of these components work together to help students feel supported, respected, and challenged to reach new goals academically (Osher & Berg, 2018). Physical education class is always a great opportunity to build and strengthen relationships through teamwork and conflict resolution practices. The social and emotional climate of the school is then enhanced as students learn to respect and support each other through modeling from their teachers (Osher & Berg, 2018).

There are many curriculum programs that offer a supportive structure for teachers to follow that encourage supportive relationships and responsiveness; for example, Performance Excellence for All Kids Learning Systems by Rogers (1994). Performance Excellence for All Kids provides recommendations of continuous positivity and encouragement through simple strategies, such as giving students the freedom of choices within their learning (i.e., the type of writing instrument they use; sitting where they like, within reason; different options for the same assignment; etc.) or offering support stations (i.e., solution and answer stations or example stations; Rogers, 1994). Additionally, adding mindfulness training has been shown to reduce the impact of bullying, helps students with learning disabilities, helps students with high emotion and stress (Leland, 2015), and can decrease negative affect and increase metacognition in children (Vickery & Dorjee, 2016).

Community organizations can provide connections to resources for students, families, and schools to enhance both learning and the social and emotional environment. The School Community Partnership for Mental Health (SCPMH) put together by the Youth Mental Health Connections is a fantastic resource for any school or community leaders to reference when searching for ways to improve social and emotional school climate, specifically related to barriers faced by students dealing with mental illness or trauma (SCPMH, 2015). Two of the programs (Wraparound and REACH) partner with schools to provide services to the most serious mental health, social, and behavioral needs, and community mental health providers partner with the schools to provide individual and family therapy, coordinate alcohol and drug lessons and programs and developmental disabilities services, and participate in parent teacher conferences and other events to offer appropriate mental health education and consultation (SCPMH, 2015). Though these resources are specific to the SCPMH program, the SCPMH model provides a strong general structure for other school districts and community agencies to follow when developing programs aimed at improving school health. Additionally, outside of school resources (counselors, nurses, paraprofessionals, etc.) local mental health clinics, psychologists, psychiatrists, and online resources (www.apa.org, teenmentalhealth.org, mentalhealth.gov) are all beneficial for schools to use when looking to improve mental health. Making these resources easily accessible to students and reducing the stigma of getting professional help should be a goal of schools and their community partners (Chen et al., 2016; Power, 2003; World Health Organization, 2016).

Schools can also partner with community organizations to promote social and emotional growth through a variety of other programs. These programs could include (a) summer programs; (b) tutoring and/or mentorship services; (c) counseling, social

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**Table 1. Continued**

<table>
<thead>
<tr>
<th>Physical environment</th>
<th>Lack of resources: Negatively impacts students’ ability to learn and be healthy</th>
<th>Provides a wide variety of grant opportunities for teachers and administrative personnel <a href="http://www.grants.gov">http://www.grants.gov</a></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Poor air, lighting, water, etc.: Negatively impacts students’ mental and physical health</td>
<td>Provides strategies for optimizing the use of current resources for student learning (Wallace Foundation, n.d.)</td>
</tr>
<tr>
<td></td>
<td>Noise and distractions: Impacts ability to learn and contributes to stress and anxiety</td>
<td>Access to a model program for the state school environmental health guidelines (U.S. Environmental Protection Agency, n.d.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provides links and examples of school improvement grants that are available (U.S. Department of Education, n.d.)</td>
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<tr>
<td></td>
<td></td>
<td>Blog that suggests techniques for quieting a noisy classroom (Finley, 2014)</td>
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<tr>
<td></td>
<td></td>
<td>Company website that explains how and provides resources for reducing classroom noise through classroom design (BFX Classroom Design, 2018)</td>
</tr>
</tbody>
</table>
skill-building, or mental health services; and (d) academic enrichment or arts programs, among others (Collaborative for Academic, Social, and Emotional Learning, 2019). K9 Reading Buddies of the North Shore (2019) is one such program. K9 Reading Buddies provide therapy dogs to at risk students to help them relax and learn to read. Other similar programs have been and can be used at the middle and high school levels to reduce stress and anxiety.

Additionally, the American Camp Association (Westrich & Pope, 2018) maintains that summer camp provides a great out-of-school setting where students can learn social and emotional skills. Schools should connect with camps and clubs in their area and offer opportunities to promote their programs for students.

Another way that social and emotional school climate can be affected is through the physical environment of the school. Even seemingly small things like classroom or playground organization (e.g., using relaxed seating or “buddy benches” on playgrounds), lighting (e.g., soft or reduced fluorescent), or noise disturbances can have a large impact on student achievement and health and wellbeing (Fisk et al., 2016).

Physical Environment

Problem. The physical environment of a school has a significant influence on the academic learning, health, and safety of students, staff, and visitors (Fisk et al., 2016). Issues such as poor ventilation, lack of resources, noise disturbance, substandard lighting, and an unhealthy or hazardous environment can affect student performance, attendance, and behavior (Environmental Protection Agency [EPA], 2019). Physical environments in poor condition have been associated with lowered student performance in reasoning skills, English, typing, and math, as well as a higher rate of absenteeism; conversely, well-maintained facilities show increased academic performance (EPA, 2019).

In addition to lowered student achievement, the physical environment of a school can directly affect school staff and student health (Fisk et al., 2016). A variety of contaminants in the air (i.e., dust, allergens, chemicals, etc.) can precipitate allergic reactions or illnesses (Fisk et al., 2016). One study that measured the effects of lowered ventilation rates (VRs), air quality, and the effects of temperature in classrooms noted that “VRs in classrooms routinely fail to meet the minimum requirements specified in standards, often by a wide margin” (Fisk et al., 2016, p. 484). Lowered VRs, poor air quality, and inadequate temperatures in the classroom significantly increased the prevalence of illnesses such as asthma symptoms; ocular, nasal, and throat symptoms; headache; and fatigue (Fisk et al., 2016).

Strategies and Resources. The EPA has created a Model K–12 School Environmental Health Program that outlines five components of environmental health issues that schools should address. These components include (a) practicing effective cleaning and maintenance, (b) preventing mold and moisture, (c) reducing chemical and environmental contaminant hazards, (d) ensuring good ventilation, and (e) preventing pests and reducing pesticide exposure (EPA, 2019). The EPA also provides several other resources to help with the enhancement of structure and comfort for classrooms, such as lighting, acoustics, and energy efficiency (EPA, 2019).
According to the WSCC model, the physical environment of a school includes not only the school building and its contents but also the surrounding land (CDC, 2019a). There are policies in place to ensure that schools comply with certain standards of environmental quality (EPA, 2019); however, there are additional resources available to improve the physical environment in areas such as health, safety, and atmosphere for students. Community partners could offer financial support or voluntary contributions to meet the goals of the intervention plans. For example, if the intervention plan was to update the paint and signs of an elementary school building, the request could be brought to the school’s parent–teacher association, then advertised as a charitable community opportunity through an organized event. Prospective partners could include parents, childcare centers, businesses, health service providers, environmental organizations, community services experts, etc. (Wargo, 2003). Other options include grant opportunities for school improvement through the Department of Education or other educational resources.

Websites with grants and additional information include the following:
- http://www.grants.gov
- www.grantsalert.com
- U.S. Department of Education (n.d.)
- National Center for Education Evaluation and Regional Assistance (n.d.).

The physical educator can also have a positive impact on advocating for a school’s physical environment; for example, leading a lesson that requires students to conduct a safety assessment for the school and then offering those results to the parent–teacher association (or another influential group). Another suggestion would be to have students bring their recommendations to school administration and/or the school board for implementation. This has the potential to teach students important lessons about advocacy. The more students are involved in the improvement of their school, the more they will value its care.

### Conclusion

Obesity rates, mental health illnesses, and emotional health and well-being still pose a significant problem for today’s adolescents (CDC, 2018, 2019b). Schools are the ideal setting to begin combatting these health issues, which is why the WSCC model was created, to help schools collaborate on improving the overall health of their students (CDC, 2019a). The goal of this article was to provide strategies for connecting community resources to three components of the WSCC model: (a) employee wellness, (b) social and emotional school climate, and (c) physical environment. Utilizing family and community resources is an incredibly important part of the WSCC model and is integral to the learning, development, and health of students (CDC, 2019a). Though this article certainly does not encompass all of the strategies for engaging community partnerships, it does provide educators, school administrators, and researchers some ideas for how to effectively engage families and communities in their district to promote school health.

### References


