Creating Policies to Support Healthy Schools: Policymaker, Educator, and Student Perspectives

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Initiatives focused on improving aspects of students’ well-being in schools—such as addressing childhood obesity, preventing bullying, and restricting schools’ use of exclusionary discipline—are gaining momentum. However, such efforts are often implemented in silos, without recognition of their interconnections. To advance the common goal of improving social, health, and academic outcomes for all students, coordinated efforts that integrate multiple components of healthy school environments are needed. The Centers for Disease Control and Prevention’s Whole School, Whole Community, Whole Child (WSCC) model presents a framework illustrating the interconnected nature of 10 elements of a healthy school environment: health education; physical education and activity; nutrition environment and services; health services; counseling, psychological, and social services; social and emotional climate; physical environment; employee wellness; family engagement; and community engagement.

Although state laws and regulations address many elements of the WSCC model, these policies are fragmented and are not yet integrated to best support the whole child.

This study was built on the need to better integrate the WSCC framework in policy and the recognition that policymakers prioritize issues they see as critical given finite resources. The study aimed to identify policy opportunities to promote the overall WSCC framework through interviews and focus groups with state policymakers (e.g., state board of education members, state legislators), educators (e.g., teachers, school administrators, school health professionals), and students.

Key Findings

• Across stakeholder groups, emotional and mental health and school climate and culture emerged as key priority issues that are foundational to healthy schools. Although stakeholders discussed a broad range of topics related to healthy schools and touched upon every component of the WSCC model, all three stakeholder groups identified emotional and mental health and school climate and culture most frequently as priority areas. Stakeholders also noted that addressing other student needs (e.g., nutrition, physical activity and others) often requires addressing mental health issues first.
• **Many stakeholders viewed other elements of healthy schools as less pressing or already addressed.** Stakeholders suggested that while all students would benefit from support addressing mental health, social-emotional skills, and school climate, other student needs (e.g., safety, food insecurity) can vary dramatically by school and district.

• **Schools struggle to address student trauma, according to educators and policymakers.** While many in both groups focused on the impacts of poverty, immigration status, and community violence on youth, several educators emphasized that students, regardless of their socioeconomic level, have significant emotional and mental health needs and may experience trauma. Several students also referenced traumatic events such as school shootings and student suicides, although they never used the term “trauma.”

• **Educators and policymakers focused on stressors outside of school, while students emphasized school-related sources of stress and anxiety.** Policymakers cited addiction issues as a challenge for students and their family members, and educators frequently emphasized the impact of parents’ mental health or chronic health issues on students. Both educators and policymakers drew explicit connections between parental addiction, or other types of parental hardship, and student attendance. In contrast, many students attributed high levels of stress and anxiety to demanding academic environments.

• **All stakeholder groups emphasized the need for increased availability of trained and qualified school personnel to provide support for students’ emotional and mental health needs.** Educators and policymakers mentioned the need for more funding to hire additional support staff such as counselors, social workers, and mental health professionals. Educators and students said support staff should be able to dedicate more of their time to working directly with students instead of spending time on paperwork and administrative tasks. However, students said they are often more likely to seek emotional support from teachers than from other school support staff, because they find teachers more approachable, or easier to connect with based on their existing relationships. Policymakers and educators stressed the importance of training teachers how to address students’ social and emotional needs and interact with students who have experienced trauma.

• **Educators and policymakers view social-emotional skill development as an important step to address student needs.** Educators and policymakers viewed social-emotional skill development as critical to developing students’ “coping strategies” for effectively dealing with their own mental health issues, as well as “what’s going on in the world nowadays.” They cited gun violence, fear of deportation, and other forms of community trauma as concerns for students today. Though policymakers and educators discussed the importance of social-emotional skills for academic, career, and life success, this surfaced as the highest priority topic for educators in particular. Students mentioned social-emotional skills only once, in the context of “life skills” that could help them better cope with stress. Stakeholders noted that social-emotional skill development could also help improve school climate and student relationships.

• **Stakeholders recognize the impact of teacher stress and anxiety on students.** Educators, policymakers, and students identified teacher stress and anxiety as an issue that impacts teacher relationships with students and other staff. Policymakers noted that teachers become frustrated when they do not have the necessary training to meet the breadth of students’ needs. Educators highlighted the stress teachers face as a result of making low salaries while their job duties continue to increase. Policymakers and educators said teachers need more professional development and training to fully address the breadth and depth of student needs. Students and educators noted that teachers experience stress and said their relationships with students suffer when they do not feel supported by their administrators.
Recommendations and Next Steps

The findings from this study have clear implications for advocates working to promote any aspect of healthier school environments. Although students, educators, and policymakers touched upon nearly every aspect of healthy schools as defined by the CDC’s Whole School, Whole Community, Whole Child framework, only a handful of topic areas emerged as areas of need. Specifically, all stakeholder groups focused on mental health and school climate as clear leverage points in need of additional policy attention that can provide the foundation for achieving healthier schools more broadly. To this end, we offer healthy schools advocates and policymakers the following recommendations for using the findings in this report:

• **Identify the linkages between mental health and/or school climate and other aspects of healthy schools.** Just because stakeholders are focused on these two elements of healthy schools does not mean that advocates working to improve nutrition, physical education, or health services in schools cannot make progress in those areas. Instead, consider mental health and school climate as entry points for demonstrating the interconnected nature of healthy schools. For example, given connections between nutrition, physical activity, and behavior, momentum around reforming school disciplinary policies may also be a platform for increasing attention to standards related to school meals, recess, and movement in the classroom.

• **Recognize that students, educators, and policymakers discuss mental health and school climate differently, and tailor messaging appropriately.** Although the stakeholder groups all coalesced around these topics, specific priorities varied. For example, while policymakers shared high-level concerns about student mental health—discussing, for instance, the negative effects of social media use, and the research surrounding adverse childhood experiences—educators zeroed in on specific types of trauma that students may experience and the need for training in trauma-informed practice. Students, on the other hand, emphasized the need for supportive relationships and increased awareness, among both teachers and other students, of mental health issues to reduce the stigma associated with seeking help. Build buy-in from these groups by focusing on each group’s priorities and adopting their language when describing these domains.

• **Build coalitions across healthy school domains.** Stakeholders clearly understood the interconnections between healthy school domains; however, they also described the uncoordinated nature of these issues (e.g., school climate and school health) within their schools. Given policymakers’ need to prioritize among competing issues, due to limited time and resources available to address all issues simultaneously, healthy school advocates are better positioned when they bring a unified message, rather than competing to prioritize any given domain.