

STATEMENT FOR THE
INTEGRATION OF
Health and Education

Schools, working in partnership with communities, parents, and agencies have always been an integral part of efforts to promote health, safety, and equity. These school-based and school-linked efforts have evolved into many distinct but overlapping multicomponent approaches. Yet despite significant progress and improved effectiveness, the implementation, maintenance, and sustainability of these multicomponent approaches has been problematic.

Inability to overcome the challenge of maintaining and sustaining these multifaceted approaches has led to this call for a dramatically different approach whereby health and social programs would be truly integrated within the core mandates, constraints, processes, and preoccupations of the education systems. While there have been numerous studies, statements, and reports calling for greater alignment of these two key sectors, what is now clear is that we should not be seeking alignment of health and education, but rather integration of health and social development within education systems.

A deeper analysis of the goals, functions, and current operations of school systems is needed to determine the most practical, pedagogical, and political strategies whereby health and social priorities can be truly embedded within education. This should include dialogue in a variety of cultural, economic, and geographic settings to better understand the various school systems and their contexts. Health and social policies, must be adapted, crafted, and integrated into the policies, processes, and practices of education systems. In short, health must find its cultural anchor within the education system.



WHY SEEK INTEGRATION WITHIN EDUCATION SYSTEMS?

Health and education are symbiotic. What affects one affects the other. The healthy child learns better just as the educated child leads a healthier life. Similarly, a healthier environment—physically as well as socially-emotionally—provides for more effective teaching and learning.

The health sectors in many jurisdictions have developed strong multifaceted school health programs, particularly when compact geography, unitary governance structures, or strong leadership is in place. However, many other health systems now face significant challenges just to maintain the resources provided to health promotion overall, so their ability to support comprehensive approaches to schools is often reduced or narrowed to a select number of issues.

Yet targets or policies that focus only on one set of outcomes undermine the success and sustainability of interventions. Too often we have seen initiatives that compete with educational outcomes, as opposed to complementing them. Even within the health sector, schools often experience different strategies competing with each other rather than collaborating with or complementing each other. As such, educators and policymakers often view health and other social programs as an “add-on” to their own core responsibilities.



WHY NOW?

The World Health Organization (WHO) and the health sector have adopted a position favoring the HiAP initiative. The participants at a recent WHO health promotion conference (Helsinki 2013) issued a formal invitation to all sectors to take up that HiAP initiative. This consensus statement and invitation from educators reciprocates with an invitation to health to integrate within education.

New research on ecological and systems-based approaches to school health promotion and social development now offers new insights and opportunities. This new understanding is congruent with current educational trends and research suggesting that school-based management and other forms of local leadership are ultimately more appropriate to the 21st century. A renewed partnership with education will help to take advantage of this new knowledge and trends.



CONSIDERATIONS FOR THE HEALTH SECTOR

This statement is an invitation to the health sector to start a dialogue and take subsequent action as part of an overall multisector approach.

1. The health sector needs to seek integration within the education system—not education’s adoption of health priorities. The health sector must find its cultural anchor within education and integrate its processes and outcomes.
2. Health system officials, decision makers, and researchers should examine and better understand via dialogue led or facilitated by educators the core mandates, constraints, attributes, processes, and characteristics of educational systems in order to better integrate within them.
3. Health and social sectors join the education sector in focusing on the growth and development of the whole child rather than directing attention and resources only toward specific diseases, behaviors, or conditions as separate or siloed entities. Disease intervention must occur as required but needs to be housed in an overall health and development, or salutogenic, framework, refocusing attention on a settings-based approach.
4. This realignment of health and other sector efforts should be based on a systems-based, organizational development approach focused on capacity building and continuous improvement.

To find out more and to view the signatories go to www.ascd.org/gshs.

The development of this statement has been a multiorganizational and multisector effort led by ASCD and the International School Health Network (ISHN).

