### **HEALTH PROMOTING SCHOOLS**



## **COMMITTEE MEETING**



Thursday, May 30<sup>th</sup>, 2024

SCHOOL BOARD OFFICE - Board Room: 4:15 - 6:00 pm

REPRESENTATIVES	COMMITTEE MEMBERS							
<b>Board of Education</b>	Lisa Guderyan		Wayne Broughton, alternate					
Indigenous Education	Christina Verhagen		<mark>Simone</mark>	mone Gauthier				
ARC Programs	<del>Cassy Lukey</del> , <mark>Courtr</mark>	ey Hannig	<mark>an</mark>					
COPAC	Kristina Grant	Leslie Atv	<mark>lie Atwell</mark>		Camila Biffard			
COPVPA	Bryce Owens	Robbie Fi	obbie Franklin		Derek Markides			
СОТА	Mary Hope	Lois Aeck	ois Aeckersberg		Kevin Robinson			
CUPE	George York	Jen Nethercote, alternate			nate			
District Student Council (DSC)	Mila Kresina	October / Janfield	\ngell-	Grace Sweet		Cadence Quigley		
HPS Coordinators	Andrea Locke		Ali	Alicia Kudryk				
Interior Health Authority (IH)	Virginia Bowman	Leah Perrier						
Child and Youth Mental Health (CYMH)	Ping Flynn							
Sexual Health Educators	Nicole Weremy	Leanne Woodrow Jenny Rabinovitch Emily Rice			Emily Rice			
District Staff	Rhonda Ovelson	<mark>Sherri Ro</mark>	<mark>che</mark> , <mark>Ta</mark>	unya Shaw (SEL)	Ang	gela Kreklewetz		

# AGENDA MINUTES- DRAFT

	//OEMB/MINIOTES BIX///	I
1.	<ul> <li>WELCOME &amp; ACKNOWLEDGEMENT</li> <li>We acknowledged that the meeting was being held on the traditional, unceded territory of Syilx people.</li> <li>We welcomed members attending their first meeting of the year:         Wayne Broughton – Trustee, Board of Education         Taunya Shaw- Social and Emotional Learning (SEL)         Courtney Hannigan- work with ARC, working in schools now.         (Cassy is graduating today/finishing her Master's- congrats!)         Jenny Rabinovitch- Sexual Health Educator         Emily Rice- Sexual Health Educator         We accomplished a lot this year and are recognizing this with a nourishing meal and plant gift (succulent).</li> <li>We all came up with a metaphor of how "Health/health promotion is like a succulent plant because"         <ul> <li>Responses included: resilience; we take food security for granted and teachers take it for granted (this is a stressor for kids) plant requires nurturing to grow; plant can only go for so long if you want it to thrive; succulents- small goals can make big changes (ex. little bit of watering); give life because they're producing babies; takes a lot of time to</li> </ul> </li> </ul>	Rhonda
	grow- same with changes/ideas with health promotion.	
2.	AGENDA;	
	2.1 Adoption of May 30, 2024 Agenda- adopted- Derek, second- Kevin.	All
3.	<ul> <li>Adoption of March 14, 2024 Minutes- adopted- Ping, second- Leah.</li> <li>Briefly reviewed last meeting where we spent time discussing physical wellbeing and did learning with Leah and Andrea on changes in language etc. in regards to stigma free environments and building healthy relationships with food. We had great conversations (dissonance) about the new public messaging re: "building healthy relationships with food." Rather than using terms that place value on food like "healthy or unhealthy", it encourages food exploration in younger grades.</li> <li>Comment- The rainbow fruit kabobs and flavoured water served tonight have been used in classrooms where we have co-planned and co-taught food literacy lessons with teachers in elementary schools- water tasting for kids-strawberry/mint flavoured, mindfulness lesson, as kids guess the flavour and focus on the tastes. Andrea hopes to share lessons with more teachers next year.</li> </ul>	All

### 4. SUB-COMMITTEE ACTION ITEM(S)

Meeting Intention: to act as a resource for and receive input from the school-based liaison(s) interested in health promotion

We reviewed our meeting intentions including committing to our own growth and learning; assisting in implementation; taking whatever we learn back to constituents.

Andrea, Alicia & Rhonda

- 4.1 Update(s) on Action Item(s): HPS School Liaison Bulletin
  - Liaisons are working in schools now and the structure has been successful; CUPE and COTA
    colleagues have taken up interest; we have been putting out monthly bulletins. April= mental
    wellbeing. May= social wellbeing (Focusing on giving resources out to liaisons, in prioritized
    areas)
  - In June we are hoping to get more stories back from the liaisons, two-way sharing.
  - Trying to draw liaisons back to our website and district health plan/strategic plan.
    - Comment- It would be helpful to add <a href="https://erasereportit.gov.bc.ca/">https://erasereportit.gov.bc.ca/</a> to our list of social well-being resources.
  - Information needs to be "just-in-time" so we're trying different methods.

# 5. DISTRICT HEALTH PROMOTING SCHOOLS PLAN ACTIVATE

Meeting Intention: to assist in the implementation, review and evaluation of the District Health Plan (see planning templates: <u>Physical, Mental</u> and <u>Social</u> Wellbeing)

Rhonda

- 5.1 Review co-created actions/tasks to guide committee's work for Mental Wellbeing goals and priority areas
  - September- did data walks, looked at data around the 3 areas; we've narrowed into priority
    areas. Last meeting we took a deeper dive into physical well-being and tonight we are diving
    deeper into mental wellbeing.
  - Reviewed our GOALS- to ensure every student is learning how to care for their mental wellbeing
    and how to support others' wellbeing- helping their friends. To ensure every student is able to
    access resources and support to manage their mental wellbeing.
  - Reviewed rationale for these goals:
    - Even our youngest learners are struggling with mental health issues, according to EDI, MDI 52% of youth feel unhappy; 33% of youth feel that their mental health needs are unmet; 38% of youth screened diagnosed with depression, 40% with anxiety. Youth are recognizing mental health issues and asking for more time to talk about it.
  - Information/ updates provided on supports and initiatives currently in place:

**Sherri and Taunya's Presentation**- SEL Team and School Counsellors

- takes a village to raise children, which is why partnerships are so important; school counselors, contract work with many partners etc.
- School counselor misconception- they don't actually do therapeutic services; they help to provide skills to meet <u>success in their learning</u>, self-esteem, responsibility for needs, regulation, navigate anxiety and friendship skills and conflict/peer pressure; help to do referrals etc.
- Contracted services- reduce barriers for families, some families can't get to sites with services, and others don't feel safe doing so, i.e. going to a school instead of the community might feel safer.
- Open parachute- with government funding to support mental wellbeing they purchased <u>Open Parachute</u>; it is a mental health resource for teachers, gr 6-9, with many videos featuring BC youth, prompts classroom discussions, don't need a MA level counsellor to facilitate.
- Taunya (SEL with Rutland) has partnership with UBCO and SD23, sessions with teachers, 30 seats, SEL modules, 10 hrs. of instructional learning to teach teachers SEL practices, theory to practice, will offer again next year. Usually offered in Feb and May. Let Taunya know if you want more information.
- There's so much evidence-based research that for educators delivering SEL that it
  impacts their own wellbeing. If educators are well, children will be well. Nice way of
  supporting the educators, as well.
- Comment- SEL is embedded throughout our curriculum- helps build relationships with students.
- Question- Are the modules for teachers and CEA, can advocates join? Invitations go to All Staff, open to everyone.

Alicia, Courtney, Sherri & Taunya

- Comment- At the last board mtg they had a presentation of using SEL in math class, very successful, included testimony from kids, how it helped with groupwork etc., talk to each other about math problems.
- Comment SEL is reflected in the principles of learning from <u>Nature of Learning</u> (OECD) research social nature of learning and emotions are integral to learning as well as mirrors the <u>personal and social core competencies</u> of the BC Curriculum.

#### Alicia and Courtney- Substance use literacy, HPS and ARC

- Doing a lot of work with substance literacy supporting teachers, in schools. One project
  was with Glenrosa- grade 9 science teacher, taught 4 lessons on substance literacy, Alicia
  helped teacher look at what resources would be best for the school, filter resources,
  Alicia co-taught with the teacher, used IH's Safety First lesson- 2/15 lessons, learning as
  we go.
- CNB Principal reached out to Cassy, designed lesson for CNB, Cassy presented on vaping for grade 6's, model worked great, 1 off presentations aren't usually the best method, want to build relationships with teachers.
- Biggest concern for teachers is what questions are going to be asked by students- tough questions. They held a Lunch and Learn to review some possible questions and responses
- RSS and RMS had a Stomp Day on Tuesday. This is a student-lead event, Indigenous community leads group, information on tobacco vs commercial tobacco, teach grade 6's, culture in medicine, drumming station, traditional games, weaving and painting stations, great leadership from the kids.
- We watched a video of Stomp from last year; showed difference between tobacco and commercial tobacco- kids teach kids. Kids also teach others what they can do to avoid substance use (pro-social activities.) Video is posted on PHE Canada. Evaluating the next steps for this program.
- o Comment: Stomp uses positive peer influence vs negative, which is usually highlighted.
- Comment: Vaping is a big issue- comes up every meeting- concerns, and amount of use.
   Posters to be put up in schools.
- Comment: Alicia sent out packages to schools through liaisons, with posters and information; it is up to the schools how the information is distributed.

### **ACQUIRE**

Meeting Intention: to commit to continuous growth and learning in regards to Health Promoting Schools research and practice

5.2 Learning Presentation – Anxiety & Substance Literacy (slide deck attached)

Ping nce

- **Ping-** CYMH Clinician, helps children with moderate- severe anxiety issues; brings confidence navigating the system, and helping youth.
- o anxiety disorders are the most common mental health disorders according to WHO
  - 1/3 of population impacted by mental illness in lifetime
  - 40% of youth screened meet criteria for generalized anxiety
  - We watched a short video on anxiety- fight/flight/freeze response, caused by amygdala overreacting, can create avoidance and/or hyperarousal behaviours; understanding why we have anxiety is important in learning how to manage it.
  - Anxiety is the PERCEIVED threat; fear is a response to a specific threat.
  - Anxiety is generally less intense but more sustained.
  - Parts of the brain involved in anxiety: Amygdala, dorsal anterior cingulate cortex (amplifies the anxiety signify), ventromedial prefrontal context (dampens the signal.)
  - Biopsychosocial model- genetics, physical health, nutrition, thoughts, emotions, behaviours, stress, trauma, and environment- all part of the etiology of anxiety.
  - How do we know if it's clinically significant? Look at abnormality and dysfunction.
     Out of character? How does it impact their ability to function?
- Ping reviewed the 7 types of anxiety disorders- to make them be disorders, they have to be pervasive.

<u>Generalized Anxiety Disorder</u>- persistent worry, 6 mos. duration or more. <u>Social Anxiety Disorder</u>- excessive worry about being embarrassed, humiliated in social setting, 6 mos. duration or more

<u>Separation Anxiety</u>- developmentally inappropriate fear of being without loved one, > 4 weeks duration

<u>Panic Disorder</u>- worry of having of panic attack, intense surge of fear and discomfort, 1 mos. duration

<u>Specific Phobia</u>- intense irrational fear of objects or situations (in the following categories: animals, natural/environmental, blood-injection, situational, other), 6 mos. duration

<u>Agoraphobia</u>- excessive fear or worry of being trapped, helpless, ex. public transit, enclosed space, open space, 6 mos. duration

- <u>Selective mutism</u>- inability to speak in situations when able physically able to.
- o CBT and anti-anxiety medicine- evidence based, most effective when combined
- CBT triangle, A- Affect, B- Behaviour, C- Cognitions, disrupt at any point. An example of behaviour is exposure to the threat. Cognition- reframing, testing thoughts.
- Ping showed a variety of resources- self-help tools, anxiety BC website, Kelty mental health, mental health apps- ex. Mindshift. Counseling- Foundry- walk in counseling, hard to navigate the system, CMHA Bounce Back program, private sector options. Parent support and group therapy- individual therapy may not necessarily be how all children feel seen. Need to support the family, as well as the kids. All fully funded.
- SCARED- self assessment tools, MASC (paid)
- o Comment: Would be helpful to have workshops for middle school kids.
- Comment: Take a Hike- program for middle school, first to pilot as middle school, staff and mental health clinician, health living outdoors, provide teacher and partnership with YMCA with counselor, debilitating mental health issues, runs out of George Pringle gym.
- If you feel like you're stuck, call Ping to springboard ideas, or receive help in the moment etc.
  - Comment: Parents are eager to learn, psychoeducational sessions for parents would be helpful.
  - Comment: Spike in number of grandparents raising grandkids, a session geared for grandparents would be helpful.

### **APPLY**

Meeting Intentions: to represent constituent groups by communicating, educating and providing feedback to the committee; role-modeling HPS principles and practices; and, providing leadership and guidance to constituent members

to support, participate and contribute to the business of the committee

#### 5.3 Reflection

- Used post-it notes- shared/recorded accomplishment(s) that have had impact on youth in our schools.
  - HPSC's <3 HPS liaisons to spread health and wellbeing education
  - Food in schools and highlighting the importance of food and nutrition on overall wellbeing
  - Leveraging partnerships and utilizing the expertise of community groups
  - Building network of HPS liaisons
  - Framing priorities to create road map
  - Expansion of food programs to increase accessibility to food
  - o Analyzing important surveys to begin to make change that matters
  - Staying committed to the health of schools and the community
  - o Reduced stigma and fear around health topics that matter to students
  - Substance literacy in middle schools
  - o I think that there has been an increase in the committee's work being brought back to the school level. More knowledge = better community in schools.
  - The push for substance use literacy and learning and the enthusiasm from students and teachers to learn and share
  - Connection and communication has enhanced health education for kiddos
  - Connecting kiddos to resources
  - I think the bulletins are useful for teachers- especially having links to applicable tools they can use. More schools limiting phone usage helps social wellbeing.
  - Although HPS teachers have done a great job supporting schools with kids in the knowmany schools need reminders of the importance to teach kids consistently through the year.
  - Holistic approaches to child and adult wellbeing through an inquiry and dialogical lens as
    is being modelled here feels like the proactive way forward. Thank you.
  - Adding 2 sexual health lessons for grade 11 students this year. Students are eager to learn more about consent, contraception, healthy relationships, etc.

ΑII

	0	I like that we have liaisons- hope to have one at every school.					
	0	It's great to have so many partners in this circle wanting to help students with mental health and wellbeing.					
	0	The HPS bulletin promoting health and providing access to resources to district staff.					
	0	The Foundry Bus parking by my school 1x/week making mental health services available					
	_	to students.					
	0	Love the bulletins! Getting the word out of all the fabulous resources and support.					
	0	Setting up the HPS liaisons has opened up an exciting avenue for 2-way communication					
		between the HPS committee and the SD23 schools.					
	0	Being part of creating the health plan					
	0	Collaborating with teachers to plan/execute food literacy lessons					
	0	Provide learning opportunities to discover the benefits of increased physical literacy and					
		how this translates to overall wellbeing (mental and social)					
	0	Recognize the need for discussion/support for our students, but recognizing how					
		important this is for our staff, as well.					
	0	HPS volunteers at each site and HPS bulletins					
	Some comments shared verbally with large group (all comments found here-insert link):						
	0	Love the bulletins- thank you for them, helpful tools, sharing stories.					
		Increased the communication within the schools- getting to the school level.					
		Building community.					
	0	Evidence based approach to planning, setting goals and taking action is appreciated.					
	0	HPS coordinators, celebrate them, how much they accomplished in support/part time					
		roles.					
6.	ADJOURNMENT						
	Next Meeting Da		Rhonda				
	Save the Dates for 2024-25-						
	September 26th, November 21st, February 20th, April 17th and June 12 <sup>th</sup>						
	September meeting- Social, belonging and connection, Renee Opperman has been invited.						