SHE monitoring report 2020:

Country-specific results of Ireland

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Background and methodology

The Schools for Health in Europe network foundation (SHE) monitors the implementation of school health promotion in SHE member countries. This country-specific report summarizes the results of the SHE monitoring survey in Ireland. The survey was conducted in September 2020 and the findings represent the perceptions of the SHE national coordinator on school health promotion and the Health Promoting School (HPS) approach in schools in this country. The survey is based on existing questionnaires and information sources including the SHE Mapping Survey 2019¹, the SHE Rapid Assessment Tool² and the fifth SHE Factsheet³. The complete survey is available at www.schoolsforhealth.org.

School health promotion and the HPS approach in Ireland

In this report, a distinction is made between **school health promotion** and the **formal HPS approach** in schools. SHE aims to strengthen the formal HPS approach among all schools in the European Region. However, not all schools are formally working according to the HPS approach or are working under the specific HPS label. Despite this, many schools do take efforts to promote the health of their staff and pupils with concrete school health promotion activities.

School health promotion

This relates to various health promotion activities in schools. These activities can focus on multiple health-related themes such as physical activity and mental health, for example in the curriculum or in the policy of the school. This can, but does not necessarily, imply that the school has a structured and systematic plan according to the principles of a formal health promoting school.

Formal HPS approach

According to SHE, the formal HPS approach relates to schools that implement a structured and systematic plan for the health, well-being and the development of social capital of all pupils and of teaching and non-teaching staff. This is characterized as a 'whole school approach' and these schools actively involve pupils, staff and parents in the decision-making and implementation of health promoting interventions in the whole school system.⁴

All schools in Ireland implement health-related activities and formally work in accordance to the principles of the HPS approach.

Table 1 shows the estimated percentage of schools involved in school health promotion and schools working according to the formal HPS approach in Ireland. There is no information about preschools, but all other types of schools implement health promotion activities and formally also work with the formal 'whole school approach' defining schools as Health Promoting Schools.

Table 1. The estimated percentage of schools involved in school health promotion and working according to the HPS approach in Ireland

Health promotion in schools	% of schools	Health Promoting Schools (HPS)	% of schools
Preschools	-	Preschools	-
Primary schools	100%	Primary schools	100%
Secondary schools	100%	Secondary schools	100%
Vocational schools	100%	Vocational schools	100%

In Ireland, there are national or regional guidelines, standards or indicators for schools to support schools in becoming a HPS. The tools shared by SHE, such as the SHE online school manual and the rapid assessment tool, are not used by the schools in this country. Schools work with the principles of the HPS using their own resources and tools. The national government, Department of Education, Wellbeing, Policy and Framework, makes funding available from the national health promotion budget. Many agencies support the implementation of health promotion policy by providing schools with training and resources. There is currently no national monitoring and evaluation program for health promotion in schools.

The rest of this report summarizes the results of aspects of the HPS approach that are already part of schools in Ireland.

Creating a healthy and supportive environment in schools in Ireland

The HPS approach as defined by SHE, targets the following six components: 1) healthy school policies, 2) the school's physical environment, 3) the school's social environment, 4) individual health skills and action competencies, 5) community links, and 6) health services.

Table 2 shows the implementation of the HPS components in schools in Ireland. It shows that components 1 to 4 are all required and/or recommended by national policies. Further, a combination of measures enhances the link between schools and community stakeholders (component 5) and with local and regional health services (component 6) in the majority of schools in the country.

1. Healthy School Policies



Required by national policies

- Health promotion is part of the schools' educational goals and of the curriculum
- Schools have a written policy on students' and/or staffs' health and wellbeing
- Schools apply a whole school approach to promote health and wellbeing
- The SHE values are part of the schools' approach to health promotion

2. Physical environment



Recommended by national policies

- School facilities such as the playgrounds, classrooms, toilets, canteens and corridors are student-friendly, safe, clean and promote hygiene for all students. These are appropriate with regards to students with special needs
- School physical activity facilities and canteens follow national safety and hygiene standards
- School canteens, food shops and vending machines offer food and drinks that follow national food standards
- The routes to schools are safe and designed to encourage students to engage in physical activity (e.g., cycling or walking)
- School buildings are kept at a comfortable temperature, are well-lit and ventilated

3. Social environment



Required by national policies

- Health professionals (doctor/nurse), social worker or psychologist) are involved in individual and whole school health promotion and work together with the school management to integrate health topics into the school curriculum and policy
- Educational professionals (e.g. pedagogists) are available to pupils, parents and teachers to optimize education for example by mapping the support needs of pupils and translate these into action-oriented advice for teachers.
- Support services and accommodations are in place at schools for students with special learning, developmental and physical needs
- Schools have systems for identifying and referring students with special needs to outside professionals if those needs exceed the scope of expertise within the schools

Recommended by national policies

- Spaces in the canteen, playground, classrooms and corridors are organized to promote student socialization and wellbeing

Individual skills and action competences



Recommended by national policies

- Healthy eating is part of daily life in schools
- Physical education and other forms of physical activity, e.g. activity breaks, are part of daily life in schools
- Teaching/learning methods that enhance mental health and wellbeing are part of daily life in schools
- Health literacy and action competence are integral parts of the schools' policies
- Schools have clear rules that promote healthy behaviors

- Health education and health promoting activities are included in after-school programs
- Trusted persons (e.g. class tutor/mentor) are available for students to privately share concerns or thoughts

5. Community Links



6. Health services



Applies to most schools

- Schools arrange for parents of students to become active participants in the school community
- Schools establish connections with local partners such as sport and youth clubs, community or regional health agencies, counselling services, health insurances, local shops, etc.
- Schools arrange regular student visits to local partners/stakeholders to encourage healthy eating, physical activity, the development of emotional/ social health, etc.
- Schools involve all key people in the community in co-creating health promotion action plans at schools

Applies to most schools

- Health professionals are involved in health promoting activities at a school
- There is a psychologist available to support students

SHE core values

The HPS approach is based on the core values equity, sustainability, inclusion, empowerment and democracy. Figure 1 shows the SHE national coordinator's estimation of how much the SHE-core values⁴ are reflected in schools in Ireland on a scale from 1 (not reflected at all) to 10 (reflection to the highest degree). All values score 8 or higher.

Figure 1. Generalization of the representation of the SHE-core values in schools Ireland

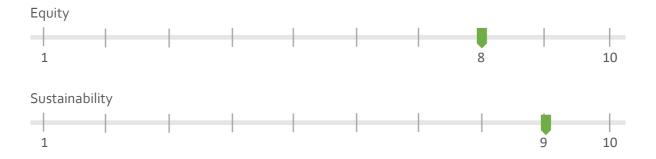
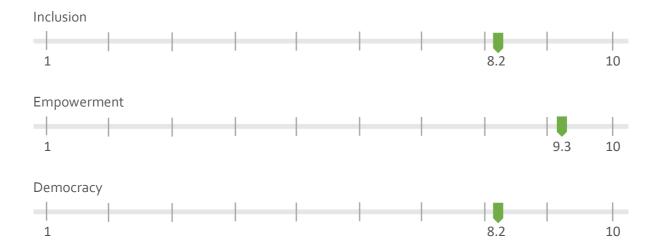


Figure 1. continued



Implementation of health promotion in schools

Schools in Ireland integrate health promotion as specific subjects and in several (cross-)curricular and non-curricular educational activities and projects, in which subjects are multi-disciplinary interlinked. Transversal competences are reinforced by all teachers. Health issues are addressed in more than one subject at a time, creating a holistic approach that integrates health into all aspects of the school. Active learning strategies, such as group discussions, student investigations, experiential methods, action-oriented approaches and participatory co-creation activities, are used to involve students while addressing health issues in schools. Figure 2 shows the most commonly addressed health promotion issues in schools in the country. The list is quite diverse ranging from life-style related topics such as healthy eating and smoking to sexuality.

Figure 2. Most common HP issues in schools in Ireland



Tailored translation of the HPS approach on seven spectra in schools in Ireland

The tailored translation of the HPS approach creates a variety of choices regarding the optimal implementation of the HPS approach in a specific context. This variety can be illustrated by seven different spectra. A detailed explanation of each spectrum can be found in the fifth SHE factsheet³. Figure 3 shows the estimation from the SHE national coordinator of Ireland of the general placement of schools on the seven different spectra.

Figure 3. The Health Promoting School spectra in Ireland



This refers to the level of involvement of stakeholders (e.g. pupils) in the decision-making and implementation of the HPS approach



The place on the spectrum refers to the number of HPS core-component that are addressed in the HPS-approach



This relates to the development of the new or the adoption of existing interventions resulting from the HPS approach



This relates to the level of disruptiveness of interventions as part of the HPS approach. Non-disruptiveness refers to small changes that can smoothly enter, while disruptiveness means large health promoting changes that can create a positive disruption in the school system.



This relates to the compatibility of interventions within the school curriculum. An intervention can be added-on to the current core curriculum obligations as an additional task, or added-in the current curriculum becoming part of the curriculum without reducing time from core curriculum obligations.

Figure 3. continued



This refers to different types of research designs that can be used to evaluate the HPS approach going from controlled designs with a strong focus on internal validity to action-oriented approaches focusing on external validity and understanding the implementation process in schools.



This refers to the dissemination of the HPS approach at a local level characterized by an optimal fit with each school context, or at national level, reaching more pupils.

Facilitators and barriers to health promotion in schools

An exploration of the important potential barriers for the implementation of health promotion in schools in Ireland by the national coordinator concluded with 3 facilitating factors and 4 barriers. These results are reported in table 3.

Table 3. Perceived facilitators and barriers for school health promotion according to the national coordinator

Facilitators	Barriers
 Collaboration between the health and education sectors, intersectoral collaboration The national educational policies and curriculum It is mandatory for schools to promote health and well-being 	 Health promoting is considered an additional activity Schools lack understanding about the benefits of participating in HPS activities Teachers are or feel overloaded Actions, good practices and standards should be clearly defined

COVID-19 pandemic

Since spring 2020 the COVID-19 pandemic drastically altered school health promotion due to the country-specific measures for combating the pandemic. The government of Ireland, Department of Education, provided support in reopening schools, including supporting well-being in pupils and teachers. A major challenge was the closure of schools due to COVID-19.

References

- SHE Mapping survey 2019. Available from: https://www.schoolsforhealth.org/resources/materials-and-tools/mapping-she
- 2. SHE Rapid Assessment Tool. Available from: <u>https://www.schoolsforhealth.org/resources/materials-and-tools/how-be-health-promoting-school/rapid-assessment-tool</u>
- 3. SHE the fifth SHE Factsheet. Available from: https://www.schoolsforhealth.org/resources/materials-and-tools/fact-sheets
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If you need dialogue about the health promotion school and its key concept and activities, please contact the national or regional coordinator in your country. He or she will be happy to help you.

Find the coordinators here:

www.schoolsforhealth.org/about-us/member-countries

If your country doesn't have a national coordinator, contact the helpdesk in the SHE secretariat on email: info@schoolsforhealth.org



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