

SHE monitoring report 2020:

Country-specific results of Latvia

Schools for Health in Europe Network Foundation

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Schools for Health in Europe



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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 Latvia. 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 Latvia

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

It is unknown how many schools actually implement health promoting activities in Latvia (Table 1). Further, less than 25% of all school types in the country have joined the national HPS network.

Table 1. The estimated percentage of schools involved in the national HPS network and schools working according to the HPS approach in Latvia

Health promotion in schools	% of schools	Health Promoting Schools (HPS)	% of schools
Preschools	Unknown	Preschools	<25%
Primary schools	Unknown	Primary schools	<25%
Secondary schools	Unknown	Secondary schools	<25%
Vocational schools	Unknown	Vocational schools	0%

In Latvia, many separate institutions work with different health-related questions in schools. The status "Health Promoting School" is granted only to schools that have joined the national HPS network and have met specific predetermined criteria. There is no direct funding available for schools, but state funding is allocated to the Centre for Disease Prevention and Control (CDPC) of Latvia. This organization is responsible for the coordination of the national HPS network and supports schools by providing training to school coordinators, implementing educational activities for children and by developing informative materials. Tools shared by SHE, such as the SHE online school manual and the rapid assessment tool, are used by the CDPC. Shortly, school representatives will also be trained to use these materials. In addition, the CDPC monitors and evaluates the performance of schools that are part of the national HPS network.

The rest of this report summarizes the results of aspects of the HPS approach. Most results relate to schools that are part of the national HPS network, however some may be applicable to other schools as well.

Creating a healthy and supportive environment in schools in Latvia

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 that are part of the HPS network in Latvia. 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 about half of the schools in the country.

Table 2. The implementation of the Health Promoting School components in schools that are part of the HPS network in Latvia

<p>1. Healthy School Policies </p> <p>Required by national policies</p> <ul style="list-style-type: none"> - Health promotion is part of the schools' educational goals and of the curriculum - Schools have a written policy on students' and/or staff's health and wellbeing <p>Recommended by national policies</p> <ul style="list-style-type: none"> - The SHE values are part of the schools' approach to health promotion 	<p>2. Physical environment </p> <p>Required by national policies</p> <ul style="list-style-type: none"> - 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 - School buildings are kept at a comfortable temperature, are well-lit and ventilated <p>Recommended by national policies</p> <ul style="list-style-type: none"> - Students and staff have access to school facilities for physical activity outside school hours - The routes to schools are safe and designed to encourage students to engage in physical activity (e.g., cycling or walking)
<p>3. Social environment </p> <p>Required by national policies</p> <ul style="list-style-type: none"> - 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 - 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 <p>Recommended by national policies</p> <ul style="list-style-type: none"> - Spaces in the canteen, playground, classrooms and corridors are organized to promote student socialization and wellbeing 	<p>4. Individual skills and action competences </p> <p>Required by national policies</p> <ul style="list-style-type: none"> - 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 <p>Recommended by national policies</p> <ul style="list-style-type: none"> - 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

Table 2 continued

<ul style="list-style-type: none"> - 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 - 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. 	
<p>5. Community Links </p> <p>Applies to about half of the schools</p> <ul style="list-style-type: none"> - Schools arrange for parents of students to become active participants in the school community <p>Applies to less than half of the schools</p> <ul style="list-style-type: none"> - 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 	<p>6. Health services </p> <p>Applies to most schools</p> <ul style="list-style-type: none"> - There is a school nurse available to support students <p>Applies to about half of the schools</p> <ul style="list-style-type: none"> - There is a social worker available to support students - There is a psychologist available to support students - There is a pedagogist available to support students <p>Applies to less than half of the schools</p> <ul style="list-style-type: none"> - Health professionals are involved in health promoting activities at a school

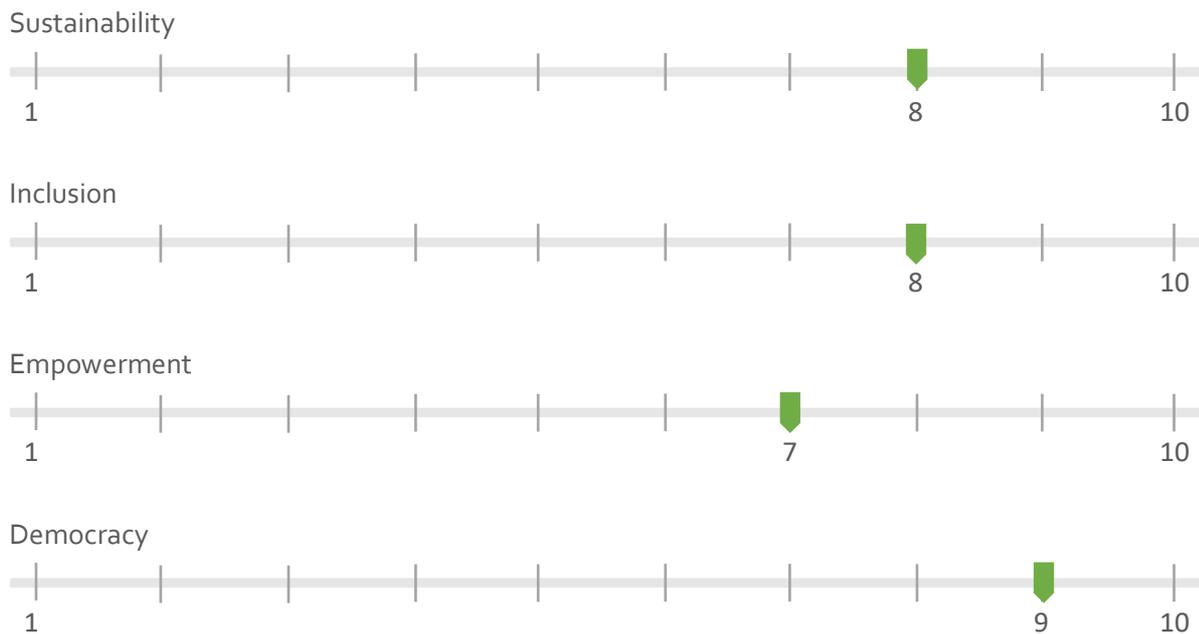
SHE core values

The formal 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 Latvia that are part of the HPS network on a scale from 1 (not reflected at all) to 10 (reflection to the highest degree). Empowerment scores lowest with a 7, the other values all score 8 or higher.

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



Figure 1. continued



Implementation of health promotion in schools

Schools in Latvia integrate health promotion in several curricular and non-curricular educational activities and projects, in which subjects are interlinked. 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. A combination of passive (such as one-way lectures) and active (such as group discussions and peer education) learning strategies are used to involve students in addressing health topics in schools. Figure 2 shows the most commonly addressed health promotion issues in schools in the country. The list is quite diverse ranging from lifestyle-related topics such as physical activity and smoking, to sexuality and social competencies.

Figure 2. Most commonly addressed HP topics in Latvia



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

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 SHE national coordinator's estimation of the general placement of schools on the seven different spectra.

Figure 3. The Health Promoting School spectra in Latvia



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.



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.

Figure 3. continued



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 Latvia by the national coordinator identified 5 common facilitating factors and 6 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
<ul style="list-style-type: none"> - Collaboration between the health and education sectors, intersectoral collaboration - Sufficient funding - Active involvement of students - Support from the school management - Education, training and support for health school coordinators 	<ul style="list-style-type: none"> - Lack of time and energy of school staff - Lack of funding - Health promotion is considered an additional activity - Schools lack understanding about the benefits of participating in HPS activities - Teachers are or feel overloaded - Low health literacy level of parents

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 Latvia closed schools during a national lockdown, and teachers supported home education via online learning. The Ministry of Education developed a tool for online learning via a TV channel, which especially worked well for primary schools.

References

1. SHE Mapping survey 2019. Available from: <https://www.schoolsforhealth.org/resources/materials-and-tools/mapping-she>
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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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