

SHE monitoring report 2020:

Country-specific results of Lithuania

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 Lithuania. 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 Lithuania

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

Almost all schools in Lithuania implement health-related activities. However, the number of schools formally working in accordance to the Health Promoting School approach is much lower.

Table 1 shows the estimated percentage of schools involved in school health promotion and schools working according to the formal HPS approach in Lithuania. Almost all schools implement health promotion activities. However, less than half of the schools (<50%) formally work per '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 Lithuania

| Health promotion in schools | % of schools | Health Promoting Schools (HPS) | % of schools |
|-----------------------------|--------------|--------------------------------|--------------|
| Preschools | 100% | Preschools | 26-50% |
| Primary schools | 100% | Primary schools | <25% |
| Secondary schools | 100% | Secondary schools | 26-50% |
| Vocational schools | 76-99% | Vocational schools | <25% |

In Lithuania, there are national guidelines for becoming a HPS. These guidelines also describe criteria for schools to join into the national HPS network. Moreover, several tools are available that support schools in becoming a HPS. There is no national funding available, but municipalities provide funding to schools based on local capabilities and priorities. 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 Lithuania. These schools are not necessarily formal Health Promoting Schools.

Creating a healthy and supportive environment in schools in Lithuania

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 Lithuania. It shows that components 1 to 4 are all required and/or recommended by national policies. Further, a combination of measures enhance the link between schools and community stakeholders, but this applies only to less than half of the schools (component 5). Local and regional health services (component 6) are connected to the majority of schools in the country.

Table 2. The implementation of the Health Promoting School components in Lithuania

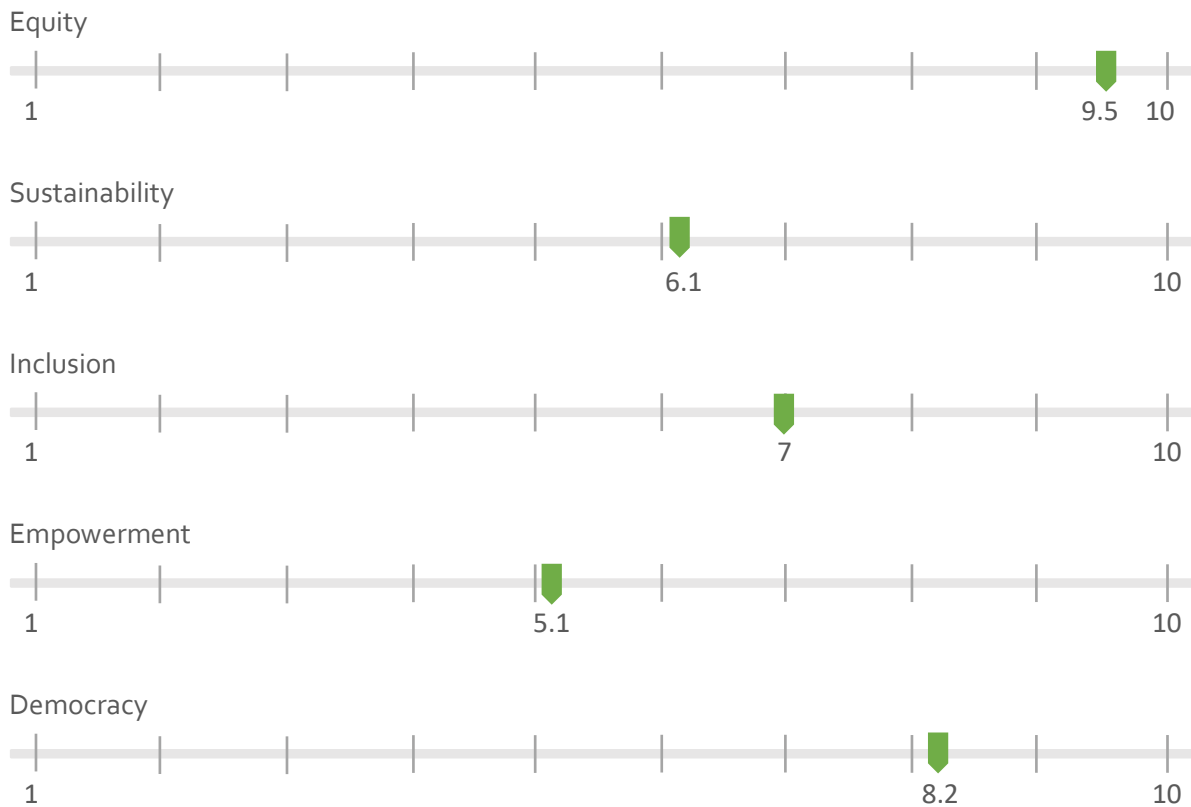
| | |
|---|--|
| <p>1. Healthy School Policies</p>  <p>Required by national policies</p> <ul style="list-style-type: none"> - Health promotion is part of the curriculum <p>Recommended by national policies</p> <ul style="list-style-type: none"> - Health promotion is part of the schools’ educational goals - Schools have a written policy on students’ and/or staffs’ health and wellbeing | <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 |
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| | |
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| <ul style="list-style-type: none"> - Schools apply a whole school approach to promote health and wellbeing - The SHE values are part of the schools' approach to health promotion | <p>machines offer food and drinks that follow national food standards</p> <ul style="list-style-type: none"> - 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 education and health promoting activities are included in after-school programs <p>Recommended 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 <p>Not mentioned by national policies</p> <ul style="list-style-type: none"> - Trusted persons (e.g. class tutor/mentor) are available for students to privately share concerns or thoughts | <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 - Health literacy and action competence are integral parts of the schools' policies <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 - Schools have clear rules that promote healthy behaviors |
| <p>5. Community Links</p>  <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 all schools</p> <ul style="list-style-type: none"> - Health professionals are involved in health promoting activities at a school <p>Applies to most 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 |

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 Lithuania on a scale from 1 (not reflected at all) to 10 (reflection to the highest degree). The core values equity and democracy scored highest, the core values sustainability and empowerment lowest.

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



Implementation of health promotion in schools

Schools in Lithuania integrate health promotion in curricular and non-curricular educational activities and projects. Several active learning strategies are used to involve students while addressing health topics in schools, such as discussion strategies, student investigation and action-oriented approaches, but also passive strategies are used, such as one-way lectures. Figure 2 shows the major health promotion topics that are addressed in schools in the country. The list is quite diverse ranging from lifestyle related topics such as healthy eating and smoking to hygiene and the prevention of violence.

Figure 2. Most addressed HP Topics in schools in Lithuania



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

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 Lithuania

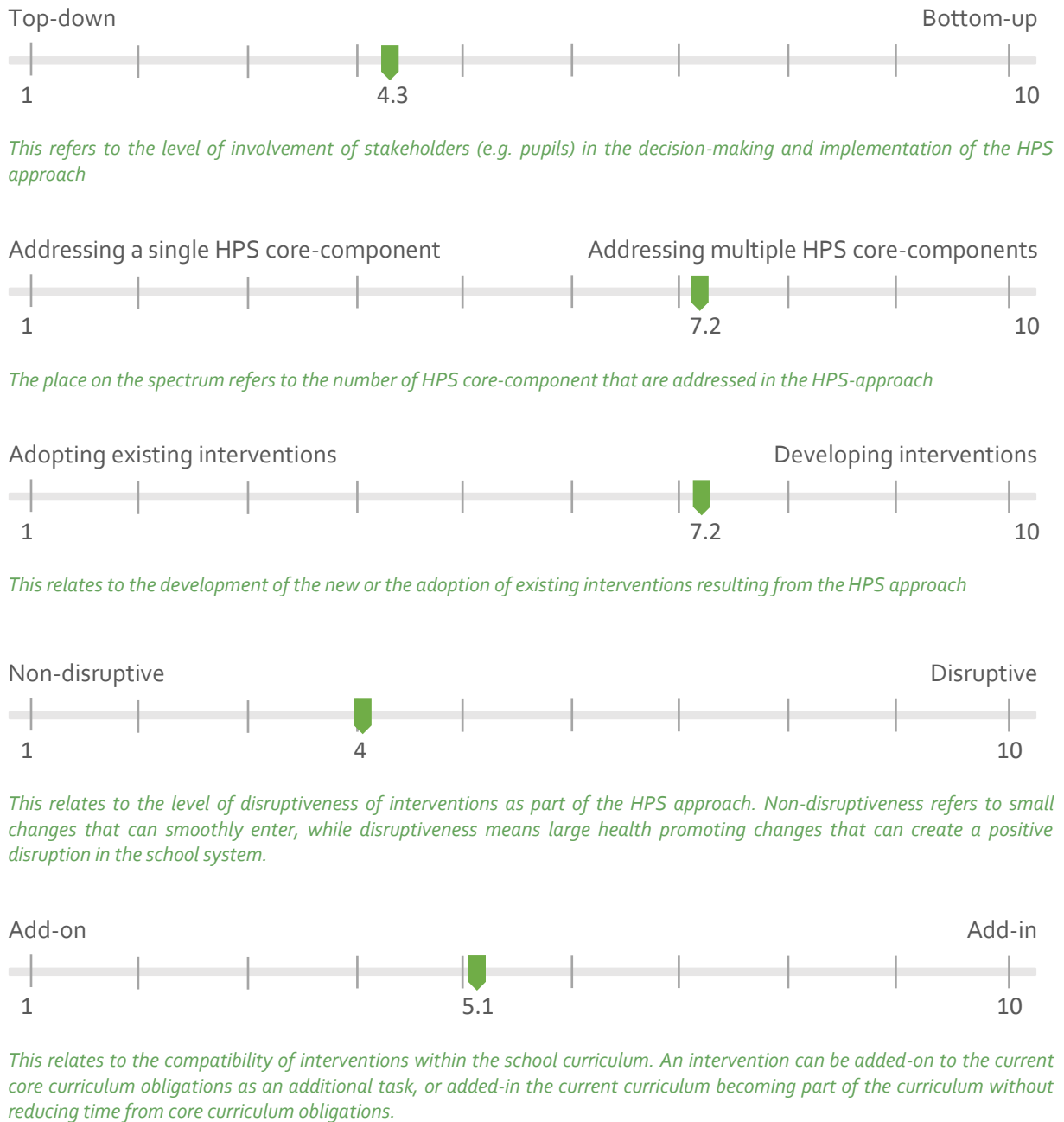


Figure 3. continued



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

The survey explored significant barriers and facilitators for the implementation of health promotion in schools in Lithuania. It identified 8 facilitating factors and 7 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 - The national educational policies and curriculum - Active involvement of students - Motivation of teachers - Support from parents - Participatory processes - Exchange of good practices - Existence of supporting guidelines | <ul style="list-style-type: none"> - Lack of time and energy of school staff - Lack of funding - Functioning like volunteers - Many simultaneous "competing", not collaborative, projects in schools - Health promotion is considered an additional activity - Lack of support from parents - Teachers are or feel overloaded |

COVID-19 pandemic

Since spring 2020, the COVID-19 pandemic drastically changed school health promotion due to the country-specific measures for combating the pandemic. The government of Lithuania closed schools during a national lock-down, and students received online education. A major challenge for schools was to organize online education during this period, especially for children with special needs. Since schools have reopened, it has been challenging to keep the flow of students separate, to practice social distancing, to organize meals for small groups, and physical activity for school classes.

References

1. SHE Mapping survey 2019. Available from: <https://www.schoolsforhealth.org/resources/materials-and-tools/mapping-she>
2. SHE Rapid Assessment Tool. Available from: <https://www.schoolsforhealth.org/resources/materials-and-tools/how-be-health-promoting-school/rapid-assessment-tool>
3. SHE the fifth SHE Factsheet. Available from: <https://www.schoolsforhealth.org/resources/materials-and-tools/fact-sheets>
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5. SHE core values. Available from: <https://www.schoolsforhealth.org/concepts/she-values>

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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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