

# Developing School Health Education Advocacy Skills Through College Personal Health Courses

David Birch, PhD<sup>1</sup>; Michele Wallen, PhD, MPH<sup>2</sup>; Elizabeth Chaney, PhD, CHES<sup>3</sup>

The authors<sup>1,2</sup> are affiliated with the Department of Health Education and Promotion at East Carolina University. The author<sup>3</sup> is affiliated with the Department of Health education and Behavior at the University of Florida. Contact author: David Birch 3106 Carol Belk Building, East Carolina University, Greenville, NC, 27858. Email: [birchd@ecu.edu](mailto:birchd@ecu.edu). Contact author: Michele Wallen, 3204 Carol Belk Building, East Carolina University, Greenville, NC, 27858. Email: [wallenm@ecu.edu](mailto:wallenm@ecu.edu) Contact author: Elizabeth Chaney, FLG 23 University of Florida, Gainesville, FL 32611. Email: [bchaney@ufl.edu](mailto:bchaney@ufl.edu)

## ABSTRACT

Local advocacy has been presented by numerous individuals as a strategy for improving comprehensive school health education. One overlooked group for advocacy instruction is college students. *Objectives:* At the end of this lesson, college students will be able to identify the characteristics of a quality school health education program and summarize the impact of the program; identify strategies, using those available, to advocate for school health education; and demonstrate effective advocacy for school health education. *Target Audience:* College students enrolled in personal health classes.

**KEY WORDS:** advocacy, personal health courses, and school health education

## INTRODUCTION

Local advocacy has been presented by numerous individuals as a strategy for improving comprehensive school health education.<sup>1-4</sup> Defriese, Crossland, MacPhail-Wilcox and Sowers<sup>5</sup> believe that health educators must “sell” health education to communities. Wiley,<sup>6</sup> in describing approaches to promote school health education, posits that “health champions” must be developed in local school districts.

Various advocacy strategies have been proposed for preparing school health education majors for comprehensive school health education. Birch<sup>7</sup> and Wycoff-Horn<sup>8</sup> have presented specific instructional techniques for preparing undergraduate school health education majors for local advocacy efforts. Hodges and Videto<sup>9</sup> described the use of service learning as a strategy for developing advocacy skills in students enrolled in a master’s level program in school health.

Other individuals, beyond school health educators, have been identified as potential local advocates for school health education. These individuals include community members, elementary and secondary school students (future community members), parents, physicians, and school board members.<sup>4,6,10</sup>

One overlooked group for advocacy instruction is college students enrolled in personal health courses. Although no data exist relative to student enrollment in personal health courses, it can be safely speculated that thousands of students across the United States are enrolled in these courses each academic year. All of them soon will be members of local communities (with local school districts), and some will become parents. All members of a community can benefit from effective comprehensive school health education, not just parents of current school-age children.

The purpose of this article is to present advocacy instructional activities developed for implementation in one 50-minute session of a college personal health course. In addition, a culminating activity and optional enrichment activities are presented for completion outside of class. Because many of the instructors of these courses address the individual’s role in promoting community health, devoting minimal time to the development of advocacy skills for school health education is logical course content. Addressing advocacy provides an opportunity to address *National Health Education Standard # 8*, “Students will demonstrate the ability to advocate for personal, family and community health.”<sup>11</sup> Although these standards were

developed for students at the Pre K – 12 grade levels, instruction at the college/university level can provide reinforcement to previous instruction or cover content not previously addressed in high school health education.

**TARGET AUDIENCE:** College students enrolled in personal health classes.

### ***OBJECTIVES***

By the end of this lesson, students will be able to:

- identify characteristics of a quality school health education program.
- summarize the potential impact of quality school health education.
- identify a variety of strategies for advocating on behalf of school health education.
- access and utilize available advocacy strategies.
- demonstrate the ability to effectively advocate for school health education.

### ***MATERIALS AND RESOURCES***

- Characteristics of a quality school health education program (Figure 1)
- Importance of School Health or Potential Impact of Comprehensive School Health Education (Figure 2)
- Roles and Responsibilities of School Health Education Decision Makers (Figure 3)
- Strategies for Advocacy (Figure 4)
- Advocacy scenarios (Figure 5)
- Practical Guidelines for Successful School Health Education Advocacy Efforts (Figure 6)
- Assessment Rubric (Figure 7)
- Internet access

### ***PROCEDURES***

#### ***Introduction***

Begin the lesson by providing students with the following information:

- This course is an example of health education in the college/university setting. Health education takes place in a variety of venues including the community setting (examples include a fall prevention education program for older adults at a local community center, a heart-healthy cooking program at a local health agency), the medical care setting (examples include an education program in a hospital addressing appropriate physical activity for individuals with cardiovascular disease, a nutrition education program for new parents), the worksite setting (examples include a stress management program for administrators in a corporate office, an injury prevention program for employees of a construction company) and school setting (examples include health education taught by an elementary classroom teacher, or a health education course offered at the middle or high school level).

- Throughout most of your life, you are a consumer of health education. For example, you or your family may be involved in programs as participants in community health education programs. You may have a financial interest in private programs through participant fees, or through taxes allocated toward public programs. Lastly, you may have the opportunity to influence decisions related to community programs through voting or public advocacy.
- The purpose of today's lesson is to examine ways that you can advocate for quality health education in schools in your community. Your interest in advocacy for school health education may be based on your overall concern about the well being of children in your community, or it may be meaningful if, as a parent, you have children in schools who could benefit from a quality school health education program.

After providing the preceding information, indicate to the students that they are going to examine their memories of their own K-12 school health education.

### ***School Health Education Memories***

Ask students to take approximately one minute to think about their memories of school health education at three levels: elementary, middle and high school. After students have had a chance to consider their personal memories, ask them to assign a grade (A-F) regarding health education at each of the three levels. Provide students with the opportunity to share their grades and specific memories with a partner or in a group of three. After several minutes of small group discussion, review the memories together with the entire class. Acknowledge both positive and negative examples that were experienced by the students. Culminate the discussion by indicating to students that together they will examine characteristics of a quality school health education program and the potential impact of such a program (Figures 1 & 2).

### ***Characteristics/Potential Impact of Quality School Health Education***

Using a brainstorming activity with the entire class, have students identify what they think are characteristics of a good school health education program. List these characteristics in view of students. Follow up the brainstorming by providing students with a list of "Essential Characteristics of a Quality School Health Education Program" (See Figure 1). Next, provide students with the following related questions for brainstorming, "Why do you think school health education is important? What is the potential impact of quality school health education on a community?" Again, list all responses and follow up the brainstorming activity with a discussion of the list in Figure 2.

### ***Advocacy Guidelines/Techniques***

Health advocacy can be a preplanned sequence of events or a situational circumstance in which a person discovers an opportunity to bring about social or organizational change to promote or enhance health.<sup>12</sup> The best opportunities for advocating for school health are with key decision makers in the school and/or school district. Ask students to identify individuals within schools and communities who typically make decisions regarding school health education. Following this brief discussion, the information in Figure 3 may be used to summarize the roles and responsibilities of key decision makers.

## *Advocacy Strategies*

Effective advocacy messages, depending on particular situation, are directed to appropriate decision makers. A variety of strategies exist to advocate for school health education. The issue and the audience that are the focus of your advocacy efforts, your interests, and comfort levels will be factors in your selection of the best strategy to utilize when developing and delivering an advocacy message. Use the list of web-linked strategies for advocacy in Figure 4 to help students analyze the benefits of various platforms when advocating for school health issues. Depending on the classroom access to the Internet, these strategies can be examined through a whole-class activity or through individual student exploration.

## *Advocacy Scenarios*

Present the school health issues in Figure 5 and allow students an opportunity to select one of the scenarios presented or allow for the creation of their own scenario for which they will create an advocacy plan to address the concerns presented in the scenario. This culminating experience is an out-of-class activity that can be completed individually, in pairs, or triads. The advocacy plans should:

- accurately identify the ineffective health education practices presented in the scenario,
- advocate for effective policies and or practices that will better align the program presented in the scenario with the characteristics of a quality school health education program,
- include the potential impact of comprehensive school health education,
- identify the target audience,
- identify multiple advocacy strategies that might be appropriate, given the audience, health issue, and available resources,
- indicate the most appropriate advocacy strategy to deliver the advocacy message and provide justification for the selection of this strategy, and
- demonstrate effective advocacy skills through the creation of an advocacy message addressing a school health issue presented in the selected scenario.

Students may use the information presented in Figure 1, The Characteristics of a Quality School Health Education Program; Figure 2, The Importance of School Health or Potential Impact of Comprehensive School Health Education; and Figure 6, The Practical Guidelines for Successful School Health Education Advocacy when developing their advocacy plans. Work can begin in class and continue out-of-class, with an optional sharing at the beginning of a future class, if time in the schedule allows.

## **ASSESSMENT**

If advocacy presentations are possible, consider allowing the student audience to create or use the rubric in Figure 7 to analyze and offer feedback for the advocacy messages presented by each group (for the scenario activity). Instructors are invited to design their own point system. If time does not allow for advocacy presentations, students can submit a written advocacy plan at a later date, which may be graded based on appropriately using the information addressed in class.

Lastly, additional ideas of extension activities , are provided in Figure 8 for consideration of instruction beyond one class period.

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Figure 1. Characteristics of a quality school health education program

| Effective School Health Education   | Ineffective School Health Education  |
|---|--|
| <ul style="list-style-type: none"> <li>• Focuses on improving or maintaining specific health behaviors<sup>13</sup></li> </ul>  | <ul style="list-style-type: none"> <li>• Delivery of instruction guided by textbook chapters and worksheets</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Addresses social pressures<sup>13</sup></li> </ul>   | <ul style="list-style-type: none"> <li>• Is lecture-based with minimal surface value assessments that lack variety and depth</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Builds personal and social skills<sup>13</sup></li> </ul>  | <ul style="list-style-type: none"> <li>• Grades are combined with physical education or another content area, awarded a lower weight or value than other subjects, or not listed on official report cards/transcripts</li> </ul> |
| <ul style="list-style-type: none"> <li>• Provides learning strategies, teaching methods and materials that are appropriate for the age, developmental levels, and cultural backgrounds of the students<sup>13</sup></li> </ul>                | <ul style="list-style-type: none"> <li>• Is taught by underprepared and unmotivated teachers without appropriate credentials</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Allows for adequate instructional time specific to health education<sup>11</sup></li> </ul>  | <ul style="list-style-type: none"> <li>• Programs are offered in isolation or duplicate the work of other health programs and services</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Is a planned and sequenced curriculum from prekindergarten through grade 12, which progressively builds health concepts and skills<sup>15</sup></li> </ul>   | <ul style="list-style-type: none"> <li>• Inconsistently offered prekindergarten – grade 12</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Programs are coordinated with other school and community health services<sup>14</sup></li> </ul>   | <ul style="list-style-type: none"> <li>• Perceived by the teacher and students as a rainy day activity or punishment</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Teachers are appropriately credentialed/ licensed in health education, passionate about health education, and regularly participate in high quality professional development<sup>15</sup></li> </ul> | <ul style="list-style-type: none"> <li>• Avoids health issues that create discomfort for the teacher or school administrator</li> </ul>  |
|   | <ul style="list-style-type: none"> <li>• Focuses strictly on information-based content</li> </ul>  |
|   | <ul style="list-style-type: none"> <li>• Is taught sporadically or only when special health events occur</li> </ul>  |
|   | <ul style="list-style-type: none"> <li>• Fails to effectively utilize community resources and parental involvement</li> </ul>  |

## Figure 2. Importance of School Health or Potential Impact of Comprehensive School Health Education

- Effective comprehensive school health education reduces costs associated with medical treatment for preventable diseases including addiction counseling, alcohol-related motor vehicle injuries, and drug related crimes.<sup>16, p.44</sup>
- Recent evidence suggests that promoting and establishing healthy behaviors as children and adolescents is more effective, and often easier, than efforts to change unhealthy behaviors already established in adult populations.<sup>17</sup>
- Health risk behaviors that contribute to the leading causes of death in the US are often developed during childhood and prevention is the best cure for chronic disease. School health education provides the fundamental basis for instilling behaviors into our young people to prevent or delay the onset of the leading causes of death in our country.<sup>17</sup>
- Every day, public schools in the United States have the opportunity to reach 49.8 million students with health enhancing messages to promote healthy lifestyles and the necessary health skills to engage in healthy behaviors.<sup>18</sup>
- Health education programs in schools can contribute directly to a student's ability to successfully adopt and practice behaviors that protect and promote health and avoid or reduce health risks.<sup>11</sup>
- Research has shown that school health education can effectively help reduce the prevalence of health risk behaviors among students and have a positive influence on students' academic performance.<sup>19</sup>

Figure 3. Roles and Responsibilities of School Health Education Decision Makers

| <b>Examples of School Health Education Decision Makers</b>                           | <b>Roles and Responsibilities</b>   |
|--|---|
| Elementary classroom teachers, middle and high school teachers of health education   | Teachers develop a sequence of instruction, select the materials and methods to utilize for health education instruction and assessment, and create opportunities for parent and community involvement.   |
| School administrators (e.g. principal, district curriculum director, superintendent) | School administrators are responsible for assigning duties to teachers and evaluating and reporting teacher performance, establishing school budgets, which is associated with resource allocation to each teacher and content area, identifying instructional priorities, developing school schedules for content offerings and availability, providing and approving professional development opportunities for teachers, and enforcing state and local policies. |
| Members of the local and state school boards of education                            | State Boards of Education often establish state standards for policies related to the instruction of health education, and determine the qualifications necessary to teach health education. Local Boards of Education are responsible for developing instructional policies, hiring teachers, and in some districts, approving curriculum and materials used by teachers.  |

## Figure 4. Strategies for Advocacy

**Participating in Public Forums & Community Meetings** –These include Parent Teacher Organization meetings, local school board meetings, public hearings, and education forums are examples of opportunities for local citizens to deliver advocacy messages to decision makers. The following website offers an explanation of how school board meetings operate and gives directions for how to participate. There are also links for video clips of archived school board meetings to watch one in action.  
<http://www.lausd.k12.ca.us/lausd/board/secretary/html/umbflyer/umb1.html>

**Letters to the Editor** – This forum is used by many to express a point of view or concern about a public issue. The key when using this method to advocate for school health education is to be engaging and persuasive yet remain brief using approximately 150 words or less. Use facts to support an issue and cite sources so the editor can fact check if necessary. The link provided is an example of a letter to the editor from an advocate for the National School Program advocating for additional funding when the federal government reauthorizes the 2009 Child Nutrition Act:  
<http://www.nytimes.com/2009/02/27/opinion/127lunch.html> .

**Position Papers** –These essays are used to express an organization’s opinion about an issue and are usually published in academic journals or by political action groups. These opinions are often supported with valid and reliable research findings from other professionals in the field. The link provided is an example of a position paper related to bullying behaviors and preventing bullying  
[http://www.adolescenthealth.org/PositionPaper\\_Bullying\\_and\\_Peer\\_Victimization.pdf](http://www.adolescenthealth.org/PositionPaper_Bullying_and_Peer_Victimization.pdf)  
Position papers can be useful when citing support for an advocacy message.

**Social Networking** (blogs, wikis, MySpace/Facebook/YouTube, list servs, electronic discussion boards)  
The sites below are examples of how social networking and information sharing tools can be used to share prevention messages and advocate for health promotion.

Students against Destructive Decisions:

MySpace - <http://www.myspace.com/saddnational>

Facebook - <http://www.facebook.com/saddnational>

Twitter - <http://www.twitter.com/SADDnational>

YouTube - CCROPP Initiative provides an example of a community that supports healthier lifestyles. Videos available through YouTube demonstrate examples of how health advocacy has improved healthy food access and physical activity opportunities in one community in which the schools were a key stakeholder and critical partner in this effort. [http://www.youtube.com/watch?v=it1X\\_tHaM9g](http://www.youtube.com/watch?v=it1X_tHaM9g)

**Podcast** – Audio or video files that are created to share a message over the Internet through downloads or web streaming.

Cardiovascular Health - <http://www.cvmd.org/>

**Public Service Announcements (PSAs)** – These not for profit advertisement broadcasts are offered on the radio or television on behalf of public interest. PSAs are intended to relay information, usually related to health or safety issues, to create awareness or action. The following link provides examples of PSAs developed by the National Ad Campaign for the Coalition for Healthy Children to promote physical activity among children <http://healthychildren.adcouncil.org/filelibrary/MessagesForChildren.pdf> .

## Figure 5. Advocacy Scenarios

### Scenario 1

Smith High School has recently decided that health education will be taught as a part of the science curriculum. There are a variety of career-oriented courses school officials want to offer, and in order to make room in the required courses, they must remove a current requirement. The principal and several teachers believe health education could easily be taught in high school science classes when instructors cover anatomy. How will you advocate for the importance of a qualified teacher and a standalone course in health education for all high school students? What strategies will you use and what will be your message to the principal and school staff?

### Scenario 2

New policies passed by the local public school board of education for Lee High School removed health education as part of the required course curriculum for all students and provided it as a one-course elective. Students are given the choice to enroll in a health education elective course, during Junior and Senior years. This trend seems to be growing among similar school districts. How will you advocate for the importance of comprehensive school health education, integrated into a required 4-year curriculum?

### Scenario 3

The local public school board of education is currently trying to decide if sexuality education should be removed from the public schools. A few parents have voiced their beliefs that sexuality education as well as all other health concepts should be taught at home by students' parents. As a result of hearing these parents' concerns, the board is now considering removing ALL health education from the local schools. How will you advocate for the importance of health education in public schools? To whom should your message(s) be directed and what strategies will most effective?

### Scenario 4

Kelvin and Tracey were two high school seniors at Pleasantville High School and were planning to graduate in the spring, until they were in an automobile crash that ended Kelvin's life and left Tracey paralyzed from the waist down. Kelvin and Tracey were coming home from the prom when a car driven by a teenage driver under the influence of alcohol collided with their vehicle. Parents became concerned about the type of prevention education the students were receiving in school, and through investigation, found out that the teachers of health education decided not to teach alcohol and drug prevention because they thought it had been taught in elementary school. Develop a plan of advocacy to implement a comprehensive health education program at Pleasantville High School.

### Scenario 5

The local school board of education has decided not to fund a comprehensive school health program. They plan to reallocate previous health education instruction funding to purchase an Alcohol, Tobacco, and Other Drug prevention curriculum that has been proven ineffective in changing behavior. What is the best method for advocating to the local school board the importance of an effective comprehensive health education curriculum? What should this message include?

### Scenario 6

A new magnet school, serving students in grades 9-12, recently opened in an area of a nearby community, which is highly impacted by poverty, gang violence, and crime. The new magnet school offers a state of the art dance and music program. There is also an accelerated math and science wing with cutting edge technology resources available to staff and students. The director of the new school has decided to use the additional state dollars to expand the technology lab and the music equipment instead of employing a health education teacher. None of the teachers at this new school is qualified or interested in teaching health education. You recently spoke with a parent in your neighborhood whose child attends this school and found out that this child will receive no health education while attending this school. How and why should you advocate for the inclusion of health education at this school?

### Additional Option

Create your own – what are you passionate about related to school health or what causes frustration or concerns you about school health education?

Figure 6. Practical Guidelines for Successful School Health Education Advocacy Efforts<sup>2, 20, 21</sup>

### **Embrace Your Passion**

Be proactive in getting started by engaging in advocacy efforts for issues about which you feel passionate. What about your school health education experience either positively elevates or negatively diminishes that experience? Are there aspects of that experience that gets you “on your soapbox,” either ranting of what could be better or praising positive aspects? If so, these are aspects of school health education that you care about, which gives you a place to start for your advocacy efforts.

### **Eliminate and Confront Your Fears**

Many people do not feel comfortable voicing their opinions or taking a stance on an advocacy issue, due to fear of appearing foolish or not having support from colleagues, peers, friends, and/or family. It is important to realize that it is your right, as a private citizen, to engage in advocacy efforts. The way to minimize your fears is to know the facts for the issue in which you are advocating. “Know why you are advocating for the issue, know how it is going to affect the public, and be able to give key examples that support your advocacy agenda”.<sup>2, p.47</sup> In addition, practice verbally stating your stance on the issue with a friend; this practice will help you feel more comfortable voicing the key points of importance with this issue.

### **Use Advocacy Tools**

Use advocacy tools available in order to decrease barriers to advocating. The Health Education Advocate website (<http://healtheducationadvocate.org>) provides timely advocacy information related to health education and health promotion. The site provides resources for “taking action,” advocacy alerts on current national legislation involving health education and health promotion, links to state legislation, and fact sheets on priority legislative issues affecting health education. Websites, such as Thomas.gov, enables users to search all legislation that goes before Congress. For school health education advocacy tools, go to the American School Health Association website (<http://www.ashaweb.org>) to find fact sheets and resolutions on issues affecting the well-being and health of school –aged individuals. For example, the first resolution, found on this site, is entitled “Administrative Support for School Health”.<sup>22</sup> This resolution provides facts, background research, and additional information to utilize when advocating for administrative support of school health education. Any advocate for school health education can download, and use these resolutions for support of a cause. In addition, the American Association for Health Education (AAHE) provides a joint position statement from the American Heart Association, the American Cancer Society, and the American Diabetes Association ([http://www.aahperd.org/aahe/pdf\\_files/statement.pdf](http://www.aahperd.org/aahe/pdf_files/statement.pdf)) on the need and importance of school health education. Advocates can use this tool for advocacy efforts at the local, state, and national levels.

### **Make Time to Advocate**

Time limitations and constraints pose barriers for advocacy. Many people believe that advocacy is too time-intensive, and therefore, do not engage in such efforts. Ask yourself this, “If not us, then who?” Chaney and colleagues<sup>2</sup> provide several examples of advocacy approaches that have worked, and these successes have helped to improve the health and well-being of all citizens of this country. Therefore, it is crucial for all community members to feel it is their right to advocate for causes dear to them. Exercise that right, and educate yourself on why it is important for you (as a future community member) to play a key role in promoting community and school health education in your local areas.

## Figure 6. Continued. Practical Guidelines for Successful School Health Education Advocacy Efforts

### **Assess Needs**

When planning an advocacy activity, it is important to know the needs of the group for which you are advocating. In doing so, attempt to identify how much effort is required to produce the desired change(s). Effort may vary, depending on the social environment and issue that is being addressed. Once needs have been assessed, an effective strategic plan can be developed. “By having an idea of the surrounding circumstances, the health educator can be better prepared to plan their advocacy efforts,”<sup>2, p.47</sup>

### **Plan a Strategy**

Depending on the effort needed to produce change, advocacy activities may include the development of a group or coalition to advocate for larger scale issues, or efforts may entail the work of a single advocate. Either way, to be most effective, it is important to develop a plan of action. The main goal is to keep the issue at the forefront of the public’s attention, particularly targeting the individual and/or group(s) that can most directly affect change. For school health education advocacy, the key decision makers need to hear that school health education is of importance to the public. It is up to the advocate to provide evidence of this importance (use the advocacy tools mentioned previously). There are many activities in which advocates can engage to build a successful advocacy plan. Some of these include: writing letters to the editor, writing letters to policymakers, developing a one-page fact sheet on local data to distribute to decision makers, calling decision makers, meeting with decision makers, putting a “local face” to the cause, providing the media with information and stories regarding the issue at hand, and becoming the resource person for your community when information of the issue is needed.

### **Follow-up**

Successful advocacy requires a commitment that will likely require more than one-shot or once-a-year actions. Advocates have to be committed to the cause, for longer than a day, month, or even a year, as it takes time to see sustainable changes in communities. As a result of that commitment, you should always follow-up with all contacts made. For example, if you have met with a decision maker, send a thank you note for his/her time. Make sure to reiterate any commitments made by the decision maker, and remind key people of the importance of your cause. Successful advocates push their agendas in all they do, but with respect and dignity for opposing sides. “A successful advocate should view a relationship with a key policy maker as a marriage, although you may occasionally disagree, you will work better in tandem than as lone individuals.”<sup>2, p.48</sup>

Figure 7. Assessment Rubric for Advocacy Presentations

| <b>Criteria</b>  | <b>Not Addressed</b> | <b>Partially Addressed</b> | <b>Complete</b> | <b>Comments</b> |
|--|----------------------|----------------------------|-----------------|-----------------|
| Accurately identified the ineffective health education practices presented in the scenario   |                      |                            |                 |                 |
| Advocated for effective policies and or practices that will better align the program presented in the scenario with the characteristics of a quality school health education |                      |                            |                 |                 |
| Addressed the potential impact of comprehensive school health education  |                      |                            |                 |                 |
| Identified multiple advocacy strategies that might be appropriate, given the audience, health issue, and available resources   |                      |                            |                 |                 |
| Indicated the most appropriate advocacy strategy to deliver the advocacy message and provide justification for the selection of this strategy                                |                      |                            |                 |                 |

## Figure 8. Resources & Extension Activities

Below is a list of additional ideas for teachers to implement with students outside of class, which can be used if teachers desire to broaden the scope of the advocacy activity. These can be optional activities for students who have a special interest in school health advocacy.

Instructors could ask students to do any of the following extension activities:

- Attend a local school board meeting.
- Write a letter to the editor of the local paper.
- Interview a school board member, an administrator, a teacher.
- Contact a local non-profit health-related volunteer agency such as the American Heart Association, American Diabetes Association, or an American Cancer Society chapter to find out what actions are being taken in support of school health education in the community.