



*Address
by*

*Robin Sullivan
Commissioner for Children and Young People*

At the

*Website Launch of The Health Promoting Schools
Association of Queensland*

at

Redbank State School

on

Tuesday 2nd March 2004

“All children in Australia will belong to school communities who are committed to promoting life long learning, health and well being”.

This vision statement of the Health Promoting Schools Association highlights what we in the Commission think is critical, that is, the notion of children belonging to school communities who are committed to promoting lifelong learning, health and wellbeing.

It raises some crucial issues: the need for a commitment to early intervention and prevention strategies; and strategies that are holistic, involving a multi disciplinary, whole of community approach, underpinned by the ecological model.

Based on the principles of the Ottawa Charter for Health Promotion (Ottawa, 1986), the concept of Health Promoting Schools was initiated by the World Health Organisation and has a strong following internationally, nationally and locally.

It is an holistic approach to health promotion and health education in schools.

International experience demonstrates that this is far more effective than traditional, curriculum-based health education models.

The HPS approach recognises that effective health education encompasses supportive school environments (both physical and social), policy development, community action, and personal skill and knowledge development.

Given its international recognition as best practice, the health promoting schools process is an efficient and effective way of creating supportive school environments that address the health and education needs of our youth.

Let me provide just two illustrations of what this might imply for a primary and a secondary school.

To me, it requires, for primary schools, an acknowledgement of the importance of the early years of a child's life.

Importance of Early Years

Long standing research in developmental psychology, social work, health and education has identified the importance of children's early experiences as affecting their long-term physical, emotional, social, health and intellectual development¹.

Developments in neuroscience provide 'hard data' about the nature of early brain development in the first six years of life, and validate our understandings of the importance of children's early experiences.

This creates a sense of urgency about the need to ensure children's early experiences are positive.

A key report on research into brain development which has spurred governments into action is the Canadian Early Years Study led by Margaret McCain and Fraser Mustard.

In the past, the structure of the brain was thought to be genetically determined. We now believe the environment or experiences of a child play a large role in how the brain develops physically.

The nature vs nurture debate now appears to have been resolved, with the suggestion that both nature (or predispositions) and nurture (or experiences), interact in complex ways to affect development.

Research has shown that good nutrition, together with a nurturing and responsive environment in the first few years of life provide the foundation building blocks for a child's physical, emotional and intellectual developmentⁱⁱⁱ.

Optimal nurturing and stimulating environments produce immediate benefits for children, and enhance the wellbeing of adults and society in the long-term.

The 1999 Pathways to Prevention report from Ross Homel at Griffith University highlights the way in which early intervention can enhance positive experiences or protective factors for children and reduce risk factors, reducing the likelihood of children progressing down 'vulnerable pathways'.

This is supported by the 2001 international OECD report titled Starting Strong^{vii}, which identifies early childhood services as a key component of successful educational, social and family policy agendas.

For secondary schools I find it difficult to go beyond the six National Health Priority Areas identified in 1997.

Included in these were a number of health risks identified in relation to adolescents, including tobacco use; alcohol use and in particular the recent increase in teenage binge drinking; illicit drug use; physical inactivity and obesity^{viii}.

The growing concern about obesity and its correlate, physical inactivity, has placed these on the national health priority agenda.

A few facts: 4% of boys and 6% of girls were classified as being overweight, using the Body Mass Index in 1985.

In 2000, Booth and colleagues undertook a study in Melbourne and Sydney of children aged 7-18 years. They found that 25 percent were overweight, practised sedentary lifestyles and that their diet was high in fat and low in fresh fruit and vegetables^{ix}.

Society today inflicts change on our young people in so many ways; from the changing configuration of the nuclear family to the diverse and ever-changing ways knowledge and its delivery are evolving.

Today's youth need to be equipped with the abilities to adapt and to be resilient.

These qualities are something that a health promoting school can help foster in young people.

Education Queensland's 'Destination 2010, recognises the pace and rate of change.

It aims to enable more students in Queensland to engage in a range of effective learning experiences at all levels of schooling.

Destination 2010 states^x "because human and social capital develop within families and through wider networks, Queensland state schools should be re-

conceptualised as part of that learning society and become embedded in communities – local and global – in new ways.”

Certainly the Health Promoting Schools Association contributes to the achievement of this and the health promoting schools process is a key process to support this strategic direction.

The Queensland Government recognises the importance of the HPS approach and the ability of a health promoting school to create a supportive environment for young people to learn, work and play.

The Queensland Health Working Together for Healthy Schools position statement and practice framework recognise the health promoting schools framework as imperative in helping to improve the health of Queenslanders

ROLE OF HEALTH PROMOTING SCHOOL ASSOCIATION OF QLD

The Health Promoting Schools Association of Queensland, of which I am now the proud patron, aims to promote and support the health promoting schools (HPS) approach throughout Queensland (www.hpsaq.org)

HPSAQ does this by advocating for and facilitating:

- the use of the health promoting schools approach by school communities
- a social and ecological view of health
- a comprehensive approach to health issues in schools, consistent with the Ottawa Charter for Health Promotion (1986)
- state-wide exchanges of information, expertise and resources
- collaboration between health related agencies, professional associations, government departments, non-government organisations, schools, tertiary institutions and local communities
- participation and collaboration to develop healthy school policies
- health curricula, policies and practices that integrate health, social and environmental issues
- research related to health promoting schools
- The Health Promoting Schools Association provides members with newsletters, professional development opportunities, this great new website and access to a wide range of professionals available to provide support to school communities interested in learning more about health promoting schools

ROLE OF THE NEW WEBSITE AS AN IMPORTANT HEALTH PROMOTING SCHOOLS RESOURCE IN QLD

- The website will allow for improved sharing of / access to, information that will assist many schools to become 'health promoting'
- With the creation of this new website, the Health Promoting Schools Association can continue to forge strong bonds with Queensland schools and capitalise on the community's acknowledgement of the importance of health promotion in schools
- The Health Promoting Schools Association also hopes to create an ever-growing network of health promoting schools in Qld that can support, and learn, from each other

I am proud to be a Patron of the Health Promoting Schools Association of Queensland and commend their work and initiatives. The new website provides valuable resources and support to all those interested in the work of the Association.

It now gives me great pleasure to officially launch the Health Promoting Schools Association website.

ⁱ Stanley, F. (2001) A unique new way of working. Towards a National Partnership for Developmental Health and Wellbeing. *Family Matters*, 58(Autumn). p.65.

ⁱⁱⁱ Part 2 Rationale for a focus on the Early Years 0-8, p.5

^{vii} OECD. (2001). *Starting strong: Thematic review of early childhood education and care policy in 12 countries*. <http://www1.oecd.org/publications/e-book/9101011e.pdf>

^{viii} Vimpani, G., Patton, G., & Hayes, A. (2002). Chapter 2, The relevance of child and adolescent development for outcomes in education, health and life services. In .A. Sanson, (ed.). *Children's Health and development: new research directions for Australia*. pp. 15-17. Research Report no.8 AIFS, Canberra.

^{ix} Vimpani, G., Patton, G., & Hayes, A. (2002). Chapter 2, The relevance of child and adolescent development for outcomes in education, health and life services. In .A. Sanson, (ed.). *Children's Health and development: new research directions for Australia*. p. 17. Research Report no.8 AIFS, Canberra.

^x Education Queensland. (2003) *2010 Queensland State Education . A future strategy*. Queensland Government. P.8.