

Healthy Schools BC

Francophone Initiative

Evaluation Report



Hélène Cameron
March 31, 2017

Begun in 2014, the **Healthy Schools BC (HSBC) Francophone Initiative** was a three-year project designed to promote a comprehensive approach to student health in BC's Francophone and French Immersion schools with the involvement of regional health authorities and other partners. The initiative focused on capacity building and cross-sector partnerships and, in the final year, an evaluation was carried out to understand the progress across these action areas. It monitored awareness and use of French-language resources, comprehensive school health (CSH) knowledge and skill development, and partnership development among schools and health authorities. Here are the key findings:

Capacity Building

- About two-thirds of educators surveyed were aware of, and used the French-language website; their awareness and use of, and satisfaction with specific French-language resources was highest for the *Teaching and Learning Guide*, which garnered the most page views online.
- Most of the health authority staff (nine-tenths) surveyed were aware of the French-language website; awareness and satisfaction levels for specific French-language resources were highest for the *Teaching and Learning Guide*.
- Online access of resources rose in line with project activities; for example, there were 175 visits online (154 from new users) in May 2016, following *Caravane Santé* and a health forum.
- About two-thirds of educators who participated in *Caravane Santé* improved their knowledge of CSH and strengthened their approach to healthy schools; about one-third of educators surveyed reported the same improvements and observed changes toward a healthy school environment as a result of the HSBC Francophone initiative.

Cross-sector Partnerships

- Most health authority staff surveyed provided some kind of support to schools, predominantly in English; over half had shared French-language resources and one-quarter intended to continue doing so; and just over one-third felt they had the capacity to support schools.
- One-half of health authority staff felt their capacity to support schools was hampered by lack of time and two-fifths felt it was hampered by a lack of French-language tools/resources and language barriers.
- About one-quarter of health authority staff felt partnerships with schools had strengthened; most of those who participated in *Caravane Santé* felt the event increased their ability to work with schools.
- Close to one-half of educators had some awareness of the supports offered by health authorities; few felt that partnerships had become stronger as a result of the initiative but almost half agreed that support from health authorities would strengthen their ability to implement healthy schools initiatives.

The Francophone Initiative provided access to much needed resources. As a result, there was an improvement in the capacity to create healthy schools, despite the barriers that continue to exist.

Table of Contents

Introduction 5

The HSBC Francophone Initiative 6

The Evaluation Plan..... 9

Results..... 10

Capacity Building..... 11

Cross-Sector Partnerships..... 18

Discussion and Conclusion 23

Recommendations 26

List of Tables

Table 1. HSBC Francophone Initiative Components and Activities	6
Table 2. Translated HSBC Resources	7
Table 3. Responses to Online Surveys.....	11
Table 4. Website Access in Relation to Milestones	14
Table 5. Page Views of HSBC Resources	15

List of Figures

Figure 1. Educators' Awareness of, and Satisfaction with French-language HSBC Resources.....	12
Figure 2. Health Authority Staff's Awareness of, and Satisfaction with French-language HSBC Tools and Resources	13
Figure 3. Educators' Awareness and Use of CSH	16
Figure 4. Benefits of <i>Caravane Santé</i>	16
Figure 5. Current and Needed Supports to Implement Healthy School Initiatives.....	17
Figure 6. Areas of Stronger Healthy Schools Approach	17
Figure 7. Awareness and Use of Health Authority Supports	19
Figure 8. Health Authority Support for the Implementation of CSH	19
Figure 9. Impacts on Capacity to Support CSF and/or FI Schools	20
Figure 10. Strengthened Healthy Schools Approach as a Result of Health Authority Support	22



Introduction

Based on the World Health Organization's *Ottawa Charter for Health Promotion* (1986), the Comprehensive School Health (CSH) approach is founded on the premise that health is holistic. Specific health practices do not exist in isolation from each other. Rather, they are affected by the broader context in which we live. Schools not only afford students opportunities to learn and practice healthy habits that they will carry into adulthood but they also directly influence children's health. Thus, the CSH approach takes action in four inter-related areas:

- *Relationships and environments*: the social and emotional aspects of the environment as well as physical spaces in schools
- *Teaching and learning*: teaching and learning opportunities to build health knowledge and skills
- *Community partnerships*: connections and partnerships within the school and community
- *School policies*: policies, rules, procedures and/or codes of conducts at all levels that help shape the school environment

The Healthy Schools BC (HSBC)¹ initiative, launched in 2011, builds the capacity of the BC health and education sectors to effectively implement healthy schools initiatives using the CSH approach. The initiative combines intersectoral partnerships, tools for assessment and planning, and coordination of programs and resources to support improvements in students' health and learning.

¹ A partnership between DASH BC, the provincial ministries of Health and Education, health authorities and the education sector among others.

Acronyms

CSF – Conseil scolaire francophone
(Francophone School Board, SD 93)

CSH - Comprehensive School Health

DASH – Directorate of Agencies for
School Health

FI – French Immersion

HSBC – Healthy Schools BC

SD – School District

In 2012, it was found² that the CSH approach was not used per se but was quite consistent with current approaches within the Conseil scolaire francophone (CSF). And although there was some awareness among school health leaders in the health authorities of the existence of Francophone schools, little was planned to serve them specifically. The findings suggested several opportunities for assisting Francophone and French Immersion schools, including the following:



The Programme Francophone is offered “to students whose first language is French or who qualify under Section 23 of the Charter of Rights and Freedoms.” It was delivered by the Conseil scolaire francophone (SD 93) [in 30 public schools] to 5,533 students in 2015/16. The French Immersion Program is a “second language program where instruction to students ... is offered in the French language.” It was delivered by about two-thirds of school districts to 53,091 students [in public and independent schools] in 2015/16.

Students Statistics 2015/16, BC Ministry of Education.

- provide key, made-in-BC school health program resources in French, including the Directorate of Agencies for Schools Health (DASH) BC’s suite of programs and services that supports widespread implementation of the CSH approach
- foster representation of the CSF on community/health alliances, sharing circles, and networks of professionals working on school health programs

The HSBC Francophone initiative was a response to these findings. It was a partnership between DASH BC, RésoSanté Colombie-Britannique, Conseil scolaire francophone (SD 93), and the BC Ministry of Health, with additional support from the BC Francophone Affairs Program.

The HSBC Francophone Initiative

Table 1. HSBC Francophone Initiative Components and Activities		
Component	Capacity Building 	Cross-sector partnerships 
		Helping education and health partners at the school and district/regional levels to plan, implement and evaluate healthy schools initiatives
Activity	<ul style="list-style-type: none"> • Translation of HSBC resources and website • School outreach • Caravane Santé 	<ul style="list-style-type: none"> • Outreach to Health Authorities and health-related organizations • Caravane Santé

² Hélène Cameron, [School Health: Research into the use of a public health model to promote the health of children and youth in CSF schools \(SD 93\)](#). Final Report, April 23, 2012.

Begun in 2014, the three-year project was designed to promote a comprehensive approach to student health in BC's Francophone and French Immersion schools. The objective was to have a positive effect on:

- knowledge of and skills associated with the CSH approach
- awareness and use of French-language healthy school resources
- partnerships between target schools, the CSF, and health partners

The initiative had two core components and related activities, as seen in Table 1.

Year one (Fall 2014-Fall 2015) of the project provided for the translation of the HSBC website and selected resources into French.

Table 2. Translated HSBC Resources	
Resource	Description
	The Resource Guide for Teaching and Learning provides a step by step process to address healthy living topics and goals.
	The CSH Knowledge Guide outlines how an evidence based, internationally accepted framework can make a difference in the classroom, the school, and for students.
	The Healthy Living Performance Standards are available for all grade levels and support learning progression in the areas of healthy eating, active living, healthy relationships, and healthy practices.
	The CSH Four Pillar Activity helps to start a conversation around what is currently going on in the classroom and/or school within each pillar of CSH.
	The Healthy Schools Assessment Tools allow for a more in depth look at what's going on at the school and help to determine a specific area to focus on.
	The Action Guides share evidence-based practices and promising innovations that are showing results in creating healthy schools in BC.
	The CSH Resource for Health Professionals presents evidence-based information and tools to support frontline health professionals who work with schools/school districts with in applying a CSH lens to their healthy schools work.
	The Healthy Schools Stories Map is a collection of stories from schools throughout the province located on an interactive map.

In *year two* (Spring 2015-Spring 2016), the project reached out to the CSF, Francophone and French Immersion schools, health authorities, and other key partners to promote the French-language resources and website and begin planning for cross-sector knowledge exchange.

The **school outreach** activities aimed to:

- introduce the initiative and available resources, including the French language HSBC website, translated tools, and a French-speaking Outreach Coordinator hired by DASH as a support
- explore opportunities to strengthen and share the school's existing healthy school activities (e.g. connecting the school to relevant tools and grant opportunities, inviting a stories map submission, and recommending potential partners)
- document information about the school's healthy schools activities and outcomes (pre and post) to help inform the evaluation
- follow up periodically to offer continued support

During this phase, the Outreach Coordinator promoted the initiative through targeted communications (e.g. telephone calls, emails, meetings, and attendance at events). She introduced DASH and HSBC, sought partnership and cross-promotion opportunities, and identified program/resource submissions for inclusion on the HSBC website. She also identified potential partnership opportunities with schools and facilitated connections between school and health authority staff, promoting health authority staff as a support to Francophone and French Immersion schools.

Outreach Activities (March 2015-March 2016)

Schools

- 32 Francophone schools (CSF)
- 245 French Immersion schools within 46 school districts
- 17 independent schools offering instruction in French

School Districts

- CSF Health and Safety Coordinator
- Health Promoting School Coordinators
- District language coordinators and superintendents

Health Professionals

- 5 regional BC Health Authorities (nurses, dietitians, health promoting school coordinators, community builders, and community nutritionists)
- Addition of French HSBC website link to health authority websites

Other Stakeholders

- 10 relevant groups contacted for cross-promotion opportunities through newsletters, websites, events, and social media

The partners collaborated on a formal formal project launch event in September 2015 to create some momentum around the initiative.

Then, the focus turned to planning ***Caravane Santé***, which modelled a CSH approach to healthy schools. A CSH approach is a flexible, participatory process. The most productive starting point is one that recognizes a school's assets, priorities, and established practices. *Caravane Santé* was intended to train school champions in the use of the healthy schools framework while fostering a learning community (an established practice in the school system) around healthy habits in students and staff. *Caravane Santé* would be building on both approaches to help sustain healthy school projects, connecting schools with health partners in their communities, and embodying the idea that healthy living is fun for students.

Learning communities are promoted across the CSF to improve students' academic achievement. They focus on stimulating the sharing of ideas, collaboration between colleagues, teamwork, and evaluation of improvement. The **healthy school framework** helps schools assess the needs of their population, plan sustainable actions they want to implement in order to address identified needs, implement these actions by involving partners in their communities, and evaluate their achievements in order to improve their healthy school over time.

Caravane Santé took place March 1 - 11, 2016, during Nutrition Month, in 6 schools (5 Francophone and 1 French Immersion) across B.C. Themes such as nutrition and daily health and wellness activities were covered through workshops. Participants included:

592 students, 6 principals,
28 teachers, 10 other school staff.



“We called on local health professionals ... A chef, a nutritionist, dieticians, [public health] nurses who facilitated workshops And all of it in French.”

Benjamin Stoll, RésoSanté.

In total, the project involved six Francophone and French Immersion schools in four of BC's health regions. The selection of participating schools was based on a survey of interest and a needs assessment completed by the CSF. In participating schools, a champion – one who showed interest in improving the health of students in the long term - was identified. Most often, this was the principal. The champion assisted a French-speaking DASH project coordinator in the planning of *Caravane Santé* by identifying the school community's health-related needs and potential focus areas. In response, local French-speaking health specialists were selected to lead healthy schools activities (introduced by children/youth journalists), workshops, and staff learning sessions. Each participating school produced a brief video and these were combined into a longer documentary video that could be used for promotion purposes in the future.

Year three (Spring 2016-Spring 2017) was reserved for evaluating the initiative. This report presents the results of the evaluation.

The Evaluation Plan

A plan to evaluate the HSBC Francophone Initiative was aligned with the larger, province-wide HSBC initiative. It used similar indicators, measures, and tools. The plan was approved by a steering committee with representation from RésoSanté Colombie-Britannique, the CSF, DASH BC and the Ministry of Health. The logic model (attached in the Appendix, p. 27) linked the core components and activities to the original objectives. Instruments were developed for use in online surveys (see Appendix, pp.28-41). Data collection took place between March and October 2016. The following were surveyed:

- All *Caravane Santé* staff workshop participants (in French and English) – March 2016
- A selected group of CSF/French Immersion school staff (in French and English) – May to October 2016

- A selected group of health authority staff (in English) – May 2016.



Results

The number of responses to each survey and characteristics of respondents are found in Table 3.

Stakeholder Group	Method / Responses	Characteristics	School Setting	
			CSF	FI
Educators and administrators in CSF/French Immersion schools	Online survey / 86	35 teachers 27 principals/vice-principals 3 school counsellors 5 others 16 - unknown	11	25
			2 – others 48 – unknown	
Health authority staff from 4 of 5 regions	Online survey / 36	28 public health nurses 2 public health manager 2 community nutritionists 1 healthy schools lead 3 other professionals	7	22
			7 – both CSF and FI	
Caravane Santé participants - 61 (6 principals, 28 teachers, 10 other staff, 17 presenters)	Online Feedback form / 20	9 teachers 1 student 1 principal/vice-principal 5 public health professionals 3 other professionals 1 unknown	13	6
			1 – unknown	

There were 86 education sector responses, 48 of which were incomplete. Of the remaining 38, 29% of respondents worked for CSF schools versus 66% for French Immersion schools. Responses to the health authority staff survey numbered 36, 19% of which came from supporters of CSF schools versus 61% from supporters of French Immersion schools, and 19% supporting both school systems. *Caravane Santé* feedback form responses numbered 20, with one incomplete. The percent of respondents involved with the CSF versus FI schools was 68% and 32% respectively.

Capacity Building

<p>Description</p> <p>Helping education and health partners at the school and district/regional levels to plan, implement, and evaluate healthy schools initiatives</p>	<p>Focus Areas</p> <ul style="list-style-type: none"> • Knowledge exchange and skills development
<p>Findings</p> <ul style="list-style-type: none"> • Very positive response to <i>Caravane Santé</i> • No usable data on increased knowledge of CSH 	

The HSBC Francophone initiative provided access to the French-language website and key resources that would support education and health partners at the school and district/regional levels to plan, implement, and evaluate healthy schools initiatives in French. Access was promoted through an extensive outreach strategy.

<p><i>Favourite part of Caravane Santé</i></p> <p>Seeing children connect as they laughed. Seeing the children get excited. The energy...of children who adored the experience!</p> <p><i>Changes observed at school</i></p> <p>Working with students on self-regulation, school garden, students taking movement breaks throughout the day. Fewer behaviour problems with youth. The will to eat healthy and the parent committee preparing healthy-choice menus.</p>
--

In particular, *Caravane Santé*, a series of knowledge exchange events in six host schools, had the most direct and targeted approach. The events attracted: 592 students, 6 principals, 28 teachers, and 10 other school staff. Reaction to *Caravane Santé* was very positive. Of 18 participants completing a survey, 50% said they were very satisfied and 50% said they were satisfied with the event. When asked to identify their favourite part of the event, 9 of 16 (56%) respondents singled out the excited participation of children. Other responses included the

food/nutrition demonstrations, the hands-on activities, the workshops, and other activities. Least favourite aspects included the lack of time for preparation and for each session, the location of workshops in too-small classrooms, and the lack of certain activities (e.g. activities for younger children). Not surprisingly, recommendations for improvement included:

- more time for organizing (e.g. consulting teachers on their needs) and for the sessions themselves
- activities geared to younger children and held in larger spaces (e.g. gym)

- teacher and student access to agenda information
- specific activity topics (e.g. mental, dental health)

It is evident that the key knowledge exchange events known as *Caravane Santé* was successful.

Focus Areas

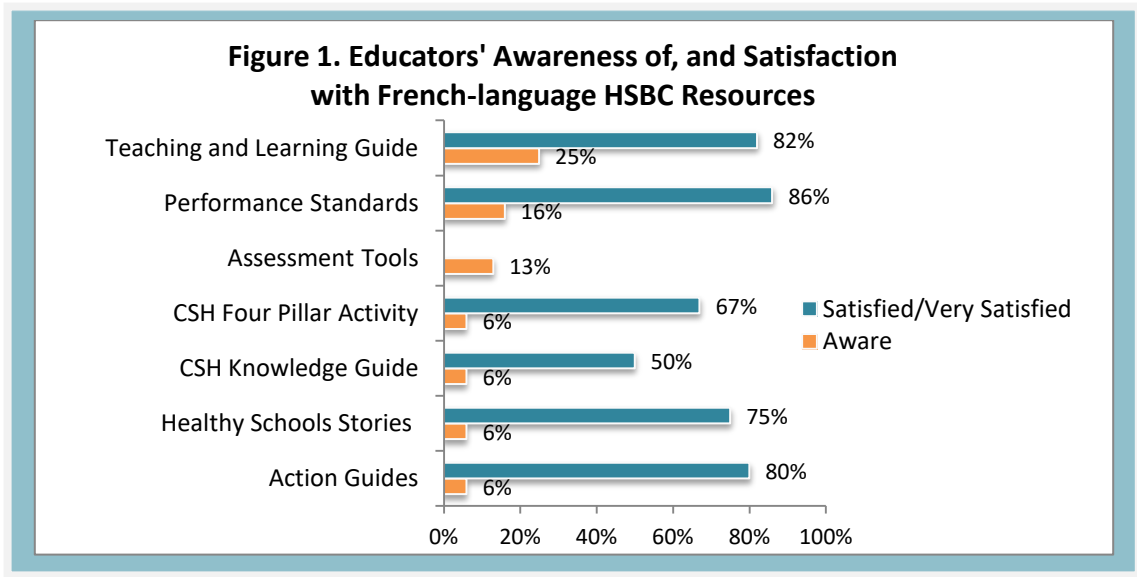
- Awareness of, and access to French-language HSBC website
- Awareness and use of, and satisfaction with newly translated French-language resources

Findings

- 63% of **educators** were aware of the HSBC website and close to two-thirds were aware of, and used the **French-language website**, 100% of whom were satisfied
- Awareness of French-language resources was highest for the Teaching and Learning Guide (25%), which had the most page views, and 82% of users were satisfied
- 91% of **health authority** staff were aware of the French website and 69% were satisfied
- Awareness (38%) and satisfaction (71%) levels for French-language resources was highest for the Teaching and Learning Guide
- Online access was consistent with activities, with two-thirds new users and one-third returning visitors

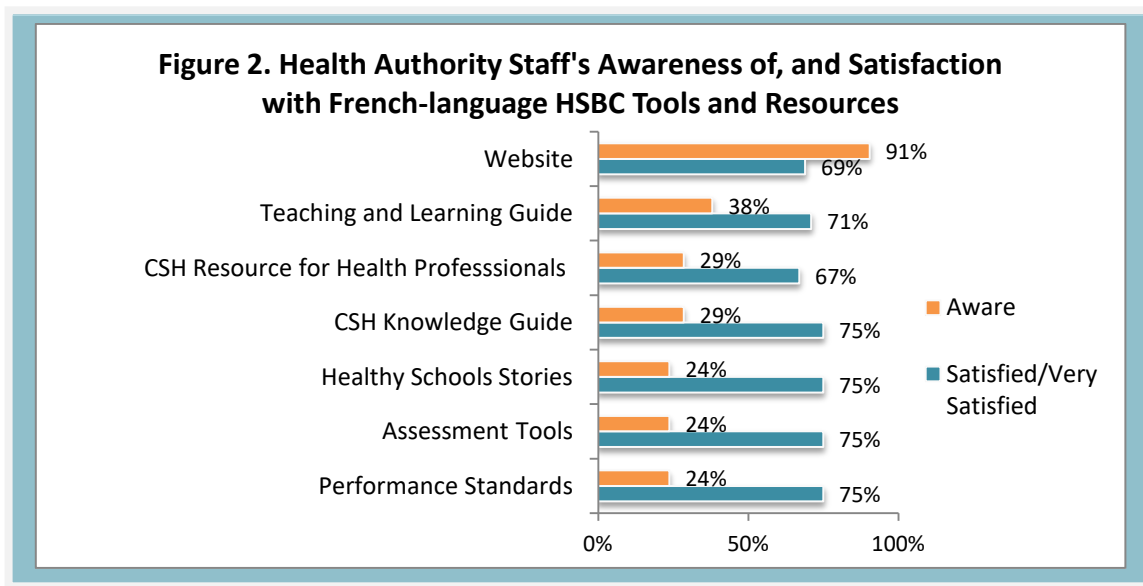
Almost two-thirds (32 of 51) of education respondents had heard about the HSBC website. Of those respondents, 19 (59%) knew that the website was available in French and **all** indicated they were either satisfied or very satisfied with it. Three-quarters of those who were aware of the *French-language website* indicated they found out about it through DASH BC or the HSBC Newsletter Other sources were teacher colleagues, an administrator, a brochure at a Pro-D day and on the school district website.

Awareness levels were lower for other French-language resources. Figure 1 lists awareness levels for the 7 available French-language resources and the satisfaction levels for respondents who used the



resources. Only 25% of 32 respondents were aware of the Resource Guide for Teaching and Learning; from 6% to 16% were aware of the remaining resources available in French. Respondents who were aware of these resources were asked to indicate which they had used and how satisfied they were with each resource. The number of users was small (2 to 11). All but one resource had been used by respondents. Users were most satisfied with the Healthy Living Performance Standards (86% of users), Resource Guide for Teaching and Learning the (82% of users), and the Action Guides (80% of users).

There were a couple of suggestions on how to improve the French-language resources: (a) providing a lexicon for the benefit of French Immersion students whose language skills may not be as well developed and (b) translating the resource *Friends/Amis pour la vie* and making it available in French for



secondary schools. Suggestions for improving access to the resources revolved around increased promotion, for example, making presentations in schools or making it possible to distribute the resources in schools.

A similar question was posed to health authority staff. Figure 2 shows that, while 91% of the 21 respondents were aware of the French-language version of the HSBC website, only 52% of those respondents used the website. Just over two-thirds of users (69%) were either satisfied or very satisfied with it. As was the case for educators, the number of users was very small (4 to 16). The Teaching and Learning Guide had the highest awareness level (38%). It was followed by the CSH Resource for Health Professionals and the CSH Knowledge Guide, both at 29%. Awareness levels for the remaining resources were at 24%. Satisfaction levels were high (67% to 75% of users).

Analysis of online access to resources within the period March 1, 2015 to January 31, 2017 reveals that there were 2,640 “sessions”, i.e. periods of time when users were actively engaged on the website. Further analysis shows that:

- 1782 (67.5%) of these sessions were by new users and one-third or 858 were returning visitors
- on average, there were 5 pages viewed during a session






- the average session duration was 4 minutes, 4 seconds
- the number of sessions peaked in line with project activities

Table 4. Website Access in Relation to Milestones					
New Users	April 12-13/15	October 25-31/15	Jan. 10-16/16	May 22-28/16 July 3-9/16	Aug. 21-27/16 Sept. 25-Oct. 1/16
	34	86	39	71 // 65	36 // 45
Sessions					
Milestones	French-language portal/resources available	Official Launch French-language portal/resources	Caravane Santé	RésoSanté health forum May 7, 2016	
	April 2015	Sept. 28/15	Feb. 29-Mar. 11/16		

The graph in Table 4 shows that there were ‘spikes’ in sessions starting in April 2015, when the French-language resources and portal first became available to the public. The greatest number of visits to the website was in October of 2015 (214 sessions), following the official launch of French-language access. Visits in May and July 2016 (175 sessions each) came next, following the end of outreach activities and *Caravane Santé* events (and a partner-organized provincial health forum in May during which *Caravane Santé* and the HSBC resources were promoted). Subsequently, total access and new user sessions decreased and returned to April 2015 levels.

For example, Table 4 shows the number of *new-user sessions* in sample one-week periods from April 2015 to January 2107. As expected, there are peaks in October 2015 and May and July 2016. There are fewer new user sessions in the selected one-week periods in April 2015 and January, August and September 2016 and they are in a similar range.

Table 5 lists the five most viewed French-language resources in order of page views and compares them to the same resources available in English. Although the absolute number of page views is significantly lower for the French, those numbers exceed what might be expected. The percentage of unique page views of each version (the number of visits during which the specified page was viewed at least once) was substantially the same for the French (70% to 80%) as for the English (78% to 85%).

Resource	Page Views <i>French Version</i>		Page views <i>English Version</i>	
	Total	Unique	Total	Unique
	360	273 (75.8%)	1965	1641 (83.5%)
	180	141 (78.3%)	755	644 (85.3%)
	177	142 (80.2%)	1552	1217 (78.4%)
	144	102 (70.8%)	1396	1137 (81.4%)
	121	90 (74.3%)	902	716 (79.3%)

It seems that educators and health authority staff were well aware of the French-language website and were quite satisfied with it. In both sectors, the awareness levels were much lower for the newly available French-language resources. Although the numbers of users was low, satisfaction levels were high. Website analytics showed that online access spiked in conjunction with implemented activities and the Initiative had attracted twice the number of new users as returning visitors. What’s more, the number of pages viewed and the average duration of sessions was substantial.

Focus Areas

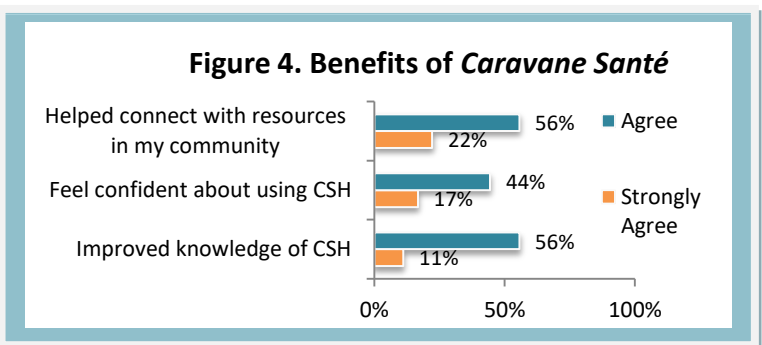
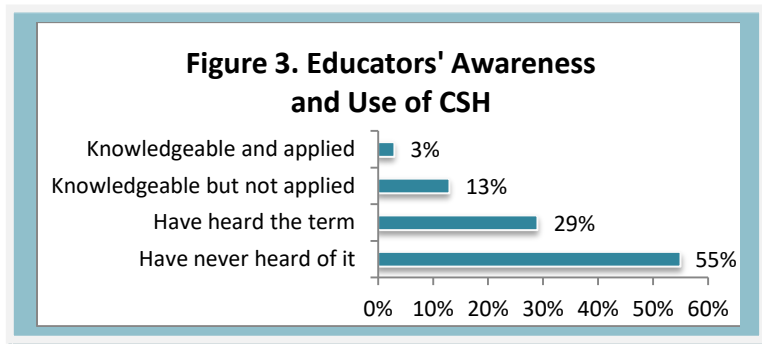
- Knowledge, implementation and benefits of CSH

Findings

- Only 3% of educators surveyed but 61% of *Caravane Santé* participants knew and were using CSH
- Up to 39% indicated their schools were stronger in their healthy schools approach
- 31% observed changes towards a healthy school environment as a result of the Francophone initiative
- 67% of *Caravane Santé* participants improved their knowledge of CSH, 61% improved their confidence, and 78% were connected to supportive community resources

Educators were asked to what extent they were aware of CSH. There were 38 respondents, 55% of whom indicated they had never heard of CSH (see Figure 3). While 29% had heard the term, and 13% were knowledgeable about it, only 3% were both knowledgeable about it and applied it in their work.

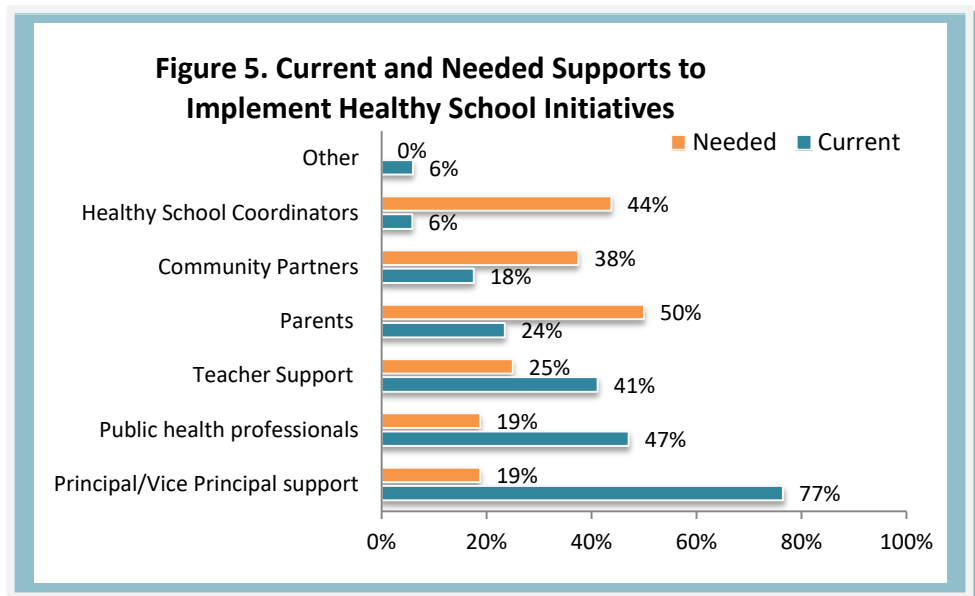
In the case of *Caravane Santé* participants, 11 (61%) of respondents were knowledgeable about CSH and applied it in their work prior to the event. One respondent was knowledgeable about CSH but had never applied it; two had heard the term but did not know much about it; and four had never heard about it. Figure 4 shows the benefits of the event: 2



respondents strongly agreed and 10 agreed (total 67%) that they had improved their knowledge of CSH. Three respondents strongly agreed, and 8 agreed (total 61%) that they now felt confident about using the CSH approach at their school. Four respondents strongly agreed and 10 agreed (total 78%) that the event helped them to connect with resources in their community to support healthy school initiatives.

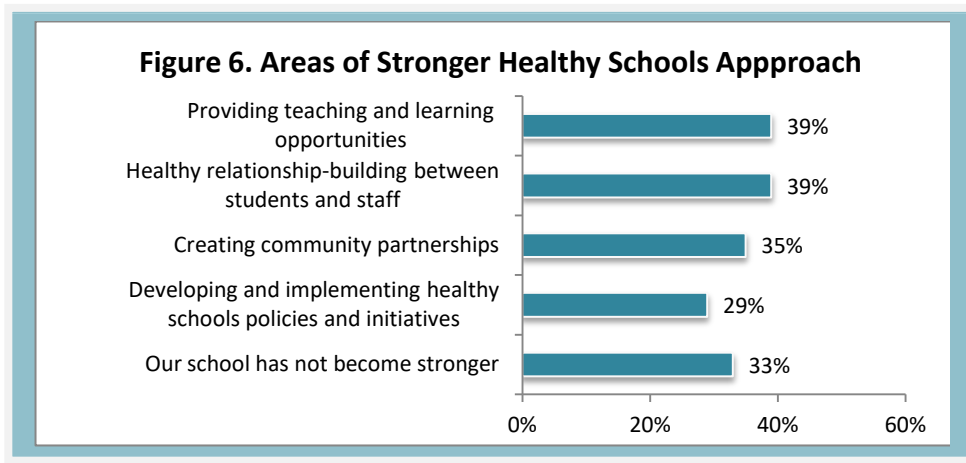
As seen in Figure 5, *Caravane Santé* participants most often identified their principal/vice-principal, public health professionals (such as a school nurse or dietitian) and teachers as current supports to implement Healthy Schools initiatives. They felt they needed more support mostly from parents, healthy school coordinators and community partners (e.g. breakfast program, health specialists such as dietitians, dental hygienist).

Educators were asked in what areas, if any, educators felt schools had become stronger in their healthy schools approach over the last year. The results are shown in Figure 6. Of the 49 respondents, 39% felt they had become stronger in providing



teaching and learning opportunities that build skills and knowledge related to health and well-being as well as building healthy relationship between students and staff. Creating community partnerships was the area identified by 35% while 29% felt they had a stronger approach to developing and implementing healthy schools policies and initiatives. One-third (33%) indicated that their school had not become stronger.

Educators also indicated the changes they had observed towards a healthy school environment, in the last year, as a result the Initiative’s activities. These included “one-stop” access to French-language healthy schools tools, learning



opportunities, and a stories map to support and showcase strong practice in Francophone and French Immersion BC schools . A total of 20 (31%) observed some or slight changes. The majority observed no change or thought it was too early to tell. Noted changes included:

- *Food and Nutrition* - participation in the BC Fruit and Vegetable Program, parents offering healthier snacks to children, greater will to eat healthy foods, PAC preparing healthy foods, healthy foods as fundraisers, and working with students on school garden
- *Healthy social environment* - student/teacher-organized events that brought students closer together with those of other schools; raised consciousness about health as everyone’s concern, working with students on self-regulation, and fewer behaviour problems
- *Physical activity* - parents dressing children more appropriately for outdoor play, more equipment for daily physical activity, support from the PAC for outdoor education, and school-based activity

“[With our grant], we implemented school-based strategies for physical activity such as biking at school, or healthy eating by allowing students to prepare their own nutritious food. We also bought seeds for our class gardens that the students tend.”

“A lot of discussion about the quality of food.”

“A lot of interest in [school] gardens.”

Educators noted a strengthened approach to healthy schools as well as changes toward a healthier school environment as a result of the Francophone Initiative. While few educators surveyed were aware of and using the CSH approach, almost two-thirds of *Caravane Santé* participants had prior knowledge and experience with the approach. Furthermore, the event improved their knowledge and confidence and connections to community resources. However, they felt they needed more implementation support from parents, healthy school coordinators and community partners.

Cross-Sector Partnerships

Description	Focus Areas
<p>Increasing partnerships and collaboration between the health, education, and community sectors to support the implementation of a CSH approach at the school and district/regional levels</p>	<ul style="list-style-type: none"> Health Authority supports for the CSH approach.
<p>Findings</p> <ul style="list-style-type: none"> Educators were most aware (35%) of the health authority’s provision of “tools, guides, resources” and these were the most often used form of support (33%) 91% of health authority staff reported providing some kind of support, most often resources (88%), but support was available predominantly in English (64%) Over half (57%) had shared French-language HSBC resources and 23% intended to continue doing so 37% felt they had the capacity (knowledge, time, skills, tools, etc.) to support Francophone and/or French Immersion schools and 40-50% felt they were limited by lack of time and of French-language tools and resources as well as language barriers 	

Figure 7 lists a range of health authority supports that could be available to Francophone or French Immersion schools to help them implement a CSH approach. Of the 40 responses from educators, 53% indicated no awareness of any of the listed supports. But 47% had some awareness, most notably the 35% who were aware of the provision of “tools, guides, resources”. About a quarter were aware of the provision of planning support (e.g. assisting with healthy schools action plans). Respondents were least aware of the availability of support for accessing and interpreting health data.

The 18 respondents who indicated some awareness of supports were asked which, if any, were used or accessed. Again, the most used support was “tools, guides and resources” (33%), followed by training, educational workshops or in-services (28%). Almost one-quarter (22%) indicated no use or access of any of the supports listed.

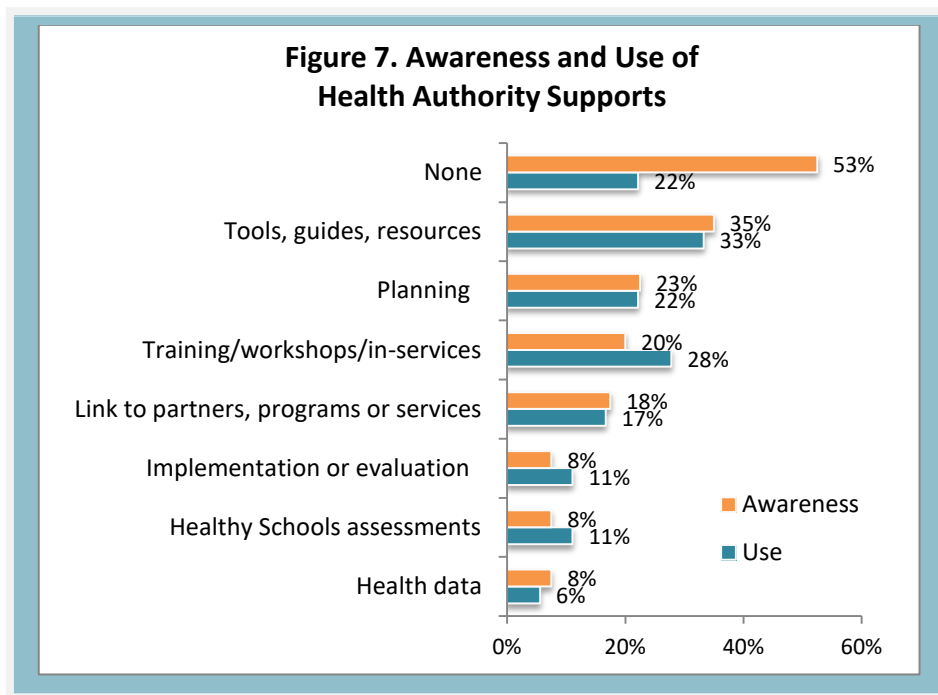
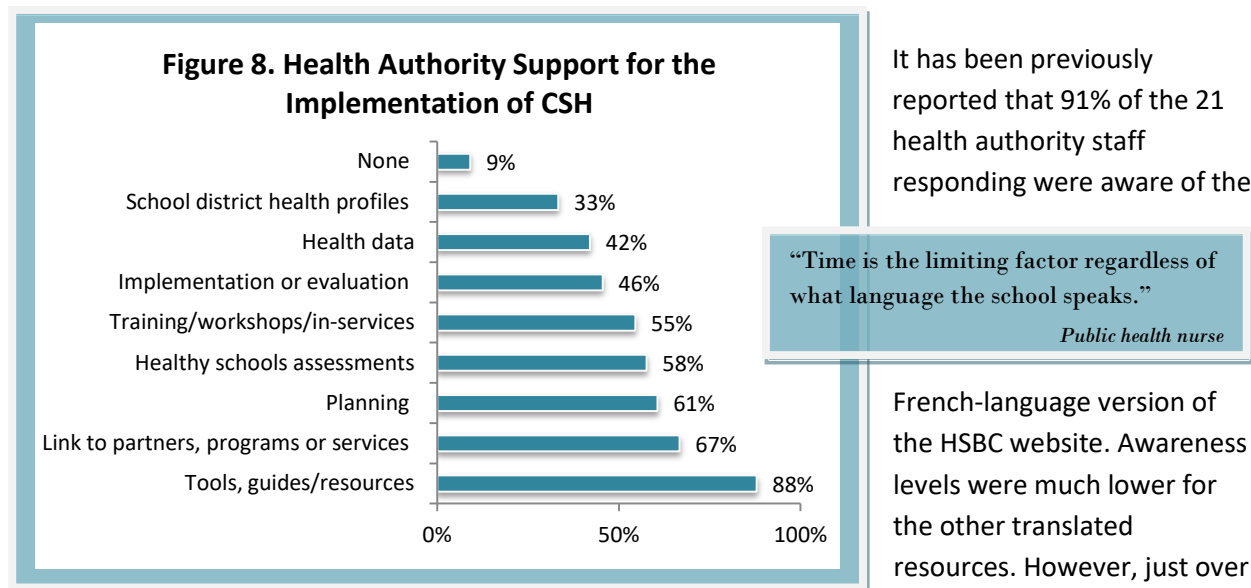


Figure 8 shows the responses of health authority staff with regards to the kind of support they might provide to schools. Of 33 respondents, 91% indicated that they provided some kind of support, most often tool, guides, or resources (88%). They also linked the schools to community partners, programs or services (67%) and 61% provided planning supports (e.g. assisting with healthy schools action plans, participating in healthy schools committees or teams). And over half provided training, educational workshops or in-services as well as assistance with healthy school assessments. Implementation or evaluation support (e.g. assisting with monitoring and evaluation of healthy schools initiatives) was provided by 46%. One-third or more provided or helped interpret health data and health profiles. This support was provided predominantly in English (64%) versus French (3%) but 33% provided support in both languages.

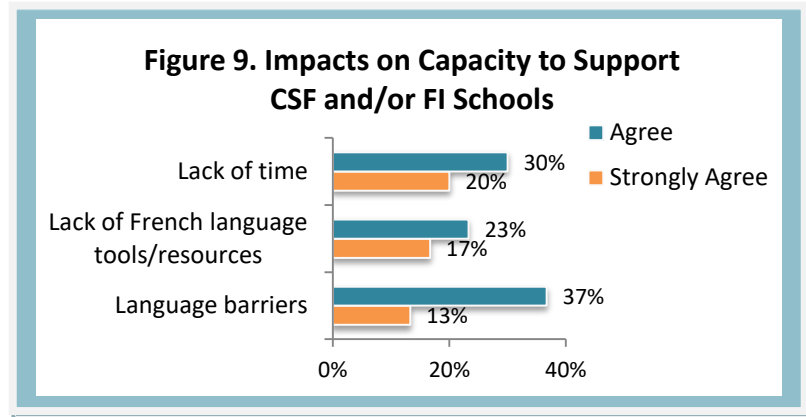


resources with Francophone or French Immersion schools. Asked if they intended to provide more French-language resources or services in the future, 53% did not know if they would be doing so and 23% expected that they would. Some of the latter indicated they intended to get the HSBC resources to French Immersion schools. Others felt it would depend on demands made by schools, or they wanted to learn more about appropriate resources for their schools, or perhaps their own toolkits would be useful in French.

When asked if they had the capacity (knowledge, time, skills, tools, etc.) to support Francophone and/or French Immersion schools, 37% of health authority respondents agreed or strongly agreed that this was the case and 16% disagreed or strongly disagreed. Almost one-half were neutral. A follow-up question revealed that 50% of these same respondents agreed or strongly agreed that lack of time impacted their capacity to support schools. Fewer (40%) agreed or strongly agreed that the lack of French-language tools and resources and language barriers had such an impact (see figure 9).

To be specific, respondents commented that they felt they were limited by lack of:

- fluency in French
- time / managerial priorities regardless of language
- awareness of the French-language HSBC resources
- requests for French-language materials
- Health authority toolkits availability in French
- contact with the CSF (SD 93)
- school champions for health related programs and goals



Almost half of the educators surveyed were aware of supports available from health authorities and a third of those used the tools, guides and resources provided by health authorities. Most health authorities were willing to provide a range of supports, most often resources, but these were available predominantly in English. Over half had shared the French-language HSBC resources and just over one-third felt they had the capacity to support Francophone and/or French Immersion schools. The main constraint was time.

Focus Areas

- Partnership between the health and education sectors

Findings

- About one-quarter (28%) of Health Authority staff said partnerships with Francophone/French Immersion schools had strengthened and reported varied benefits of such partnerships
- 3 of 4 staff who participated in *Caravane Santé* felt the event increased their ability to work with those schools
- Only 5% of educators felt that partnerships had become stronger as a result of the Francophone Initiative but 47% agreed that such support strengthened their ability to implement healthy school initiatives

Health authority staff were asked if partnerships with Francophone and/or French Immersion schools had strengthened over the last year. About one-quarter (28%) indicated they had while about one-third (35%) each thought the partnerships had remained the same or indicated they did not know. Examples of strengthened partnerships included the following:

- participation in *Caravane Santé*
- partnering with French Immersion schools to access a HSBC Inquiry grant
- a Francophone school vice-principal now attending healthy school meetings in the area

- an English-speaking public health nurse invited to the Welcome to Kindergarten event at a French Immersion school for the first time in many years

There were a couple of comments on the challenges of partnering: lack of time and the difficulty of connecting with the CSF when the district office is located outside of a health authority's area.

Health authority staff identified some of the benefits of greater partnering with the Francophone and/or French Immersion schools:

- exposing gaps and opportunities otherwise unseen; identifying specific needs for the school and being able to tailor resource to needs
- more HSBC projects
- a level playing field for access to information and resources
- more Francophone families interested in using HA services and more requests for health services and workshops in French in schools
- more discussion about healthy schools
- greater contact with community partners and information provided to those families unsure of programs/resources/support available through the health authorities.

Only four health authority staff surveyed had attended *Caravane Santé*. Three (75%) indicated participation had slightly or greatly increased their ability to work the Francophone and/or French Immersion schools. When asked if they had participated in other learning opportunities aimed at supporting health initiatives in Francophone and/or French Immersion schools, seven indicated they had. Examples included:

- a mental health forum for youth
- hand washing for kindergarten
- other topics such as nutrition, sexual health, empathy and respect, and substances

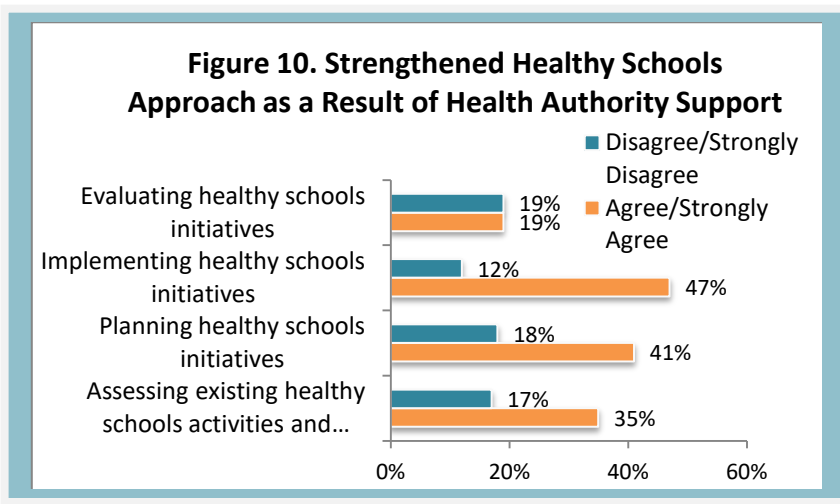
Over half of the 18 comments on how to improve support for healthy **French Immersion** schools mentioned the need for resources - more French-language resources and more promotion of the resources available. Other suggestions included:

Many families need support in French and finding French health resources in a timely manner can be challenging.

- more time
- for English-speaking staff, assistance with school communications in French
- opportunities to meet and work with those involved health education in French and English
- free French classes for health care providers
- involving French-speaking health professionals in the planning and implementation of French-language health resources

When asked how to improve support for healthy **Francophone** schools, the responses were fewer but substantially similar, with a stronger emphasis on networking and coordination, e.g. through a school district school health liaison committee as well as a health team in each school supported by the health authority.

Respondents' comments made it clear that the language of instruction is a hot topic in BC. While there is recognition of the need to support French-speaking school communities, public health staff who do not speak French may see that as the greatest obstacle to improving the situation. They also feel that children struggle enough already when having to discuss health-related issues with parents, peers, or health professionals without adding an additional layer in the form of a language barrier.



From the educators and administrators' perspective, only 5% felt that partnerships between the health authorities and their school had become stronger as a result of the Francophone Initiative. Almost three-quarters (73%) did not know, and 22% felt they had stayed the same. When asked to what extent support from health authorities makes them stronger in specific areas of

action on healthy schools, 47% of the 17 respondents agreed or strongly agreed that the support strengthened their ability to implement healthy school initiatives. As Figure 10 shows, similar responses were found with respect to planning the initiatives, with slightly fewer (35%) feeling the support strengthened their ability to assess existing healthy schools activities and opportunities. Fewer still (18%) felt the support strengthened their ability to evaluate healthy school initiatives.

There is much agreement between health authority staff and educators on the benefits of partnerships for the implementation of healthy school activities. And there is evidence of strengthened partnerships between health authorities and Francophone/French Immersion schools as a result of the Francophone Initiative. However, perspectives differ on the extent of improvement.

Discussion and Conclusion

The evaluation of the HSBC Francophone Initiative monitored:

- CSH knowledge and skill development
- awareness and use of the French-language healthy schools website and resources and
- partnership development (Francophone/French Immersion schools, CSF, health partners)



As surveying was not randomized and response was quite limited, the survey data should be interpreted with caution. At best, they give an indication of the implementation and impact of the project activities. Website analytics contribute some additional evidence of the impact of project activities.

The initiative provided access to much-needed French-language resources that are key to supporting healthy schools initiatives. Website analytics showed that traffic and the number of new users increased in line with the initiative's activities. The surveys showed that awareness of resources – particularly the website - is high among educators, and even higher among health authority staff, who are sharing them and prepared to continue doing so. DASH BC and the HSBC newsletter appear to be the primary sources of information about the resources. The French-language website, newsletter and Resource Guide for Teaching and Learning are the most used items and they also claim high satisfaction levels. These findings are consistent with those of the 2014-15 evaluation³ and support the conclusion that the website is important in connecting health and education staff to the tools they need to implement CSH in Francophone and French Immersion schools.

The data suggest that there is room for growth in the level of awareness and use of the newly available French-language resources. Promotion efforts successfully drove traffic to the HSBC website. Increased use of social media could enhance the promotion of, and improve access to resources.

Knowledge and use of CSH is currently low among educators in the target schools. However, they indicated a stronger healthy schools approach in all areas in the past year and observed changes toward a healthy environment as a result of the Francophone Initiative.

³ Healthy Schools BC. *Progress Report 2015 – Healthy Schools BC Evaluation*.

Caravane Santé successfully modeled the use of a CSH approach to healthy schools. It involved educators, students and health service providers directly to initiate partnerships in the targeted schools and set the stage for future collaborations. *Caravane Santé* participants felt they had improved their knowledge of CSH, that the event had helped them connect to resources in their community and to feel more confident about using CSH. Health authority staff cited participation in *Caravane Santé* as an example of strengthened partnerships with schools and three of the four who attended felt they had increased their ability to work with Francophone/French Immersion schools. The inventive approach to modeling CSH in launching the Francophone Initiative as well as planning and implementing *Caravane Santé* seems to have had the desired positive effect: the knowledge exchange and skill development opportunity improved the capacity to actualize CSH.

Caravane Santé produced mini-videos of individual events and a longer video of the entire project to capitalize on an opportunity to document a good story. Although the videos remain as a legacy and are used for promotional purposes, the reach could be enhanced by 'writing up' the *Caravane Santé* story, posting it on the website and sharing it through social media so it can be appreciated and replicated. In fact, the educators surveyed suggested a broader sharing of successful healthy schools stories. To increase the feeling of inclusion and broaden the perspective, it was suggested that the stories map could provide stories of Anglophone schools in French and vice-versa.

Caravane Santé participants currently rely heavily on their principal or vice-principal to support the implementation of healthy schools initiatives, and to a lesser extent, public health professionals and teacher colleagues. They feel they need more support in the form of healthy school coordinators, community partners, and parents. Educators surveyed had seen little strengthening of partnerships with health authorities but there was much agreement that such support would strengthen their ability to plan and implement healthy school initiatives.

One-third of health authority staff were willing and able to provide help with linking to community assets, planning, implementing and evaluating initiatives. However, the help was available predominantly in English; half of the educators surveyed were totally unaware of any such supports and less than a quarter knew of the full range of supports available from health authorities. There seems to be a need for greater connection and communication. In fact, health authority staff commented that, aside from time and priority constraints, they were limited in their capacity to support Francophone/French Immersion schools by their lack of fluency in French, lack of awareness of the French-language HSBC resources, and the lack of availability of their own toolkits in French. They saw

“In BC, public health nursing services are the first point of contact between the regional health authorities and school districts ... In principle, each school district might come to an agreement (formal or informal) to collaborate with the regional health authority and make use of these services. In practice, this is nearly impossible for School District 93, as it covers the entire province with its ... schools and would have to deal with five separate health authorities. There is also the question of language: health authority services are not generally available in French.”

Hélène Cameron, *School Health: Research into the use of a public health model to promote the health of children and youth in CSF schools (SD93)*. Final Report, April 23, 2012, pp. 4-5.

the benefits of greater partnering with target schools and suggested ways to improve it. They emphasized the importance of networking and coordination and mentioned the need for more French-language resources, more promotion of those already available, and the involvement of French-speaking health professionals in the planning and implementation of those resources.

Health authority staff seem willing and able to support schools and educators believe that support would help them implement healthy school initiatives. Comments from a single interview further reinforced the difficulties for the CSF related to managing relationships with five different health authorities, a situation that puts pressure on individual schools to take the initiative. As a result, the school principal becomes a key player in partnering with the regional health authority and building one-on-one connections gains importance. A network could improve connections and communication between the CSF, educators and the regional health authorities. It could also serve promotional ends in Francophone and French Immersion schools, engage more supporters of healthy schools initiatives in planning and implementing future French-language projects, and serve as a sounding board for new initiatives and learning opportunities. A good starting point is to build a directory of interested French-speaking educators, healthy school coordinators, and public health professionals.

The *Caravane Santé* experience underlined the importance of advance planning with key players in the education system. The direct outreach that preceded the project was invaluable for laying the groundwork. It would have been more powerful if there had been a healthy schools leader in each school, e.g. a designated staff person who is responsible for planning and implementing healthy school initiatives and staying in touch with an outreach coordinator. That is not currently the situation. Baseline data revealed that only about one-quarter of the educators surveyed indicated their schools had a healthy schools leader. And the outreach position put in place for this project was temporary.

Notwithstanding the success of *Caravane Santé*, comments indicate that it felt like a ‘one-off’ exercise. Participation and impact would be improved with more lead time. Planning starts in the Spring for the following school year. A year’s advance planning would allow for coaching of champions, more structure and involvement at the school level, and better organization which would culminate in a sustainable event with longer term effects.

As for outreach, communications with schools should not be planned at or around the timing of major school breaks. They should emphasize not only the availability of French-language resources but also other features of online access, namely the stories map and the programs and supports directory.

Recommendations

1. Continue to use a direct and targeted approach to engaging Francophone educators.

Coordination at the school and school district level and with health authority staff would enhance health-related projects in schools by ensuring continuity in the flow of information and in access to documented experiences and relevant resources. There is room for improvement in making and maintaining connections; retaining a French-speaking outreach coordinator would be a good start.

2. Share stories.

Translating healthy schools stories into English and French, including the *Caravane Santé* project, and sharing them through the stories map and social media would broaden the audience and expose it to a greater variety of experiences through those stories.

3. Continue to build and maintain connections between French-speaking health and education specialists.

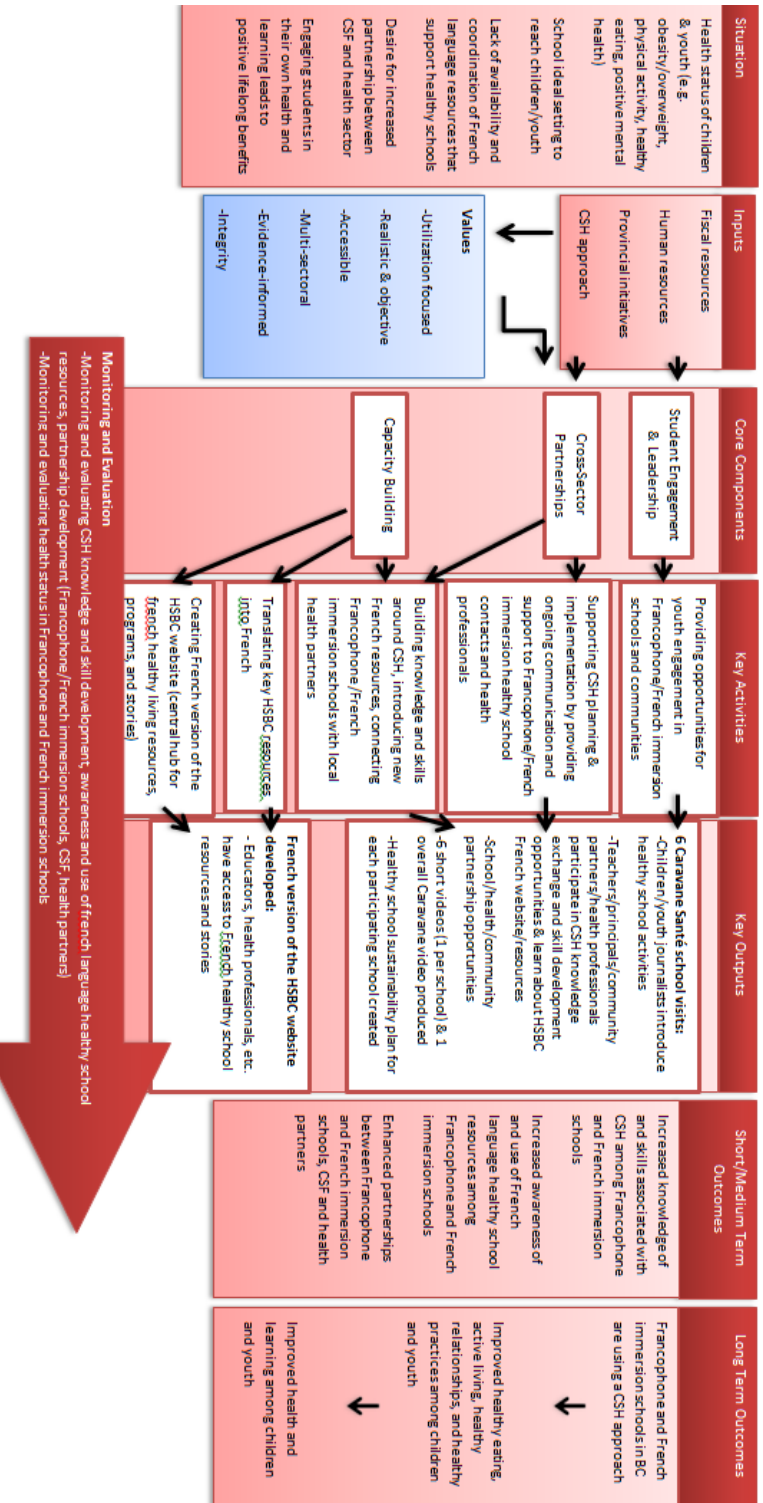
These connections would facilitate communication between the CSF, Francophone educators and the five regional health authorities and promote collaboration among the health and education specialists who work in or for Francophone and French Immersion schools.

4. Augment the availability and enhance the promotion of French-language healthy schools resources.

A broader range of healthy schools resources in French is recommended. An increase in the use of social media could enhance the promotion of, and improve access to such resources.

Healthy Schools BC (HSBC) Francophone Initiative Logic Model

- Goal:** Francophone and French immersion schools in BC promote student health through a Comprehensive School Health (CSH) approach
- Objectives:**
- 1) To increase knowledge of and skills associated with the CSH approach among Francophone and French immersion schools
 - 2) To increase awareness of and use of French language healthy school resources among Francophone and French immersion schools
 - 3) To enhance partnerships between Francophone/French immersion schools, Conseil scolaire Francophone (CSF), and health partners



Appendix

Caravane Santé Survey

Welcome to the Caravane Santé Feedback Survey!

Thank you for agreeing to take part in this important survey. Today we will be asking about your experience at Caravane Santé so that we can understand how we can improve healthy school learning opportunities and supports for Francophone and French immersion schools in the future. This survey will only take about 8-10 minutes. When you complete it, you will have the chance to enter your name into a prize draw for your school. All feedback will be kept confidential.

The Caravane Santé project is a component of the French Healthy Schools BC initiative developed by DASH BC, RésoSanté Colombie-Britannique and the Ministries of Health and Education, in collaboration with the Conseil Scolaire Francophone.

If you participated in Caravane Santé, please click "**Next**" to begin this brief survey.

1) First, we would like to know where you attended Caravane Santé.

- École Anne Hebert
- École de la Verendrye
- École des Grands-Cèdres
- École Alberni Elementary
- École des Sentiers-Alpins
- École l'Anse-au-Sable
- École Franco-Nord
- École Duchess Park

2) Next, we want to know what your role/position is.

- Teacher
- Principle/Vice Principal
- TOC
- Public Health Nurse/Dietician
- School Councillor
- Parent
- Other, please specify: _____

3) Overall, how satisfied or dissatisfied were you with the Caravane Santé program?

- Very satisfied
- Satisfied
- Neutral
- Dissatisfied
- Very dissatisfied

4) Before Caravane Santé, how knowledgeable were you about Comprehensive School Health?

- I was knowledgeable about it and applied it in my work
- I was knowledgeable about it, but have not applied it in my work
- I have heard the term, but don't know much about it
- I have never heard of it

5) Do you agree or disagree?

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
a. As a result of Caravane Santé, I have <i>improved my knowledge</i> of Comprehensive School Health					
b. As a result of Caravane Santé, I <i>feel confident</i> about using Comprehensive School Health at my school					
c. Caravane Santé helped me to <i>connect with resources</i> in my community to support healthy school initiatives					

6) What supports do you currently have to implement healthy school initiatives?

- Principal/Vice Principal support
- Public Health Professionals (E.g. School nurse, dietician, etc.)
- Healthy School Coordinators
- Teacher Support
- Community Partners. Please specify: _____
- Parents
- Other. Please specify: _____

7) What areas do you feel you need more support to implement healthy school initiatives?

- Principal/Vice Principal support
- Public Health Professionals (E.g. School nurse, dietician, etc.)
- Healthy School Coordinators
- Teacher Support
- Community Partners. Please specify: _____
- Parents
- Other. Please specify: _____

8) What was your favourite part of Caravane Santé?

9) What was your least favourite part of Caravane Santé?

10) How can we improve Caravane Santé?

11) Any other comments?

Thank-you for completing the survey!

Survey for Francophone and French Immersion Schools

Welcome! Thank you for agreeing to take part in this important survey. The purpose of this survey is to gather educators' and administrators' perspectives on:

- Francophone and French immersion healthy schools initiatives and resources, and
- what else is needed to create healthy Francophone and French immersion school communities

This survey should take you about 15 minutes to complete. When you complete it, you will have the chance to enter your name into a prize draw for your school. All feedback will be kept confidential. If you have any questions about the survey, please contact Rebecca Gibbons at rgibbons@dashbc.ca.

This initiative involves a partnership between DASH BC, RésoSanté Colombie-Britannique, Conseil scolaire francophone (SD 93), and the BC Ministry of Health, with additional support from the Francophone Affairs Program.

If you are an educator or administrator at a Francophone or French immersion school, please click **"Next"** to begin this brief survey.

**The overall Healthy Schools BC initiative aims to strengthen relationships across the health and education sectors, and foster more coordinated action to improve the educational and health outcomes of all BC students. The Francophone initiative (<http://fr.healthyschoolsbc.ca>) supports Francophone and French immersion schools by providing French healthy living resources and outreach.*

1) Which of the following best represents your position at your school?

- Teacher
- Principal / Vice-Principal
- School Counsellor
- Other: _____

2) I work for a:

- Francophone school
- French immersion school
- Other: _____

3) Does your school have a healthy schools leader? (i.e. a designated staff person who is responsible for planning and implementing healthy school initiatives)

- Yes
- No
- I don't know

4) What health authority is your school in?

- Northern
- Fraser
- Interior
- Vancouver Coastal
- Island

5) The Healthy Schools BC Francophone initiative encompasses a number of activities at the provincial and regional levels, including:

- Providing French Language tools, healthy school learning opportunities, and a stories map to support and showcase strong practice in Francophone and French immersion BC schools
- Creating “one-stop” access for all French healthy schools related information at <http://fr.healthyschoolsbc.ca/>

In the last year, what changes have you observed in your school as a result of these Healthy Schools BC Francophone initiative activities? (*e.g., support for teaching and learning, development of healthy school policies and initiatives, relationships between students and staff, partnerships with your health authority and the community*)

- I have observed great changes towards a healthy school environment at my school
- I have observed some changes towards a healthy school environment at my school
- I have observed slight changes towards a healthy school environment at my school
- I have observed a negative change towards a healthy school environment at my school
- I have not observed a change to the healthy school environment at my school
- It's too early for me to tell if there's been a change towards a healthy school environment at my school

6) Please describe the changes you have observed at your school.

7) In general, over the last year, in what areas has your school become stronger in its healthy schools approach? (Check all that apply.)

- Providing teaching and learning opportunities that build skills and knowledge related to health and well-being
- Developing and implementing healthy schools policies and initiatives
- Healthy relationship-building between students and staff
- Creating community partnerships
- Our school has not become stronger in its healthy schools approach

8) Have you heard about the Healthy Schools BC website?

- Yes
- No

8a) (If yes to 8) Did you know that the Healthy Schools BC website is available in French?

- Yes
- No

8b) (If yes to 8a) How did you find out about the Healthy Schools BC French website?

- DASH BC
- Principal
- Teacher colleagues
- Nurse
- Healthy Schools BC Newsletter
- Other: _____

9) The overall Healthy Schools BC initiative has several English and French resources. Some of the resources are pictured here to help you remember them. The next few questions are about all the Healthy Schools BC resources.



Which of the following Healthy Schools BC resources/tools are you aware of? (check all that apply) *Please only leave answers blank if you are not aware of the Healthy Schools BC resources/tools.*

- Healthy Schools BC Website/ Site web Healthy Schools BC
- Resource Guide for Teaching and Learning/Guide-ressource sur l'enseignement et l'apprentissage
- Healthy Schools BC Newsletter
- Healthy Living Performance Standards/Normes de rendement relatives à la vie saine
- Healthy Schools BC Learning Framework
- Healthy Schools Network
- Comprehensive School Health Four Pillar Activity
- Healthy Schools Assessment Tools/Outil d'évaluation sur la santé en milieu scolaire
- Comprehensive School Health Knowledge Guide/ Guide de connaissances sur l'AGSMS
- BC Community Health Atlas
- Healthy Schools Stories Map/Histoires vécues d'Écoles en santé
- Comprehensive School Health Resource for Health Professionals/ Guide-ressource sur l'AGSMS pour les professionnels de la santé
- Tools for Cross-Sectoral Partnerships (Cross-sectoral engagement rubric)
- Action Guides
- Other/Autres: _____

10) Of the tools that you are aware of, which Healthy Schools BC tools have you used? (check all that apply)

Tools / Resources	I have used it and was very satisfied	I have used it and was satisfied	I have used it and was dissatisfied	I have used it and was very dissatisfied	I have not used this tool
Site web Healthy Schools BC /Healthy Schools BC Website					
Resource Guide for Teaching and Learning/Guide-ressource sur l'enseignement et l'apprentissage					
Healthy Schools BC Newsletter					
Healthy Living Performance Standards/Normes de rendement relatives à la vie saine					
Healthy Schools BC Learning Framework					
Healthy Schools Network					
Comprehensive School Health Four Pillar Activity					
Healthy Schools Assessment Tools/Outil d'évaluation sur la santé en milieu scolaire					
Comprehensive School Health Knowledge Guide/ Guide de connaissances sur l'AGSMS					
BC Community Health Atlas					
Healthy Schools Stories Map/Histoires vécues d'Écoles en santé					
Comprehensive School Health Resource for Health Professionals/ Guide-ressource sur l'AGSMS pour les professionnels de la santé					
Tools for Cross-Sectoral Partnerships (Cross-sectoral engagement rubric)					
Action Guides					

11) How could the current Healthy Schools BC French resources/tools be improved?

12) What other resources/tools do you need to create a healthy school environment at your school?

13) What Healthy Schools BC learning opportunities (French or English) have you participated in or accessed? (check all that apply)

- Caravane Santé Staff Sessions
- Learning sessions with DASH BC
- DASH Healthy Schools Leadership Symposium
- Healthy Schools BC Webinars

- Healthy Schools Network meetings
- I don't know
- I have not participated in learning opportunities
- Other: _____

14) How have learning opportunities (French or English) increased your knowledge of 'Comprehensive School Health' or how to create healthy schools?

Learning opportunities	Greatly increased knowledge	Slightly increased knowledge	No new knowledge	I don't know
Caravane Santé Staff Sessions				
Learning sessions with DASH BC				
DASH Healthy Schools Leadership Symposium				
Healthy Schools BC Webinars				
Healthy Schools Network meetings				

15) How could Healthy Schools BC learning opportunities (e.g. meetings, webinars, etc.) be improved for Francophone and/or French Immersion schools?

16) Within the overall Healthy Schools BC initiative, health authorities provide a number of supports to help schools implement 'Comprehensive School Health' approaches (i.e. to help create a healthy school environment). The following questions are NOT about services such as immunizations, screening and school inspections.

Which of the following supports from your health authority are you aware of? (check all that apply)

- Training or educational workshops / in-services
- Providing tools, guides and resources
- Linking to community partners, programs or services
- Providing and interpreting health data
- Supporting healthy schools assessments
- Providing planning support (e.g. assisting with healthy schools action plans)
- Providing implementation or evaluation support (e.g. assisting with monitoring and evaluation of healthy schools initiatives)
- None of the above

17) Which of these supports from your health authority do you *use or access* at your school? (check all that apply)

- Training or educational workshops / in-services
- Providing tools, guides and resources
- Linking to community partners, programs or services
- Providing and interpreting health data
- Supporting healthy schools assessments
- Providing planning support (e.g. assisting with healthy schools action plans)
- Providing implementation or evaluation support (e.g. assisting with monitoring and evaluation of healthy schools initiatives)
- None of the above

18) To what extent do you feel that support from your health authority makes you stronger in:

	Strongly Agree	Agree	Disagree	Strongly Disagree
Assessing existing healthy schools activities and opportunities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Planning healthy schools initiatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implementing healthy schools initiatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluating healthy schools initiatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19) In general, are partnerships between your school and health authority stronger because of the Healthy Schools BC Francophone initiative?

- Yes, partnerships are stronger
- Partnerships have stayed the same
- Partnerships are worse
- I don't know

20) Please indicate your awareness of 'Comprehensive School Health'. (Comprehensive School Health is an approach for supporting improvements in students' educational outcomes while addressing school health in a planned, integrated and holistic way.)

- I am knowledgeable about it and apply it in my work
- I am knowledgeable about it, but haven't applied it in my work
- I have heard the term, but don't know much about it
- I have never heard of it

21) Please rate the extent to which healthy living initiatives at your school supported students to learn about 'Comprehensive School Health'.

- Did not learn about CSH
- Learned a little bit about CSH
- Learned a moderate amount about CSH
- Learned a great deal about CSH

22) Please describe how healthy living initiatives at your school are led.

- Student initiated, student-led, teacher supported
- Teacher initiated and led, students supported
- Teacher initiated, student led, teacher supported

23) Thank you for completing the survey. If you would like to enter the draw for a \$50 Indigo Gift Card for you school, please enter your email address (optional).

The survey is completely anonymous (i.e. none of your responses can be linked back to you). Your email address will only be used for the draw.

Survey for Health Authority Staff

Supporting Healthy Francophone and French immersion schools

Welcome! Thank you for agreeing to take part in this important survey. The information you provide will be used to improve efforts to support health initiatives in Francophone and French immersion schools in the future. The purpose of this survey is to gather the perspectives of health authority staff on:

Francophone and French immersion healthy schools supports and resources, partnerships between your health authority and Francophone/French immersion schools, and what else is needed to support healthy Francophone and French immersion school communities. This survey should take you about 10 minutes to complete. All feedback will be kept confidential. If you have any questions about the survey, please contact Rebecca Gibbons at rgibbons@dashbc.ca.

*This initiative involves a partnership between DASH BC, RésoSanté Colombie-Britannique, Conseil scolaire francophone (SD 93), and the BC Ministry of Health, with additional support from the Francophone Affairs Program.

If you are a health authority staff that supports French immersion and/or Francophone schools, please click "**Next**" to begin this brief survey.

**The overall Healthy Schools BC initiative aims to strengthen relationships across the health and education sectors, and foster more coordinated action to improve the educational and health outcomes of all BC students. The Francophone initiative (<http://fr.healthyschoolsbc.ca/>) supports Francophone and French immersion schools by providing French healthy living resources and outreach.*

1. Which health authority do you work for?

- Fraser Health Authority
- Interior Health Authority
- Island Health Authority
- Northern Health Authority
- Vancouver Coastal Health Authority

2. What is your position / title?

- Health Authority Healthy Schools BC Lead
- Medical Health Officer / Public Health Lead
- Community Nutritionist
- Registered Dietitian
- Public Health Manager
- Public Health Nurse
- Tobacco Reduction Coordinator
- Community Health Specialist
- Environmental Health Officer (EHO)
- Health Unit Aide/ Assistant
- Dental Hygienist, Assistant, etc.

- Public Health Administration
- Clinical Coordinator
- Speech- Language Pathologist
- Other, please specify... _____

3. What best describes your involvement with Francophone and/or French immersion schools?

- I work with Francophone schools in the Conseil scolaire Francophone (SD 93)
- I work with French immersion schools
- I work with both Francophone and French immersion schools
- Other, please specify... _____

4. What support(s) does your health authority provide to Francophone and/or French immersion schools to help them implement a Comprehensive School Health approach? (check all that apply)

- Training or educational workshops / in-services
- Providing tools, guides and resources
- Linking to community partners, programs or services
- Providing and interpreting health data
- Providing school district health profiles
- Supporting healthy schools assessments
- Providing planning support (e.g. assisting with healthy schools action plans, participating on healthy schools committees or teams)
- Providing implementation or evaluation support (e.g. assisting with monitoring and evaluation of healthy schools initiatives)
- None of the above

5. What language do you provide supports in?

- English
- French
- Combination of English and French
- Other, please specify... _____

6. Since January 2014, the Healthy Schools BC Francophone initiative has led a number of activities at the provincial and regional levels, including:

- Providing French Language tools, healthy school learning opportunities, and a stories map to support and showcase strong practice in Francophone and French immersion BC schools
- Creating “one-stop” access for all French healthy schools related information
at <http://fr.healthyschoolsbc.ca/>



The next few questions are about Healthy Schools BC French language tools and resources. Some of them are pictured here to help you remember them.

Which of the following Healthy Schools BC French language tools and resources are you aware of?
(Check all that apply). *Please only leave answers blank if you are not aware of the HSBC resources/tools.*

- Site web Healthy Schools BC (French version of Healthy Schools BC Website)
- Guide-ressource sur l'enseignement et l'apprentissage
- Normes de rendement relatives à la vie saine
- Outil d'évaluation sur la santé en milieu scolaire
- Guide de connaissances sur l'AGSMS
- Histoires vécues d'Écoles en santé
- Guide-ressource sur l'AGSMS pour les professionnels de la santé

7. Do you or your health authority have any plans to provide more resources/services in French than you do at this time? If yes, please explain.

- Yes: _____
- No
- I don't know

8. Of the tools that you are aware of, how satisfied are you with the Healthy Schools BC tools you have used?
(Check all that apply)

Tools / Resources	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	I have not used this tool
Site web Healthy Schools BC (French version of Healthy Schools BC Website)						
Guide-ressource sur l'enseignement et l'apprentissage						
Normes de rendement relatives à la vie saine						
Outil d'évaluation sur la santé en milieu scolaire						
Guide de connaissances sur l'AGSMS						
Histoires vécues d'Écoles en santé						
Guide-ressource sur l'AGSMS pour les professionnels de la santé						

9. Have you shared any of the above French language tools/resources with Francophone or French immersion schools?

- Yes
- No

10. Do you or your health authority have any plans to provide more resources/services in French than you do at this time? If yes, please describe:

- Yes: _____
- No
- I don't know

11. In general, do you agree or disagree that you have the capacity (e.g. knowledge, time, skills, tools, etc.) to support Francophone and/or French immersion schools?

- Strongly Agree
- Agree
- Neutral
- Disagree
- Strong Disagree

12. Please explain: _____

13. Do you agree or disagree that the following impact your capacity to support Francophone and/or French immersion schools?

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Language barriers					
Lack of French language tools/resources					
Lack of time					

14. Please explain: _____

15. In the last year, are partnerships between your health authority and Francophone and/or French immersion schools in your region stronger?

- Yes, partnerships are stronger
- Partnerships have stayed the same
- Partnerships are worse
- I don't know

(If selected "Yes, partnerships are stronger" or "Partnerships have stayed the same" or "I don't know"):

15a. Please provide examples of strengthened partnerships with Francophone and/or French immersion schools.

15b. What have been the benefits of greater partnering with the education sector (if at all)?

16. Did you participate in Health Caravane/Caravane Santé?

- Yes
- No

(If “yes” to 16):

16a. Did the Health Caravane/Caravane Santé increase your capacity to work in partnership with Francophone and/or French immersion schools?

- Greatly increased ability
- Slightly increased ability
- No new ability
- I don't know

17. Have you participated in any other learning opportunities aimed at supporting health initiatives in Francophone and/or French immersion schools? If yes, please specify.

- Yes: _____
- No

18. In your opinion, what else is needed to support healthy French immersion schools?

19. In your opinion, what else is needed to support healthy Francophone schools?

20. Is there anything else you'd like to add about your experiences working with Francophone and/or French immersion schools?

Please provide any final comments about the Healthy Schools BC Francophone initiative