

Health, Wellness, & Safety

What is Health and Wellness?

Health and Wellness refers to the basic physical, mental and emotional health needs of young people and their families and making sure they are recognized and addressed.¹ Health and education are linked. For students, unhealthy behaviors and educational challenges may influence each other, or have common root causes.²

Health and Wellness Research

Ten million children are at risk of school failure due to social, emotional and health issues.³

Unaddressed Health Needs: Uninsured children are seven times more likely to go without needed medical care than children who have health insurance. With chronic conditions such as asthma, diabetes, and tooth decay on the rise, poor and uninsured children suffer from the lack of preventive care that often leads to a loss of school time.

Community partners work with the school to provide access to affordable health, mental health, and social services for students and families. The best curriculum and instruction cannot benefit children who often miss school or who are sick or upset when they do attend. When children receive regular health care, eat well, and know they can find help with emotional and family concerns, they attend school more and are able to pay more attention to what they are learning.

Benefits of Health and Wellness in the school.

Comprehensive school-based health care helps improve attendance, behavior, and grades. In addition to promoting students' self confidence, mental health services contribute to better school performance and an improved school climate. Proper nutrition and physical exercise have a significant impact on student academic outcomes and participation in school.

Research also shows that students who use school-based health clinic services use fewer drugs, have better school attendance and lower dropout rates, fail fewer courses, and decrease disciplinary referrals by 95%.⁴

Grades improve significantly when basic vision and hearing problems are corrected. First and second graders suffering from vision problems were randomly assigned to control and treatment groups. Students receiving services had a 50% greater improvement rate than the control group in reading, an almost 100% greater improvement rate in math, and close to a 200% greater improvement rate in reading comprehension.⁵

References

¹ Blank, M. J., Melaville, A., & Shah, B. P. (2003). Making the difference: Research and practice in community schools. Washington, DC: Coalition for Community Schools.

http://www.communityschools.org/mtdhomepage_new.html#download

² Dille, J. (2009). Research Review: School-based Health Interventions and Academic Achievement.

<http://sboh.wa.gov/Pubs/docs/Health&AA.pdf>

³ Dryfoos, J. (1994). *Full-service schools: A revolution in health and social services for children, youth and families*. San Francisco, CA: Jossey-Bass.

⁴ Pearson, G., Jennings, J., and Norcross, J. (1999). A program of comprehensive school based mental health services in a large urban public school district: The Dallas model. *Adolescent Psychiatry: The Annals of the American Society for Adolescent Psychiatry*, 23. Hillsdale, NJ: The Analytic Press, Inc.

⁵ Harris, P. (2002, Summer). Learning-related visual problems in Baltimore City: A long-term program. *Journal of Optometric Vision Development*, 33, pp. 75.